

<b>Department of Origin:</b> Pharmacy	<b>Date Approved:</b> 07/26/2023
<b>Approved by:</b> Chief Medical Officer	<b>Effective Date:</b> 07/26/2023
<b>Pharmacy Clinical Policy Document:</b> Injectable Medications	<b>Replaces Effective Policy Dated:</b> 11/22/2022
<b>Reference #:</b> PP/I001	<b>Page:</b> 1 of 2

**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:

<b>Department of Origin:</b> Pharmacy	<b>Date Approved:</b> 07/26/2023
<b>Approved by:</b> Chief Medical Officer	<b>Effective Date:</b> 07/26/2023
<b>Pharmacy Clinical Policy Document:</b> Injectable Medications	<b>Replaces Effective Policy Dated:</b> 11/22/2022
<b>Reference #:</b> PP/I001	<b>Page:</b> 2 of 2

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:**

<b>Created Date:</b> 08/06/19
<b>Reviewed Date:</b> 07/27/20, 08/05/21, 8/5/2022, 7/20/2023
<b>Revised Date:</b>

# Nondiscrimination & Language Access Policy



Discrimination is Against the Law. Aspirus Health Plan, Inc. complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex, (including sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation, gender identity and sex stereotypes), consistent with the scope of sex discrimination described at 45 CFR § 92.101(a)(2). Aspirus Health Plan, Inc. does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

Aspirus Health Plan, Inc.:

Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:

- Qualified sign language interpreters.
- Written information in other formats (large print, audio, accessible electronic formats, other formats).

Provides free language assistance services to people whose primary language is not English, which may include:

- Qualified interpreters.
- Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact the Nondiscrimination Grievance Coordinator at the address, phone number, fax number, or email address below.

If you believe that Aspirus Health Plan, Inc. has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Nondiscrimination Grievance Coordinator  
Aspirus Health Plan, Inc.  
PO Box 1890  
Southampton, PA 18966-9998  
Phone: 1-866-631-5404 (TTY: 711)  
Fax: 763-847-4010  
Email: customerservice@aspirushealthplan.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Nondiscrimination Grievance Coordinator 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>. This notice is available at Aspirus Health Plan, Inc.'s website: [https://aspirushealthplan.com/webdocs/70021-AHP-NonDiscrim\\_Lang-Assist-Notice.pdf](https://aspirushealthplan.com/webdocs/70021-AHP-NonDiscrim_Lang-Assist-Notice.pdf).

## Language Assistance Services

**Albanian:** KUJDES: Nëse flitmi shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-800-332-6501 (TTY: 711).

**Arabic:** تنبيه: إذا كنت تتحدث اللغة العربية، فإن خدمات المساعدة اللغوية متاحة لك مجاناً. اتصل بن اعلى رقم الهاتف 1-800-332-6501 (رقم هاتف الصم والبك : 711)

**French:** ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-332-6501 (ATS: 711).

**German:** ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-800-332-6501 (TTY: 711).

**Hindi:** या नद : य द आप िहंदी बोलते ह तो आपके िलए मु त म भाषा सहायता सेवाएं उपल थ ह 1-800-332-6501 (TTY: 711) पर कॉल कर ।

**Hmong:** LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu rau 1-800-332-6501 (TTY: 711).

**Korean:** 주의: 한국어를 사용하지는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-332-6501 (TTY: 711) 번으로 전화해 주십시오.

**Polish:** UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-332-6501 (TTY: 711).

**Russian:** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-332-6501 (телетайп: 711).

**Spanish:** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-332-6501 (TTY: 711).

**Tagalog:** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nangwalang bayad. Tumawag sa 1-800-332-6501 (TTY: 711).

**Traditional Chinese:** 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-332-6501 (TTY: 711)

**Vietnamese:** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-332-6501 (TTY: 711).

**Pennsylvania Dutch:** Wann du Deitsch (Pennsylvania German / Dutch) schwetzsch, kannscht du mitaus Koschte ebbergricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 1-800-332-6501 (TTY: 711).

**Lao:** ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ ໂດຍບໍ່ເສັຽຄ່າ, ຈະມີມີ້ພ້ອມໃຫ້ທ່ານ. ໂທສ 1-800-332-6501 (TTY: 711).