Opioid management, overutilization prevention and treatment programs

Please use this quick reference guide to learn more about our strategies and programs that can help your patients who are UnitedHealthcare Individual Exchange plans*members get the opioid treatment they need in safe and effective ways.

Our pharmacy-based programs

These programs apply to all Individual Exchange plans:



Dispensing limit



Prior authorizations and quantity limits



Concurrent drug utilization review (opioid safety alerts)



Retrospective drug utilization review



Dispensing limit

This program helps support the safe and appropriate use of opioids while limiting excess supply in the market.

Program feature	Description	Prescriber action
Dispensing limit		Limit opioid prescribing up to a one-month supply per prescription.



Prior authorizations and quantity limits

This program requires that the prescribing health care professional obtain the health plan's authorization for a prescription drug before it will be covered.

Program feature	Description	Prescriber action
Prior authorization	Required for all long-acting opioids	Request prior authorization
Quantity limits	Limits the prescription to a maximum dose per day. We apply certain limits based on U.S. Food and Drug Administration maximums.	Request prior authorization
	We apply quantity limits on opioid medications for pain treatment.	

^{*}Also referred to as UnitedHealthcare Individual & Family ACA Marketplace plans.





Concurrent drug utilization review (cDUR) program and alerts

The cDUR program uses the pharmacy claims processing system to screen all prescriptions at point-of-service. It screens for inappropriate drug prescriptions and utilization, as well as potentially dangerous medical implications or drug interactions. We communicate with the dispensing pharmacy at point-of-service through claims messaging.

Opioid alert	Description	Recommended prescriber action
7-day supply limit for opioid- naïve patients	Members who haven't recently filled an opioid prescription (such as within the past 60 days) will be limited to a supply of 7 days or less. If the member has historical opioid use, this alert should be resolved at the point-of-service through pharmacist intervention. If the member has no historical opioid use: • The pharmacy will resubmit the claim for a 7-day supply only • The pharmacy may override the reject only when an exemption exists (e.g., active cancerrelated pain, end-of-life and	Prescribe a 7-day supply or less • Limiting the amount dispensed with the first opioid prescription may reduce the risk of future dependency or overuse • Exemptions to a 7-day supply include active cancer-related pain, end-of-life and palliative care, hospice care and sickle cell disease. If quantities greater than 7 days are medically necessary, please request prior authorization.
Cumulative 90 morphine milligram equivalent (MME)	palliative care, hospice care and sickle cell disease) Limits cumulative MME per day across all opioid prescriptions	Request prior authorization if a cumulative dose greater than
opioid safety alert	when the threshold exceeds 90 MME. The prescriber who writes the prescription will trigger the alert and the pharmacy will contact them.	90 MME is medically necessary Important note: This isn't a prescribing limit. Please individualize dosing for each patient.
Opioids and buprenorphine products used to treat substance use disorders (SUDs)	Safety alert for concurrent use of opioids and buprenorphine products used to treat SUDs.	Provide a timely response to pharmacy outreach
Opioids and benzodiazepines	Safety alert for concurrent use of opioids and benzodiazepines.	Provide a timely response to pharmacy outreach
Opioids and carisoprodol	Safety alert for concurrent use of opioid and carisoprodol.	Provide a timely response to pharmacy outreach



Opioid alert	Description	Recommended prescriber action
Therapeutic duplication – short- acting opioid therapy (SAO)	Safety alert for concurrent use of multiple SAOs.	Provide a timely response to pharmacy outreach
Therapeutic duplication – long- acting opioid therapy (LAO)	Safety alert for concurrent use of multiple LAOs.	Provide a timely response to pharmacy outreach
Opioids and prenatal vitamins	Enhanced point-of-sale messaging for concurrent use of opioids and prenatal vitamins	N/A
	Message only: Doesn't require the pharmacist to enter an override code to receive an approved claim	
THERDOSE acetaminophen (APAP)	Limits the dosage of opioids and APAP combination products	Provide a timely response to pharmacy outreach
		Limit APAP prescription to 4 grams per day



Retrospective drug utilization review

Program	Description
High utilization narcotic (HUN) program	Helps promote optimal therapy for pain management and minimize the occurrence of substance use by notifying prescribers of utilization patterns and issues of clinical concern.
	If you determine that a patient may be using prescription drugs in a harmful manner, we may require them to select a specific pharmacy (e.g., pharmacy lock-in) to provide and coordinate all future opioid prescription services.



Other

Program	Description
Live and Work Well	The program is available to all members. Members or caregivers can contact Live and Work Well to talk with an advocate who can provide confidential support and information on substance use and mental health topics. Visit liveandworkwell.com or call at 855-780-5955.





cDUR intervention exemptions:

- Residents of long-term care facilities
- · Patients receiving hospice care
- Patients receiving palliative or end-of-life care
- Patients receiving treatment for active cancer-related pain or sickle cell disease

Please note that opioid safety edits don't impact patients' access to medication-assisted treatment (MAT).



Clinical reminders:

- Consider offering naloxone when factors that increase risk for opioid overdose are present, such as:
 - History of overdose
 - History of substance use disorder
 - Higher opioid dosages (≥50 MME/day)
 - Concurrent benzodiazepine use
- Consider alternative treatment options for common pain conditions, in accordance with clinical guidelines and when appropriate
- Routine medication review is critical to preventing misuse, abuse and serious adverse effects. Please consider using the Prescription Drug Monitoring Program (PDMP) when prescribing a controlled substance.
- We encourage you to respond to pharmacist outreach in a timely manner and provide the appropriate training to on-call prescribers



How prescribers can submit prior authorizations:

- Visit the OptumRx Prior authorization for prescribers page
- Call the OptumRx prescriber prior authorization line at 800–711–4555, option 2, from 7 a.m.–8 p.m. CT, Monday–Friday, and 8 a.m.–5 p.m. CT, Saturdays

We're here to help

For more information, please call the number on the back of the member's ID card. Or, connect with us through chat 24/7 in the **UnitedHealthcare Provider Portal**.

