2019 Opioid Edits – All UCare Lines of Business

On Jan. 1, 2019, UCare executed several opioid edits in response to CMS’ requirement for enhanced management of the opioid misuse epidemic. These edits will be applied across all of UCare’s Medicare, Medicaid, and Health Exchange plans except where specifically stated otherwise. Incorporation of these safety edits reflects our compliance and participation in the national effort to encourage appropriate opioid prescribing practices and to promote increased safety for our members. Below is a summary of the 2019 opioid overutilization edits:

- **Opioid-Naïve Patients**: Implementation of a day supply limit to reduce the potential for chronic opioid use or misuse. This hard safety edit (prior authorization required) at the pharmacy limits initial opioid prescription fills for the treatment of acute pain to no more than a 7-day supply. Subsequent fills will not be subject to this safety edit limit. Patients with cancer and those in palliative care, hospice, or a LTC setting are excluded from this edit.

- **Long Acting Opioids**: Implementation of a hard safety edit (prior authorization required) will be required for all long-acting opioid medications to ensure appropriate utilization and safe prescribing.

- **Medicaid and Health Exchange Opioid Quantity Limits**: Quantity limits will be in place for all opioids on all formularies to reduce the potential for opioid overutilization and misuse. For Medicaid and Health Exchange, quantity limits will restrict opioid prescriptions to an average daily morphine milligram equivalent (MME) of 90 mg. When the MME is exceeded a hard safety edits will trigger at the pharmacy and require prior authorization.

- **Medicare Opioid Quantity Limits**: Implementation of a soft and hard formulary-level safety edit for opioids based on the member’s cumulative Morphine Milligram Equivalent (MME) at the point-of-sale to prevent potentially unsafe opioid dosing. The soft safety edit (i.e., can be overridden by the pharmacist) will trigger for an average daily MME of ≥ 90 mg. In addition, there will be a hard safety edit (i.e., requires prior authorization) which is triggered by reaching an average daily MME of ≥ 200 mg.

2019 Medicare Opioid Drug Management Programs
The Comprehensive Addiction and Recovery Act of 2016 (CARA), which amended the Social Security Act and was enacted into law on July 22, 2016, includes authority for Medicare Part D plans to establish drug management programs for “at-risk beneficiaries” effective on or after Jan. 1, 2019.

Specifically, under drug management programs, Part D plans will engage in case management of potential at-risk beneficiaries, through contact with their prescribers.

- Notable behavior includes a beneficiary taking a specific dosage of opioids and/or obtaining them from multiple prescribers and multiple pharmacies who may not know about each other.

- Case management with the prescribers occurs for the safety of the enrollee. Sponsors may then limit at-risk beneficiaries’ access to coverage of “frequently abused drugs” to a selected prescriber(s) and/or network pharmacy(ies).

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Criteria for At-Risk Beneficiaries Identification

- Minimum Criteria (Required review potentially at risk beneficiaries)
  - ≥ 90 morphine milligram equivalent (MME) AND either
    - 3+ opioid prescribers AND 3+ opioid dispensing pharmacies OR
    - 5+ opioid prescribers AND 1+ opioid dispensing pharmacies.
  - Supplemental Criteria (Additional review as many at-risk beneficiaries as manageable)
    - Any Level MME AND
    - 7+ opioid prescribers OR 7+ opioid dispensing pharmacies.
- An exempted beneficiary
  - Has elected to receive hospice care or is receiving palliative or end-of-life care, or
  - Is a resident of a long-term care facility, of a facility described in section 1905(d) of the Act, or of another facility for which frequently abused drugs (FADs) are dispensed for residents through a contract with a single pharmacy, or
  - Is being treated for active cancer-related pain.

Additional Information
The Medicare Claim Edits notices and instructions, as well as the policy and technical guidance for Drug Management Programs are posted on the CMS Part D Overutilization web page at: https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovContra/RxUtilization.html

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