

Effective Date: 9/2018
Revised: 12/2019
Reviewed: 9/2018, 12/2019, 4/2020, 1/2021, 1/2022, 2/2023, 11/2023, 01/2024, 4/2024, 3/2025
Pharmacy Scope: Medicaid
Medical Scope: Medicaid, Commercial, Medicare-Medicaid Plan (MMP)

BRIXADI (buprenorphine extended-release) INJECTION SUBLOCADE (buprenorphine extended-release) INJECTION

POLICY

I. SUMMARY OF EVIDENCE

Brixadi is indicated for the treatment of moderate to severe opioid use disorder (OUD) in patients who have initiated treatment with a single dose of a transmucosal buprenorphine product or who are already being treated with buprenorphine. Brixadi is available as both a once weekly formulation and as a once monthly formulation. Approval of Brixadi was based on data from several studies, including a 24-week, double-blind, Phase 3 trial in which it was compared with sublingual buprenorphine/naloxone. The trial included 428 adult patients with moderate to severe OUD. Brixadi met the primary endpoint of noninferiority to sublingual buprenorphine/naloxone, with responder rates of 16.9% in the Brixadi group and 14.0% in the sublingual buprenorphine/naloxone group. Adverse reactions commonly associated with Brixadi administration (in >5% of patients) were injection site pain, headache, constipation, nausea, injection site erythema, injection site pruritus, insomnia, and urinary tract infection.

Sublocade is indicated for the treatment of moderate to severe opioid use disorder in patients who have initiated treatment with a single dose of a transmucosal buprenorphine product or who are already being treated with buprenorphine. Sublocade is administered subcutaneously once a month. The safety and efficacy of Sublocade were evaluated in two clinical studies (one randomized controlled clinical trial and one open-label clinical trial) of 848 adults with a diagnosis of moderate-to-severe OUD who began treatment with buprenorphine/naloxone sublingual film (absorbed under the tongue). Once the dose was determined stable, patients were given Sublocade by injection. A response to medication-assisted treatments (MAT) was measured by urine drug screening and self-reporting of illicit opioid use during the six-month treatment period. Results indicated that Sublocade-treated patients had more weeks without positive urine tests or self-reports of opioid use, and a higher proportion of patients had no evidence of illicit opioid use throughout the treatment period, compared to the placebo group. The most common side effects from treatment with Sublocade include constipation, nausea, vomiting, headache, drowsiness, injection site pain, itching (pruritus) at the injection site and abnormal liver function tests. The safety and efficacy of Sublocade have not been established in children or adolescents less than 17 years of age.

II. CRITERIA FOR INITIAL APPROVAL

Moderate to severe opioid use disorder

Authorization of 6 months may be granted for treatment of moderate to severe opioid use disorder in members 18 years of age or older when all of the following criteria are met:

- A. Member is part of a complete treatment program that includes counseling and psychosocial support.

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- B. Member is not receiving other opioids during therapy with Sublocade OR Brixadi
- C. Rationale is provided to support the member's inability to continue to use oral formulations of buprenorphine.
- D. MMP members who have previously received this medication within the past 365 days are not subject to Step Therapy Requirements
- E. For Brixadi requests:
 - a. Member has initiated therapy with transmucosal buprenorphine at a dose of at least 4mg or member is transitioning from another buprenorphine-containing treatment for opioid use disorder and is stable with controlled withdrawal symptoms
 - b. The dose of Brixadi does not exceed 32mg weekly (1 syringe per week) or 128mg a month (1 syringe per month)
- F. For Sublocade requests:
 - a. Member has initiated treatment with a single dose of transmucosal buprenorphine (4mg) or who are already being treated with buprenorphine
 - b. The maintenance dose of Sublocade does not exceed 300mg a month

III. CONTINUATION OF THERAPY

Authorization of 12 months may be granted for treatment of moderate to severe opioid use disorder in patients when all of the following criteria are met:

- A. Member continues to meet the initial criteria in section II.
- B. Member is tolerating treatment.
- C. Member has documentation of a decrease in signs of opioid dependence relapse.

