

PROVIDER MEMO

To: Santa Clara Family Health Plan Providers

From: Dang Huynh, PharmD

Director of Pharmacy

Date: September 20, 2019

Subject: Opioid Safety Point-of-Sale Edits for Medi-Cal

Dear SCFHP Provider.

Effective **October 1, 2019**, Santa Clara Family Health Plan (SCFHP) will be implementing the following new pharmacy point-of-sale (POS) edits for its Medi-Cal members to meet the requirements outlined in the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act.

A soft edit may be overridden at the pharmacy at the discretion of the pharmacist or with prior authorization by the prescribing provider. A hard edit requires a prior authorization request to be submitted by the prescribing provider.

1. Opioid Cumulative Dosing

- A soft edit POS rejection for opioid claims will occur when multiple prescribers prescribe opioids totaling 90 mg morphine milligram equivalents (MME) or greater.
- A hard edit POS rejection for opioid claims will occur when multiple prescribers prescribe opioids totaling 200 mg MME or greater.

2. Opioid-Benzodiazepine Concurrent Use

 A soft edit POS rejection for opioid or benzodiazepine claims will occur when there is an overlapping day supply of opioids and benzodiazepines from multiple prescribers in the member's claims history.

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3. Opioid-Antipsychotic Concurrent Use

 A soft edit POS rejection for opioid claims will occur when there is an overlapping day supply of opioids and antipsychotics from multiple prescribers in the member's claims history.

4. Opioid Naïve Fill Limit

 A soft edit POS rejection for opioid claims will occur if an opioid naïve member fills more than two opioid prescriptions within a 30 day period. An opioid naïve member is a member with no opioid claims in the last 60 days.

The POS edits are safety precautions and are not intended as prescribing limits. A dispensing pharmacist may contact your office to request an attestation to override soft edits or request that you submit a prior authorization to SCFHP. Prior authorization requests with supporting clinical notes may be faxed to 1-408-874-1444 using the standardized California Prescription Drug Prior Authorization or Step Therapy Exception Request Form (Form 61-211).

Please note that these safety edits will not apply to members with active cancer, members who are enrolled in hospice, and members who are residents of a long-term care facility.

We ask that you share this information with your staff to avoid confusion regarding opioid safety alert communications from pharmacies.

If you have any questions, please contact the SCFHP Pharmacy Department at 1-408-874-1796.