

Department of Origin:	Date Approved:
Pharmacy	07/26/2023
Approved by:	Effective Date:
Chief Medical Officer	07/26/2023
Pharmacy Clinical Policy Document:	Replaces Effective Policy Dated:
Injectable Medications	11/22/2022
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PURPOSE:

The intent of this Injectable Medications Pharmacy Clinical Policy is to provide coverage guidelines.

Please refer to the member's benefit document for specific information. To the extent there is any inconsistency between this policy and the terms of the member's benefit plan or certificate of coverage, the terms of the member's benefit plan document will govern.

POLICY:

Benefits must be available for health care services. Health care services must be ordered by a provider. Health care services must be medically necessary, applicable conservative treatments must have been tried, and the most cost-effective alternative must be requested for coverage consideration.

A trial of injectable medication therapy may be waived for members who meet the *DSM* blood-injection-injury (ie, needle phobia) diagnostic criteria and when there is a failure of self-management and psychotherapy.

COVERAGE:

- I. Documentation from a *mental health professional*, that the member's clinical condition meets the diagnostic criteria for *DSM* blood-injection-injury (ie, needle phobia) diagnostic criteria.
- II. The marked fear or anxiety of blood draws or injections persists, despite both of the following: A and B
 - A. Attempts at self-management, such as but not limited to applied muscle tension; and
 - B. An adequate trial of psychotherapy, eg, *cognitive behavioral therapy* (CBT) including *exposure therapy* .

DEFINITIONS:

Applied muscle tension:

A behavioral technique that involves repeated tensing and releasing of upper-and lower-body muscles in 5-10 second intervals while maintaining steady, regular breathing. This repeated tensing prevents the rapid drop in blood pressure that occurs during vasovagal reactions.

Cognitive behavioral therapy:

A common type of psychotherapy where the patient works with a mental health provider in a structured way, attending a limited number of sessions. CBT helps in becoming aware of inaccurate or negative thinking in order to view challenging situations more clearly and respond to them in a more effective way.

DSM:

The most current edition of the American Psychiatric Association Diagnostic and Statistical Manual of Mental Health Disorders

Exposure therapy:

In this form of therapy, a mental health provider creates a safe environment in which to "expose" individuals to the things they fear and avoid. The exposure to the feared objects, activities or situations in a safe environment helps reduce fear and decrease avoidance Mental Health Professional:



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Licensed Independent Clinical Social Worker, Licensed Psychologist, Psychiatric Advanced Practice Provider,
Psychiatrist.

BACKGROUND:

Fear of needles exists on a continuum ranging from none or very little to severe needle fears that cause significant distress and impairment (eg, noncompliance with medical care resulting in adverse health outcomes). Individuals who have been diagnosed with blood-injection-injury phobia (ie, the type of specific phobia that needle phobia falls within in the Diagnostic and Statistical Manual of Mental Disorders—5th Edition) are at the severe end of the needle fear spectrum.

Interventions that hold particular promise for reducing needle fears, as well as associated responses such as fainting, in this highly fearful or phobic group of individuals are exposure and applied tension (ie, muscle tension+exposure). Exposure is a psychological intervention that is considered an efficacious treatment for specific phobias in general and may be delivered in various formats (eg, in vivo, imaginal, single session, multiple session). Exposure-based therapy involves a hierarchical presentation of the feared stimulus. For needle procedures, aspects of needle procedures would be encountered in a hierarchical manner of ascending fear (eg, sitting in the waiting room, to seeing a syringe without a needle, to seeing a syringe with a needle, to holding a syringe with a needle, to holding the tip of a needle against one's arm, and culminating in receipt of an injection). Exposure-based therapy also frequently includes instruction, participant modeling, and targeting of catastrophic thoughts (ie, cognitive distortions or thinking errors, such as magnifying the threat of the needle) made by the individual.

REFERENCES:

- 1. McMurty CM, Noel M, Taddio A, Antony M, Asmundson GJG, Riddell RP, et al. Interventions for Individuals with High Levels of Needle Fear. Systematic Review of Randomized Controlled Trials and Quasi-Randomized Controlled Trials. *Clin J Pain* 2015 Oct; 31(Suppl 10): S109–S123.
- 2. American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA, American Psychiatric Association, 2013.
- 3. Medical Management Process Manual UR015 Use of Medical Policy and Criteria
- 4. Clinical Policy: MP/C009 Coverage Determination Guidelines
- 5. Pharmacy Clinical Policy: PP/F001 Formulary Exceptions
- 6. Pharmacy Clinical Policy: PP/Q003 Quantity Limits
- 7. Pharmacy Clinical Policy: PP/T002 Therapeutic Equivalence

DOCUMENT HISTORY:

Created Date: 08/06/19	
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- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
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If you need these services, contact a Grievance Specialist.

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Grievance Specialist PreferredOne Community Health Plan PO Box 59052 Minneapolis, MN 55459-0052 Phone: 1.800.940.5049 (TTY: 763.847.4013) Fax: 763.847.4010

customerservice@preferredone.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, a Grievance Specialist is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201 1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

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Grievance Specialist PreferredOne Insurance Company PO Box 59212 Minneapolis, MN 55459-0212 Phone: 1.800.940.5049 (TTY: 763.847.4013) Fax: 763.847.4010 customerservice@preferredone.com

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