



Opioid Overutilization Prevention and Opioid Use Disorder Treatment Programs for UnitedHealthcare Commercial Plans

Quick Reference Guide

UnitedHealthcare is confronting the opioid epidemic from all angles. We're joining with care providers and communities to prevent opioid misuse and addiction, deliver tailored treatment to those who are addicted, and support long-term recovery. An important part of treating some pain and medical conditions, opioids come with a high risk of dependence. Through touch points, we help ensure safe and appropriate opioid use right from the start. To help with this effort, we developed the following pharmacy-based programs.^{†*}

Concurrent Drug Utilization Review (cDUR) and Point-of-Sale 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.

THERDOSE Acetaminophen	<ul style="list-style-type: none"> • Combination opioids plus acetaminophen (APAP) limit • Point-of-sale quantity limit • Prevents doses of APAP greater than 4 grams per day
Drug-Drug Interaction – Opioids and Drugs to Treat Opioid Use Disorder (OUD)	<ul style="list-style-type: none"> • Point-of-sale alert for concurrent use of opioids and drugs to treat OUD
Duplicate Therapy – Short-Acting Opioids (SAOs)	<ul style="list-style-type: none"> • Identify duplicate therapy with SAOs • Point-of-sale duplication of therapy edit • Alerts to concurrent use of multiple SAOs
Duplicate Therapy – Long-Acting Opioids (LAOs)	<ul style="list-style-type: none"> • Identify duplicate therapy with LAOs • Point-of-sale duplication of therapy edit • Alerts to concurrent use of multiple LAOs
Opioids and Pregnancy	<ul style="list-style-type: none"> • Enhanced point-of-sale alert for use of opioids during pregnancy, such as concurrent use of opioids and prenatal vitamins
Opioids and Benzodiazepines (higher risk for overdose)	<ul style="list-style-type: none"> • Point-of-sale alert for concurrent use of opioids and benzodiazepines
Drug Enforcement Agency (DEA) License Edit	<ul style="list-style-type: none"> • Verifies DEA is active and matches scheduled medication in the claim
Refill-Too-Soon Threshold	<ul style="list-style-type: none"> • Increases the refill-too-soon threshold from 75 to 90 percent utilization for opioids and other controlled substances CII-V

Retrospective Drug Utilization Review (rDUR) Programs

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

High Utilization Narcotic Program	<ul style="list-style-type: none"> • Quarterly identification of members who are getting multiple opioid prescriptions from multiple prescribers and filling at multiple pharmacies • Patient-specific information sent to all prescribers with peer-to-peer follow-up as relevant • Repeat members may be required to select one pharmacy to fill prescriptions (Pharmacy Lock-In Program)
Drug-Drug Interaction – Opioid and Medication Assisted Therapy (MAT) (e.g., buprenorphine products)	<ul style="list-style-type: none"> • Retrospective Drug-Disease Alert <ul style="list-style-type: none"> - Identifies prescribers whose patients are receiving opioids in addition to medications used to treat OUD - Report is run quarterly and prescribers receive patient-specific data

