



Apple Health Prescription Drug Program

Billing for Analgesics: Opioid Agonists

Prescription Drug Program Vision

Everyone has access to affordable, evidence-based cures.

New Limit for Opioid Claims

▶ What's new?

120 Morphine Milligram Equivalent (MME) per day limit.

Pharmacy claims for opioids will reject if a single prescription or a combination of prescriptions exceed the MME limit.

An example of what the reject message may say:

MED 120.00 exceeded;Ttl MED 122.99MG

* Please note MED = morphine equivalent dose and is interchangeable with MME.

Action to Take When A Claim Rejects for Exceeding the MME Limit

The pharmacy claim for an opioid rejected for exceeding the MME limit.

▶ What Should I do?

Request a prior authorization.

To request prior authorization go to the client or member's enrolled Apple Health plan's website or contact the plan.

Apple Health Plan	Contact Number
Amerigroup (AMG)	1-800-600-4441
Apple Health (Medicaid) fee-for-service	1-800-562-3022
Community Health Plan of Washington (CHPW)	1-800-440-1561
Coordinated Care of Washington (CCW)	1-877-644-4613
Molina Healthcare of Washington, Inc. (MHW)	1-800-869-7165
United Healthcare Community Plan (UHC)	1-877-542-8997

Exceptions to the MME Limit

▶ Will there be exceptions to the MME limit?

- ▶ Clients or members who are 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.

Additional Opioid Limits

▶ What about the limits effective November 2018?

The limits effective November 2018 will still apply.

- ▶ Acute pill limits
 - no more than 18 pills for clients or members under 21 per prescription
 - no more than 42 pills for clients or members 21 and older per prescription
- ▶ Prior authorization required for chronic opioid use (defined as greater than 42 days of opioids in a 90 day period)

Pharmacy claims for opioids may reject for any of the limits or a combination of these limits if also exceeding 120 MME per day.

Action to Take When A Claim Rejects for Exceeding A Limit or Combination of Limits

- ▶ Verify if the client or member meets one of the exceptions.

*Please see the client or member's enrolled Apple Health Managed Care plan's website for specifics on how to submit expedited authorization codes.

- ▶ Client or member is receiving active cancer treatment, hospice care, palliative care, or end of life care
 - ▶ Bill the claim using an expedited authorization code (EA) of 85000000540. This code will override the 18 or 42 doses, and the chronic use limit, but NOT the 120 MME limit.
- ▶ Prescriber has indicated "EXEMPT" for medically necessary condition
 - ▶ Bill the claim using an expedited authorization code (EA) of 85000000541. This code will override the 18 or 42 doses, but does NOT override the chronic use limit (42 days in a 90 day period) or the 120 MME limit.
- ▶ Verify if the client or member was previously established on daily doses greater than 200 MME prior to October 1, 2019
 - ▶ If yes, contact the client or member's enrolled Apple Health plan to request prior authorization to remain at their current dose for one year.

Action to Take When An Exception Does Not Apply

You reviewed the exception criteria and the client or member does not qualify for an exception.

▶ What Should I do?

Request a prior authorization.

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Other Restrictions on Opioids

▶ Are there other restrictions on opioids claims?

Yes. Some opioids require prior authorization to validate the drug specific criteria is met. When HCA develops a drug specific policy it is published at:

<https://www.hca.wa.gov/billers-providers-partners/programs-and-services/apple-health-medicare-drug-coverage-criteria>

Examples of opioids with their own drug specific policies are:

- ▶ [Methadone](#)
- ▶ [Buprenorphine](#)
- ▶ [Transmucosal fentanyl](#)

Other Reasons An Opioid Claim May Reject

▶ Are there other reasons a claim may reject?

Yes. There are many edits applied to each claim in the adjudication process. Some example reasons a claim may reject are:

- ▶ Invalid client ID
- ▶ Invalid prescriber NPI
- ▶ Invalid pharmacy NPI
- ▶ Refill too soon
- ▶ Non-preferred drug

Each edit will provide guidance on steps to take for resolution.

What if a Client Wants to Pay Cash?

- ▶ Per the Billing a Client WAC 182-502-0160 clients may not pay cash for a covered service unless prior authorization has been requested and denied.

A rejected claim does NOT equal a denial.

Questions ?

- ▶ For questions about HCA's Analgesics: Opioid Agonists policy or billing criteria please contact us at AppleHealthPharmacyPolicy@hca.wa.gov
- ▶ For questions on how to submit a claim using expedite authorization criteria or to request prior authorization please contact the client or member's enrolled Apple Health plan.

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