

## Pain Assessment & Management

Review Criteria

ICSI protocol for prescribing Opioids

**MEDICA®**

### Question

### Dimension(s) of Care

- |   |                    |
|---|--------------------|
| 1. There is a PAIN ASSESSMENT TOOL used at every pain visit.  | Pain Screening     |
| 2. There is documentation that the PRESCRIPTION DRUG MONITORING PROGRAM was reviewed.   | Pain Screening     |
| 3. The member has as a current signed PAIN CONTRACT/agreement.  | Pain Screening     |
| 4. There is documentation of a REFERRAL to a pain specialist after 3 months of being on opioids or a plan for tapering off opioids. | Pain Screening     |
| 5. On the DOS listed, there is evidence the member is only prescribed ONE OPIOID at a time.   | Medication Therapy |
| 6. The member is NOT on a benzodiazepine, or muscle relaxant, and an opioid at the same time.                                       | Medication Therapy |
| 7. The member has a URINE TOX SCREEN done at least once a year.   | Medication Therapy |
| 8. If #7 is a YES, the urine tox screen is positive for opioid being prescribed.  | Medication Therapy |