Utilization Management (UM) Programs	
UM programs promote appropriate use, reduce costs and ultimately help improve the health status of members.	
Cumulative MED Limit	<ul style="list-style-type: none"> ● Point-of-sale dosage limit for all opioid products ● Prevents cumulative opioid doses above a preset threshold from processing ● Prior authorization required for doses above a preset threshold
Prior Authorization/Medical Necessity – LAOs	<ul style="list-style-type: none"> ● Prior authorization/medical necessity requires: <ul style="list-style-type: none"> - Appropriate use criteria (non-cancer pain) - Step-through, short-acting opioid (non-cancer pain); step-through preferred LAOs - If appropriate, step-through neuropathic pain alternatives (non-cancer pain) - Less than 90 morphine equivalent dose (MED) supply limit (non-cancer pain) ● Intensive reauthorization review criteria
Prior Authorization/Step Therapy – LAOs	<ul style="list-style-type: none"> ● Prior authorization/step therapy requires: <ul style="list-style-type: none"> - Step-through preferred LAOs
Prior Authorization/Medical Necessity and Prior Authorization/Notification – Transmucosal Fentanyl Products	<ul style="list-style-type: none"> ● Prior authorization/medical necessity and prior authorization/notification requires: <ul style="list-style-type: none"> - Documentation of pain due to cancer and patient is already receiving opioids
Prior Authorization/Notification – MAT (e.g., buprenorphine products)	<ul style="list-style-type: none"> ● No prior authorization is required for preferred MAT products – Buprenorphine sublingual tablet and Zubsolv® ● Prior authorization/notification is required for non-preferred MAT products to help ensure appropriate use
Prior Authorization/Medical Necessity – Overdose Prevention (naloxone)	<ul style="list-style-type: none"> ● No prior authorization is required for preferred naloxone products – Generic naloxone injection and Narcan® Nasal Spray
Supply Limit – LAOs	<ul style="list-style-type: none"> ● For non-cancer pain, supply limits adhere to Centers for Disease Control and Prevention (CDC) recommendations of 90 MED daily ● No quantity ceiling limit for cancer or end-of-life diagnoses
New -to-Therapy Short-Acting Opioid Dispensing Limits	<ul style="list-style-type: none"> ● Dispensing limits for short-acting opioids for opioid naïve members; 7-day limit (3-day limit for members under 20 years old, effective Oct. 1, 2018) with max dose of less than 50 MED
Prior Authorization/Medical Necessity – Opioid Containing Cough and Cold Products	<ul style="list-style-type: none"> ● Prior authorization/medical necessity requires review under the age of 18
Evidence-Based Prescribing Programs	
Focuses on outreach to prescribers identified as outliers	
Fraud/Waste/Abuse Evaluation	<ul style="list-style-type: none"> ● Retrospective controlled substance claims analysis ● Identifies outlier opioid prescribers
Peer Comparison Reporting	<ul style="list-style-type: none"> ● Identification of and outreach to outlier opioid prescribers compared to peers within like specialties
High Opioid Utilizer Management Programs	
Focuses on identifying and managing members who are classified as high opioid users	
Pharmacy Lock In	<ul style="list-style-type: none"> ● Locks member into a single pharmacy ● Members identified through evaluation of High Utilization Narcotics quarterly reports or other referrals
High Claimant Program	<ul style="list-style-type: none"> ● Members are identified based on annual opioid claims ● Intervention may include case management and filling restrictions

Miscellaneous	
Substance Use Disorder Helpline	<ul style="list-style-type: none"> • 24/7 helpline: 855-780-5955. For members or caregivers, staffed by licensed behavioral health providers • Reference: liveandworkwell.com
Home Delivery Pharmacy Opioid Limit to 30-Day Supply	<ul style="list-style-type: none"> • OptumRx Home Delivery Pharmacy limits opioid prescriptions to a 30-day supply
UnitedHealth Group Enterprise Opioid Task Force	<ul style="list-style-type: none"> • The UnitedHealth Group task force leverages resources from across the enterprise to support members and combat the opioid epidemic • UnitedHealthcare is committed to a program of prevention, treatment and support for patients suffering from opioid misuse or addiction
The UnitedHealthcare Opioid Community Partnership	<ul style="list-style-type: none"> • Enterprise-wide community effort to combat the opioid crisis in select cities in collaboration with care provider groups, community organizations and others
Drug Disposal Kits	<ul style="list-style-type: none"> • To support the safe, convenient and effective disposal of unused drugs, especially opioids, OptumRx is offering members the Deterra[®] prescription drug disposal kit

† Please note: Some UnitedHealthcare commercial plans may not participate in the programs outlined in this guide.

* Ohio prescribers: Reference the following standards, procedures and guidelines to be followed in the diagnosis and treatment of chronic pain: [Ohio Guidelines for Prescribing Opioids for the Treatment of Chronic, Non-Terminal Pain 80 mg of a Morphine Equivalent Daily Dose \(MED\) "Trigger Point"](#) and ORC Ann. 4731.052.

Abbreviations			
APAP	Acetaminophen	MED	Morphine-Equivalent Dose
CDC	Centers for Disease Control and Prevention	ODD	Opioid Use Disorder
cDUR	Concurrent Drug Utilization Review	PA	Prior Authorization
DEA	Drug Enforcement Agency	rDUR	Retrospective Drug Utilization Review
LAOs	Long-Acting Opioids	SAOs	Short-Acting Opioids
MAT	Medication Assisted Therapy	UM	Utilization Management

We're Here to Help

For more information, please email us at pharmacy_news@uhc.com.

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