UnitedHealthcare
Overriding Opioid Safety Rejections at Point of Sale
Effective Date: January 1, 2019

Beginning January 1, 2019, UnitedHealthcare® Medicare Advantage and Prescription Drug Plans implemented several new point-of-service (POS) safety edits to help reduce the prevalence of opioid misuse and address safety concerns around opioid prescriptions.

As of May 9, 2019, UnitedHealthcare will accept additional DUR/PPS codes that are now part of the NCPDP standard. The chart below encompasses the NCPDP standard DUR/PPS codes and the corresponding edits that can be overridden at the point-of-sale after research and/or confirmation by a prescriber or pharmacist.

When submitting DUR/PPS codes:
- The correct REASON and combination of Professional and Result codes must be used to resolve soft opioid safety edits.
- If a claim rejects for multiple opioids safety edits:
  - Corresponding DUR/PPS codes must be entered for each edit.
  - Multiple DUR/PPS codes can be submitted in the same claim transaction in sequential order. For example, DUR/PPS Code #1 should not be blank when DUR/PPS Code #2 is submitted.

The following chart describes how to identify and override opioid safety edits:

<table>
<thead>
<tr>
<th>Which opioid safety edits can be overridden at point of sale?</th>
<th>How to identify the edit?</th>
<th>Which DUR/PPS Codes can be used to override this edit at POS?</th>
</tr>
</thead>
<tbody>
<tr>
<td>New to Therapy (NTT) 7-Day Supply Limit for Opioid-Naïve Members</td>
<td>Reject Code 925 (Initial Fill's Day Supply Exceeds Limits)</td>
<td>DUR/PPS codes cannot override this edit. To override this edit, submit a Prior Authorization Type and Number as follows: -PA Type: 5 -PA Number: 4000 if prior history of opioid OR 4005 if exempt due to cancer, hospice, or palliative care</td>
</tr>
<tr>
<td>Opioid Care Coordination Safety Edit (OCC) Limits cumulative dosage to 90 morphine milligram equivalent (MME) per day when prescribed by two or more prescribers</td>
<td>Reject Code 924 (Cumulative dose exceeded across multiple prescriptions)</td>
<td>HD (High Dose) HC (High Cumulative)</td>
</tr>
<tr>
<td>Drug to Drug Interaction (DDI) between Opioids and Drugs to Treat Opioid Use Disorder (OUD)</td>
<td>Reject Code 88 (DUR Reject Error) AND messaging contains “BuprenorphineHx”</td>
<td>DD (Drug-Drug Interaction) M0 (Prescriber Consulted) MR (Medication Review) R0 (Pharmacist Consulted Other Source)</td>
</tr>
<tr>
<td>Drug to Drug Interaction between Opioids and Benzodiazepines</td>
<td>Reject Code 88 (DUR Reject Error) AND messaging contains “Benzo+OpioidHx”</td>
<td></td>
</tr>
<tr>
<td>Duplicate Therapy of Long-Acting Opioids (LAO)</td>
<td>Reject Code 88 (DUR Reject Error) AND messaging contains “LA Opioid Hx”</td>
<td>TD (Therapeutic Duplication)</td>
</tr>
</tbody>
</table>

For questions regarding communications, contact the Pharmacy Provider Communications team: pharmacyprovidercommunications@optum.com.

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How to Override Edits with/without multiple rejects on a single claim:

Example #1 (NTT): Member is new to UnitedHealthcare and claim rejects for New to Therapy because UnitedHealthcare does not have the member’s prior claim history.

