An Important Message from

The Texas Health and Human Services Commission (HHSC)

Update on Revisions to the VDP Uniform Opioid Policy; Changes Due May 1, 2025

Background:

HHSC will update the Uniform Opioid Policy in Uniform Managed Care Manual (UMCM) Chapter 16.1 to comply with 42 CFR §456.703 with the required Centers for Medicare and Medicaid Services (CMS) changes. These amendments are effective by May 1, 2025, and MCOs must implement these changes by this date.

Key Details:

MCOs must adhere to the following opioid policy. This policy does not apply to people with a diagnosis of sickle cell, cancer, palliative care, or hospice care.

1. Prospective Safety Edits

The prospective drug utilization review safety edits listed below are conducted using an automated process.

1.1 Morphine Milligram Equivalents and Days' Supply Limits

Morphine milligram equivalents (MME) per day is used to compare the potency of one opioid to another. Clinical decision for the MME per day recommendation varies depending on each Member's prior opioid use. Additionally, the Centers for Disease Control and Prevention (CDC) recommends starting opioid treatment with an immediate-release/short-acting formulation at the lowest effective dose, instead of an extended-release/long-acting formulation.

- a. Opioid naïve Member is defined as a Member who has taken opioids for a duration fewer than or equal to seven days in the prior 60-day period. For an opioid naïve Member, the MCO must require a one-time prior authorization in any of the following circumstances:
 - i. An opioid prescription that exceeds a ten-day supply;
 - ii. A prescription for a long-acting opioid formulation; or
 - iii. A prescription or combination of prescriptions in which the total daily dose of opioids exceeds 90 MME.

The MCO must not allow the one-time prior authorization to apply to subsequent prescriptions. The MCO must not allow the duration of the one-time prior authorization to extend beyond the days' supply of the prescription.

b. For Members who no longer meet the definition of an opioid naïve Member, prior authorization is required if the total daily dose of opioids exceeds 90 MME. A tapering plan may be established and approved on a case-by-case basis. If approved, the authorization is approved for a six-month duration.

1.2 Days' Supply Limits

Claims for opioid prescriptions are limited to a maximum of ten days for opioid naïve Members. MCOs must have day's supply limits on subsequent fills for members who are no longer opioid naïve that are clinically appropriate and may not exceed a 34-day supply.

This limitation is intended to reduce the risk of addiction and the possibility that unused opioids will be diverted.

Questions?

Please contact UnitedHealthcare Customer Service at 888-887-9003, 8 a.m.–6 p.m. CT, Monday–Friday.