Community Plan of Michigan

Quick reference guide

Opioid overutilization prevention and opioid use disorder treatment programs for UnitedHealthcare Community Plan of Michigan

In response to the U.S. opioid epidemic, we've developed programs to help our members receive the care and treatment they need in safe and effective ways. We've based our measures on the Centers for Disease Control and Prevention's (CDC) opioid treatment guidelines to help prevent overuse of short-acting and long-acting opioid medications. Please use this quick reference guide to learn more about what we offer.

Concurrent Drug Utilization Review (cDUR) programs

The cDUR program uses the pharmacy claims processing system to screen all prescriptions at the point-of-service and checks for possible inappropriate drug prescribing and utilization, as well as potentially dangerous medical implications or drug interactions. The program includes communication to the dispensing pharmacy at point-of-service through claims edits and messaging to the dispensing pharmacy at point-of-service. The pharmacist will need to address the clinical situation at the point-of-sale before entering appropriate National Council for Prescription Drug Programs (NCPDP) codes to receive an approved claim, unless otherwise stated below.

THERDOSE Acetaminophen	 Combination opioids plus acetaminophen (APAP) limit Prevents doses of APAP greater than 4 grams per day 	
Drug Interaction – Opioids and Carisoprodol	 Point-of-sale identification of concurrent opioid and carisoprodol utilization 	
Duplicate Therapy – Short-Acting Opioids (SAOs)	Alerts to concurrent use of multiple SAOs	
Duplicate Therapy – Long-Acting Opioids (LAOs)	Alerts to concurrent use of multiple LAOs	
Drug-Inferred Health State – Opioids and Prenatal Vitamins	 Enhanced point-of-sale messaging for concurrent use of opioids and prenatal vitamins This custom message does not require the pharmacist to enter appropriate NCPDP codes to receive an approved claim 	



Retrospective Drug Utilization Review (rDUR) programs

The rDUR program analyzes claims on a daily basis and sends communications to prescribers.

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Abused Medications DUR Program	 Daily identification of members who are getting multiple opioid prescriptions from multiple prescribers and/or filling at multiple pharmacies Also identifies members with chronic early refill attempts, overlapping LAOs, overlapping SAOs, high daily doses of opioids, a diagnosis of opioid overdose with an opioid fill, overlapping opioid and MAT medications, overlapping opioid, muscle relaxant and benzodiazepine and overlapping opioid and opioid potentiator Patient-specific information sent to all prescribers with medication fill history for the last 4 months 	
Pharmacy Lock-In Program	 Pharmacy lock-in programs vary by state; however, all include filling of opioids by multiple prescribers at multiple pharmacies as an inclusion criterion for the program Members chosen for the program will be locked into 1 pharmacy for all of their medications for a period of 2 years 	
Utilization Management (UM) pro	grams	
UM programs promote appropriate use, he	elp reduce costs and, ultimately, help improve the health status of members.	
New to therapy SAO edit	 Point-of-sale limits for members who are opioid naïve (no opioid claims in the last 60 days) Point-of-sale limits with a maximum of a 7-day supply of a SAO Prior authorization required if exceeds this quantity for opioid-naïve members Members identified as having cancer, end-of-life or sickle cell diagnoses are excluded from the edit at the point of sale 	
Cumulative 90 Morphine Milligram Equivalents (MME) Limit	 Point-of-sale dosage limit for all opioid products up to 90 MME Prevents cumulative opioid doses above the preset threshold from processing Prior authorization required for doses above the preset threshold 	
Transmucosal Fentanyl Product Prior Authorization	Prior authorization requires documentation of pain due to cancer and patient is already receiving opioids	
Overdose Prevention (Naloxone)	No prior authorization is required for preferred naloxone products (generic naloxone injection, Narcan® nasal spray)	

(generic naloxone injection, Narcan® nasal spray)



Evidence-Based Prescribing programs

Focuses on outreach to prescribers identified as outliers.

Fraud/Waste/Abuse Evaluation	 Retrospective controlled substance claims analysis Identifies outlier opioid prescribers 		
Miscellaneous			
Miscellaneous – Drug Enforcement Agency (DEA) License Edit	Verifies DEA is active and matches scheduled medication in the claim		
Miscellaneous – Refill-Too-Soon Threshold	 Increases the refill-too-soon threshold to 90% on opioids and other controlled substances CII-V 		

Abbreviations				
APAP	Acetaminophen	MME	Morphine Milligram Equivalent	
CDC	Centers for Disease Control and Prevention	PA	Prior Authorization	
cDUR	Concurrent Drug Utilization Review	rDUR	Retrospective Drug Utilization Review	
DEA	Drug Enforcement Agency	SAOs	Short-Acting Opioids	
LAOs	Long-Acting Opioids	UM	Utilization Management	

We're here to help

For more information, please call Provider Services at 888-362-3368.

How to submit prior authorizations requests:

- Online: To access the tool, sign in to Link by going to UHCprovider.com and clicking on the Link button in the top
 right-hand corner. Then, select the Prior Authorization and Notification tile from you Link dashboard. If you're a new
 user, click the New User button instead.
- Phone: Call 800-310-6826
- Fax: Fax your completed form to 866-940-7328
- Pharmacy Prior Authorization forms are available at UHCprovider.com > Menu > Health Plans by State –
 choose your state > Medicaid (Community Plan) > Pharmacy Resources and Physician Administered Drugs >
 Pharmacy Prior Authorization

