Pharmacy Opioid Quick Reference Guide

New limit for opioid claims effective November 1, 2019

Opioids are limited to 120 Morphine Milligram Equivalent (MME) per day.
Pharmacy claims for opioids will reject if a single prescription or a combination of prescriptions exceed the MME limit.

If a pharmacy claim rejects for exceeding the MME limit, request a prior authorization.

Exceptions to the MME limit

For temporary escalations above 120 MME written by a prescriber in the emergency room or by a prescriber in an urgent care facility associated with a hospital, a single fill authorization will be allowed for no more than a 10 day supply. Contact the client or member’s enrolled Apple Health plan for authorization.

Clients or members established on daily doses greater than 200 MME prior to November 1, 2019 will be grandfathered for one year and will not be subject to the MME limit or to prior authorization unless their dose increases from the current regimen. (HCA defines established as having received 42 days of opioids in the 90 days prior to November 1, 2019.)

If a client or member is new to Apple Health but has been previously established on daily doses greater than 200 MME prior to November 1, 2019, contact the client or member’s enrolled Apple Health plan to request prior authorization to remain at their current dose for one year.

The limits effective November 2017 still apply

Acute pill limits
- No more than 18 pills per prescription for clients or members under 21 years of age
- No more than 42 pills per prescription for clients or members 21 years of age and older.

Chronic Opioid Use (defined as greater than 42 days of opioids in a 90 day period). Prior Authorization is required.

Please Note:
- Pharmacy claims for opioids may reject for any of the limits or a combination of these limits if also exceeding 120 MME per day.
- Claims billed to a primary payer must still meet all opioid policy requirements.
### Expedited authorization (EA) codes used by Apple Health Fee-for-Service (FFS) & contracted Managed Care Organizations (MCO)

<table>
<thead>
<tr>
<th>EA Code</th>
<th>EA Criteria</th>
<th>What EA does and does not overrides</th>
</tr>
</thead>
<tbody>
<tr>
<td>85000000540</td>
<td>Patient is in active cancer treatment, hospice care, palliative care, or other end-of-life care.</td>
<td>This code will override the 18 or 42 doses, and the chronic use (42 days in a 90 day period) limit, but <strong>NOT</strong> the 120 MME limit.</td>
</tr>
<tr>
<td>85000000541</td>
<td>Prescriber has indicated “EXEMPT” on the prescription.</td>
<td>This code will override the 18 or 42 doses, but <strong>NOT</strong> the chronic use (42 days in a 90 day period) limit or the 120 MME limit.</td>
</tr>
</tbody>
</table>

**Note:** For United Health Care, submit EA codes above using a PA Type Code 8.

### Contacts for plan specific questions or to request an authorization

<table>
<thead>
<tr>
<th>Who is Calling</th>
<th>Amerigroup</th>
<th>Apple Health Medicaid (Fee-for-service)</th>
<th>Coordinated Care</th>
<th>Community Health Plan of Washington (CHPW)</th>
<th>Molina</th>
<th>United Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacies</td>
<td>1-833-253-4453</td>
<td>1-800-562-3022 extension: 15483</td>
<td>1-866-716-5099</td>
<td>1-800-922-1557</td>
<td>1-800-213-5525 options 1,2,2</td>
<td>1-877-305-8952</td>
</tr>
<tr>
<td>Providers (questions)</td>
<td>1-800-454-3730</td>
<td>1-800-562-3022</td>
<td>1-866-716-5099</td>
<td>1-844-605-8168</td>
<td>1-800-213-5525 options 1,2,2</td>
<td>1-877-542-9231</td>
</tr>
<tr>
<td>Providers (authorizations by phone)</td>
<td>1-800-454-3730</td>
<td>1-800-562-3022 extension: 15483</td>
<td>1-866-716-5099</td>
<td>1-844-605-8168</td>
<td>1-800-213-5525 options 1,2,2</td>
<td>1-800-310-6826</td>
</tr>
<tr>
<td>Providers (authorizations by fax)</td>
<td>1-844-493-9207</td>
<td>1-866-668-1214</td>
<td>1-866-399-0929</td>
<td>1-877-251-5896</td>
<td>1-800-869-7791</td>
<td>1-866-940-7328</td>
</tr>
<tr>
<td>Patients</td>
<td>1-833-207-3121</td>
<td>1-800-562-3022</td>
<td>1-877-644-4613</td>
<td>1-844-605-8168</td>
<td>1-800-869-7165</td>
<td>1-877-542-8997</td>
</tr>
</tbody>
</table>

### To download or request an opioid attestation:

- Amerigroup: [https://providers.amerigroup.com/pages/wa.aspx](https://providers.amerigroup.com/pages/wa.aspx)
- Apple Health Medicaid: Call to have an attestation faxed: 1-800-562-3022, ext. 15483
- Coordinated Care: [https://www.coordinatedcarehealth.com/providers/pharmacy.html](https://www.coordinatedcarehealth.com/providers/pharmacy.html)
- Community Health: [https://www.chpw.org/for-providers/documents-and-tools/](https://www.chpw.org/for-providers/documents-and-tools/)
- Molina: [https://www.molinahealthcare.com/providers/wa/medicaid/forms/Pages/fuf.aspx](https://www.molinahealthcare.com/providers/wa/medicaid/forms/Pages/fuf.aspx) or [https://www.molinahealthcare.com/providers/wa/medicaid/drug/Pages/formulary.aspx](https://www.molinahealthcare.com/providers/wa/medicaid/drug/Pages/formulary.aspx)

For general questions about the Opioid policy or the HCA prescription drug program please email [AppleHealthPharmacyPolicy@hca.wa.gov](mailto:AppleHealthPharmacyPolicy@hca.wa.gov)