



BUTALBITAL ANALGESICS

Allzital (butalbital-acetaminophen), butalbital-aspirin-caffeine, butalbital-aspirin-caffeine-codeine, butalbital-acetaminophen, butalbital-acetaminophen-caffeine, butalbital-acetaminophen-caffeine-codeine, Vanatol LQ (butalbital-acetaminophen-caffeine liquid oral solution)

Pre - PA Allowance

Quantity

- **For butalbital products with codeine only:** Maximum daily limit of any combination of opioid medications without a PA is 90 MME/day. Patients using dual therapy with opioid addiction treatment or methadone in the last 30 days will not be eligible for Pre-PA allowance.

AGE 12 YEARS OF AGE AND OLDER	Quantity Limits
Allzital (butalbital 25 mg / APAP 325 mg)	144 tabs per 90 days OR
Bupap (butalbital 50mg / APAP 300mg)	
Tencon (butalbital 50mg / APAP 325mg)	
Fioricet (butalbital 50mg / APAP 300mg / caffeine 40mg)	
Esgic (butalbital 50mg / APAP 325mg / caffeine 40mg)	
Esgic Plus (butalbital 50mg / APAP 500mg / caffeine 40mg)	
Vanatol LQ (butalbital / APAP / caffeine solution)	2,160 mL per 90 days

OR

AGE 18 YEARS OF AGE AND OLDER	Quantity Limits
Allzital (butalbital 25 mg / APAP 325 mg)	144 tabs per 90 days (1.6 units per day for codeine-containing products)
Bupap (butalbital 50mg / APAP 300mg)	
Tencon (butalbital 50mg / APAP 325mg)	
Fioricet (butalbital 50mg / APAP 300mg / caffeine 40mg)	
Esgic (butalbital 50mg / APAP 325mg / caffeine 40mg)	
Esgic Plus (butalbital 50mg / APAP 500mg / caffeine 40mg)	
Fiorinal (butalbital 50mg / aspirin 325mg / caffeine 40mg)	
Fiorinal with Codeine* (butalbital / aspirin / caffeine / codeine)	
Fioricet with Codeine* (butalbital / APAP/ caffeine / codeine)	
Vanatol LQ (butalbital / APAP/ caffeine solution)	2,160 mL per 90 days

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Prior-Approval Requirements

Diagnosis

Patient must have the following:

1. Tension or muscle contraction headaches

Allzital, butalbital-acetaminophen and butalbital-acetaminophen-caffeine

AND ALL of the following:

- a. 12 years of age or older
- b. **NO** previous or current liver function concerns or cirrhosis
- c. Prescriber agrees to counsel regarding concurrent use of a product(s) containing acetaminophen

Vanatol LQ

AND ALL of the following:

- a. 12 years of age or older
- b. Inadequate response to generic butalbital-containing products
- c. **NO** previous or current liver function concerns or cirrhosis
- d. Prescriber agrees to counsel regarding concurrent use of a product(s) containing acetaminophen

Butalbital-acetaminophen-caffeine-codeine, butalbital-aspirin-caffeine, and butalbital-aspirin-caffeine-codeine

AND ALL of the following:

- a. 18 years of age or older
- b. **NO** previous or current liver function concerns or cirrhosis
- c. If acetaminophen containing product:
 - i. Prescriber agrees to counsel regarding concurrent use of a product(s) containing acetaminophen
- d. If codeine containing product:
 - i. **NO** dual therapy with an opioid addiction therapy or methadone



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- ii. Prescriber agrees to evaluate patient's response to therapy before changing dose or adding additional opioid medications
- iii. Prescriber agrees to participate in the Opioid Analgesic REMS program and to monitor for abuse, misuse, addiction, and overdose and discontinue if necessary
(<https://opioidanalgesicrems.com>)
- iv. **NO** cumulative morphine milligram equivalent (MME) over 200 MME/day
(e.g., <https://www.mdcalc.com/morphine-milligram-equivalents-mme-calculator>,
https://www.cdc.gov/drugoverdose/pdf/calculating_total_daily_dose-a.pdf,
<https://www.cdc.gov/opioids/providers/prescribing/app.html>)

Prior - Approval Limits

Quantity

- **For butalbital products with codeine only:** Maximum daily limit of any combination of opioid medications with a PA is 200 MME/day.

Medication / Strength	Quantity Limit
Allzital (butalbital 25 mg / APAP 325 mg)	288 tabs per 90 days OR
Bupap (butalbital 50mg / APAP 300mg)	216 tabs per 90 days OR
Tencon (butalbital 50mg / APAP 325mg)	216 tabs per 90 days OR
Fioricet (butalbital 50mg / APAP 300mg / caffeine 40mg)	216 tabs per 90 days OR
Esgic (butalbital 50mg / APAP 325mg / caffeine 40mg)	216 tabs per 90 days OR
Esgic Plus (butalbital 50mg / APAP 500mg / caffeine 40mg)	216 tabs per 90 days OR
Fiorinal (butalbital 50mg / aspirin 325mg / caffeine 40mg)	216 tabs per 90 days OR
Vanatol LQ (butalbital / APAP / caffeine solution)	3,240 mL per 90 days

Capsules ≤ 200 MME/day

Medication / Strength	Morphine Milligram Equivalent (MME) <u>per unit</u>
Fiorinal with Codeine* (butalbital / aspirin / caffeine / codeine)	4.5 MME
Fioricet with Codeine* (butalbital / APAP / caffeine / codeine)	4.5 MME



**BlueCross
BlueShield**

Federal Employee Program.

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***For butalbital products with codeine only:** Maximum daily limit of any combination of opioid medications with a PA is 200 MME/day.

Duration 6 months

Prior – Approval *Renewal* Requirements

Same as above

Prior – Approval *Renewal* Limits

Same as above