Ambetter Opioid Prescribing Limits

Frequently Asked Questions

Why are opioid prescribing limits being implemented for Ambetter members?

The opioid epidemic has claimed countless lives during the last 3 years. Many states are limiting a provider's ability to prescribe long-term opioid medications.

When are the limits effective?

Effective September 17, 2018, Superior will institute Ambetter Opioid Prescribing Limits to help providers avoid opioid overutilization.

- *Note: Ambetter members who have legitimate medical need for long-term opioid use may be able to continue to obtain opioid prescriptions with a prior authorization.*

Who is affected by these limits?

Current and future members that previously have not had an opioid prescription claim under this health plan.

Who will be exempt from these limits?

Current and future members who have a condition that can only be managed by long-term opioid use may be exempt from this limit. Such conditions include, but are not limited to:

- Active cancer treatment
- Sickle cell
- Palliative care and end-of-life/hospice care

Historical claims on file with Superior may support access to the opiate product, otherwise prior authorization will be required to be eligible for long-term opioid use.

Are there any other limits imposed?

Yes, there is a Drug Utilization Review (DUR) edit which also will check for daily Morphine Equivalent Doses (MED).

- If the MED is greater than 120 MED/day, the edit will reject the claim and present the dispensing pharmacist the option to override.

How can the dispensing pharmacist override the Morphine Equivalent claim rejection?

The dispensing pharmacist can use standard Point of Service (POS) rejection override codes:

- Professional Pharmacy Service (PPS) codes: (M0, P0, PM, R0)
- Result of Service codes: (1B, 1C, 1D, 1F, 1G and 2A)

What is the maximum daily limit?

A member will be able to get up to a maximum of a 7-day supply of opioid medications for an initial fill. The second fill will be limited to an additional 7-day supply. The member will be able to obtain up to 2 fills in any 28-day period and up to a 28-day supply in any 90-day period.

- *For example: If the member fills a 7-day supply on July 1st, the member would be able to get another 7-day fill on the 8th. The member would then have to wait 2 weeks to obtain an additional 7-day fill, unless prior authorization is obtained.*

Can a dispensing pharmacist override maximum daily limits?

No, overrides on maximum daily limits are not allowed and will require prior authorization. If authorization is needed to increase a member's maximum daily limit, the provider must fax or call a request into the Envolve Pharmacy Solutions Prior Authorization department:

- By Fax - Submit a *Prior Authorization Request Form for Non-Specialty Drugs* to 1-866-399-0929.
  - Forms can be found at Ambetter from Superior HealthPlan's Pharmacy webpage.
- By Phone - Call 1-866-399-0928.

Who can I contact with questions?

For prior authorization questions, please contact the Envolve Pharmacy Solutions Prior Authorization department at 1-866-399-0928.

- For any other questions, please reach out to Superior's Pharmacy department at 1-800-218-7453, ext. 22080.