

Department of Health & Social Services

DIVISION OF HEALTH CARE SERVICES
Director's Office

4501 Business Park Boulevard, Bldg. L Anchorage, Alaska 99503 Main: 907.334.2400 Fax: 907.561.1684

September 30, 2019

Dear Tribal Health Leaders,

On behalf of the Department of Health and Social Services (the department) and in keeping with the responsibility to conduct tribal consultation, I am writing to inform you of a proposed Medicaid state plan amendment (SPA).

Purpose and content of the proposed amendment:

The department intends, through a state plan amendment, to implement the Medicaid Drug Utilization Review (DUR) provisions included in Section 1004 of the Substance Use-disorder Prevention that Promotes Opioid Recovery and Treatment for Patient and Communities Act (SUPPORT Act)^{1,2,3} as follows:

Claims Review Limitations

- Opioids
 - Continued use of prospective DUR safety edits such as therapeutic duplication, early refills, duplicate fills, distinct quantity limitations, and mandatory diagnosis on claim. Prior authorization is required to override most prospective safety edits.
 - Effective October 1, 2019, a cumulative morphine milligram equivalent (MME) edit will be deployed in the pharmacy point-of-sale (POS) system. Regimens exceeding the set MME threshold will require a prior authorization.
 - Continued use of prior authorizations for select opioids developed, reviewed and approved by the DUR Committee.
- Benzodiazepines and Opioids
 - Effective October 1, 2019, prospective clinical DUR safety edits for concurrent benzodiazepines and opioids will be deployed in the POS system. Pharmacist level overrides are available.
 - Retrospective drug utilization reviews will continue to be utilized to identify trends and opportunities for prescriber and pharmacy education and outreach.
 - Continued use of existing prospective prior authorization when benzodiazepine quantity limits are exceeded, including when taken concurrently with opioids.
- Opioids and Antipsychotics
 - Effective October 1, 2019, prospective clinical DUR safety edits for concurrent opioids and antipsychotics will be deployed in the POS system. Pharmacist level overrides are available.
 - Retrospective drug utilization reviews will continue to be utilized to identify trends and opportunities for prescriber and pharmacy education and outreach.
- Special Populations
 - Overrides are available for individuals who are receiving hospice or palliative care; treatment
 for cancer; or residents of long-term care facilities or facilities described in 1905(d) of the
 Social Security Act. Discharge overrides available.

Monitoring of Antipsychotic Medication Use in Children

• Continued use of prospective DUR safety edits for therapeutic duplication and quantity limits for all ages; prior authorization required for override. Prior authorization will continue to be required for the use of antipsychotics in children less than 5 years of age. Discharge overrides available.

 Review of antipsychotic medication use in children will continue to be monitored through the Alaska Medicaid DUR Program – Division of Health Care Services. For children in foster care, the program will continue its collaboration with the Office of Children's Services in the review of antipsychotic medication use.

Fraud and Abuse Identification

- The program will use data analytics tools from a variety of data sources to identify trends for possible fraud and abuse.
- Alaska Medicaid Pharmacy Program will continue collaborative efforts with other state partners when anomalous patterns are identified.

Anticipated impact on Medicaid-eligible Alaska Native/American Indian beneficiaries:

While many of the provisions in the SUPPORT Act have been utilized by the Alaska Medicaid program for several years, the department will be introducing additional prospective safety edits to promote clinically appropriate utilization of opioids, alone and in combination with other medications, in alignment with the provisions of the SUPPORT Act. The department believes the proposed federally-mandated revisions will have a direct impact on tribal beneficiaries by influencing prescribing patterns of prescribers which may result in modifications to a beneficiary's medication regimen, including opioid-sparing.

Anticipated impact on tribal health programs and the Indian Health Service:

The department believes the additional provisions being introduced in alignment with the SUPPORT Act will have a direct impact on tribal health organizations and the IHS by adding additional clinical and administrative activities that must be completed when prescribing patterns for a beneficiary trigger safety edits. Tribal health programs can minimize additional administrative burden by proactively evaluating medication regimens and promoting prescribing consistent with safety efforts outlined in the SUPPORT Act. The amendment does not modify reimbursement methodologies.

Mechanism and timeline for comment:

Written comments or questions regarding the proposed amendment are due on Oct 30, 2019, by 5:00 PM. If you would like to arrange an in-person meeting regarding the proposed changes, please make a written request within 15-days of the date of this letter. Please direct all written correspondence to Courtney King, Alaska Department of Health and Social Services, 4501 Business Park Boulevard, Building L. Anchorage, AK 99503, or courtney.king@alaska.gov

Comments received in response to this consultation letter are for consultation only. There are no associated state regulatory changes related to this specific State Plan Amendment. Authority for Drug Utilization Review activities are outlined in federal law, 42 USC 1396r-8; federal regulation, 42 CFR §456.700-725; and Alaska Administrative Code, 7 AAC 120.120.

Sincerely,

Erin Narus, PharmD, RPh Lead Pharmacist Pharmacy & Ancillary Services Manager

¹ https://www.congress.gov/115/bills/hr6/BILLS-115hr6enr.pdf

² http://manuals.medicaidalaska.com/docs/ramsg/RAMSG 2019.08.26 Pharmacy Update SUPPORT Act.pdf

³ http://manuals.medicaidalaska.com/docs/dnld/Update Pharmacy Program SUPPORT Act Notice 20190830.pdf