IV. DOSING/ ADMINISTRATION

Drug	Indication	Dose	Medical Benefit Maximum Dose (1 billable unit = 100mg for Sublocade 100mg inj, 300mg for Sublocade 300mg inj, 1mg for Brixadi)
Sublocade	Opiate use disorder	<p>Loading dose: 300 mg for the first two doses; second injection may be administered as early as one week and up to one month after the first injection.</p> <p>Maintenance dose: 100 mg monthly.</p> <p>Maximum dose is 300 mg per month.</p>	<p>1 unit for the first two doses (Q9992), followed by a maintenance dose of 1 unit monthly (Q9991)</p>

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Brixadi	Opiate use disorder	The dose of Brixadi must be individualized based on patient tolerability and/or efficacy.	128 units per 28 days															
		<u>Patients Switching from Transmucosal Buprenorphine-containing Products to Brixadi</u>																
		<table><tr><th>Daily dose of sublingual buprenorphine</th><th>Brixadi (weekly)</th><th>Brixadi (monthly)</th></tr><tr><td>≤6 mg</td><td>8mg</td><td>--</td></tr><tr><td>8-10mg</td><td>16mg</td><td>64mg</td></tr><tr><td>12-16mg</td><td>24mg</td><td>96mg</td></tr><tr><td>18-24mg</td><td>32mg</td><td>128mg</td></tr></table>		Daily dose of sublingual buprenorphine	Brixadi (weekly)	Brixadi (monthly)	≤6 mg	8mg	--	8-10mg	16mg	64mg	12-16mg	24mg	96mg	18-24mg	32mg	128mg
		Daily dose of sublingual buprenorphine		Brixadi (weekly)	Brixadi (monthly)													
		≤6 mg		8mg	--													
		8-10mg		16mg	64mg													
12-16mg	24mg	96mg																
18-24mg	32mg	128mg																
Brixadi (weekly) 8 mg, 16 mg, 24 mg, or 32 mg should be administered at 7-day intervals.																		
Brixadi (monthly) 64 mg, 96 mg, or 128 mg should be administered at 28-day intervals.																		
Maximum dose is 32 mg per week or 128 mg per 28 days.																		

Per §§ 42 CFR 422.101, this clinical medical policy only applies to INTEGRITY in the absence of National Coverage Determination (NCD) or Local Coverage Determination (LCD).

The following HCPCS/CPT codes are:

HCPCS/CPT Code	Description
Q9991	Injection, buprenorphine extended-release (Sublocade), less than or equal to 100 mg
Q9992	Injection, buprenorphine extended-release (Sublocade), greater than 100 mg
J0577	Injection, buprenorphine extended-release (brixadi), less than or equal to 7 days of therapy
J0578	Injection, buprenorphine extended-release (brixadi), greater than 7 days and up to 28 days of therapy

References:

1. Sublocade [prescribing information]. Indivior Inc. North Chesterfield, VA; February, 2025.
2. Brixadi [prescribing information]. Braeburn Inc. Plymouth Meeting, PA; January, 2025.

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3. Comer S, Cunningham C, Fishman M, et al. ASAM National Practice Guideline for the Use of Medications in the Treatment of Addiction Involving Opioid Use. American Society of Addiction Medicine, Copyright 2015. Available at: <https://www.asam.org/resources/guidelines-and-consensus-documents/npg>. Accessed on 1/24/2018.
1. ClinicalTrials.gov. U.S. National Institutes of Health. Available at: <https://clinicaltrials.gov/>. Accessed on 1/24/2018.
2. U.S. Food and Drug Administration. U.S. Department of Health and Human Services. Available at: <http://www.fda.gov/>. Accessed on 1/24/2018.
3. AMCP eDossier System. Dymaxium Healthcare Innovations, Ltd. Available at: <https://amcp.edossiers.com/>. Accessed on 1/24/2018.