<table>
<thead>
<tr>
<th>Claim Rejection</th>
<th>Explanation of Reject</th>
<th>Pharmacy Research</th>
<th>How Pharmacy Can Override Edit</th>
</tr>
</thead>
</table>
| Reject Code 925 | NTT/Opioid-Naïve      | The pharmacy has record the member has been on opioids previously. | Submit Prior Authorization Type and Number:  
- PA Type: 5  
- PA Number: 4000 |

Example #2 (OCC): The member’s cumulative opioid claims exceeds 90 from 2 or more prescribers

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</thead>
</table>
| Reject Code 924 | Limits cumulative dosage to 90 morphine milligram equivalent (MME) per day when prescribed by two or more prescribers | The prescriber was consulted on the use of multiple opioids and informed of other provider(s). | Submit DUR/PPS code:  
- Reason: HD or HC  
- Professional: M0  
- Result: 1G |
|                  |                       | Other source was consulted and confirms member the patient is under palliative care. | Submit DUR/PPS code:  
- Reason: HD or HC  
- Professional: R0  
- Result: 4B |
|                  |                       | Medication review was completed and confirms that patient has active cancer. | Submit DUR/PPS code:  
- Reason: HD or HC  
- Professional: MR  
- Result: 4D |

Example #3 (DD, OUD & Opioid): The member has prior use of buprenorphine and is now attempting to fill an opioid.

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<th>How Pharmacy Can Override Edit</th>
</tr>
</thead>
</table>
| Reject Code 88  | DDI between Opioids and Drugs to Treat Opioid Use Disorder (OUD) | The prescriber was consulted and confirms the member is not concurrently using the drugs. | Submit DUR/PPS code:  
- Reason: DD  
- Professional: M0  
- Result: 1G |

Example #4 (DD, Opioid & Benzo and Opioid-Naïve): The member has no prior use of opioids, has filled a benzodiazepine previously, and is now attempting to fill an opioid.

<table>
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<th>How Pharmacy Can Override Edit</th>
</tr>
</thead>
</table>
| - Reject Code 925 AND - Reject Code 88 AND - Messaging contains “Benzodiazepines” | NTT/Opioid-Naïve AND DDI between Opioids and Benzodiazepines | Pharmacy has record the member has active cancer AND the prescriber was consulted about concurrent use of opioids and benzodiazepines. | Submit all the following to resolve BOTH edits:  
- Prior Authorization Number:  
  - PA Type: 5  
  - PA Number: 4005  
- DUR/PPS Code:  
  - Reason: DD  
  - Professional: M0  
  - Result: 1G |

Please distribute immediately.

For questions regarding communications, contact the Pharmacy Provider Communications team: pharmacyprovidercommunications@optum.com.
Example #5 (OCC, TD LAO): The member’s cumulative opioid claims exceeds 90 from 2 or more prescribers, and the member is concurrently taking 2 long acting opioids.

<table>
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</table>

Example #6 (TD LAO, Non-Formulary): The member is concurrently taking 2 long acting opioids and one of the opioids is not covered on UnitedHealthcare’s formulary.

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<th>How Pharmacy Can Override Edit</th>
</tr>
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<tbody>
<tr>
<td>- Reject Code 70 AND - Reject Code 88 AND - Messaging contains “LA Opioid Hx” AND “Non-formulary, call PA”</td>
<td>-The drug is not on the formulary AND -Duplicate Therapy of Long-Acting Opioids</td>
<td>For the duplicative therapy edit, the prescriber was consulted and confirms the member is not concurrently using the drugs. For the non-formulary edit, contact the prescriber to request a change to the appropriate formulary alternative or ask the prescriber to contact the Prior Authorization Department for an exceptions request.</td>
<td>Submit the following DUR/PPS codes to resolve the LAO edit: -Reason: TD -Professional: M0 -Result: 1G If exception is approved resubmit claim with DUR/PPS codes.</td>
</tr>
</tbody>
</table>

I need assistance to override the above edits at point of sale. Who do I contact?

For assistance, please contact our Pharmacy Help Desk at the numbers listed below.

To reduce processing errors, please confirm the information on members’ ID card prior to submitting prescription claims.

Should you have any questions or require assistance, please contact the OptumRx Pharmacy Help Desk (24 hours a day, 7 days a week):

- AARP® MedicareComplete® and UnitedHealthcare® MedicareComplete Plans: 877-889-6510
- AARP® MedicareRx, United MedicareRx, UnitedHealthcare MedicareRx Plans: 877-889-6481
- UnitedHealthcare® Medicaid Plans: 877-305-8952
- All other Plans: 800-788-7871