Changes to the Washington Apple Health (Medicaid) Opioid Policy

Effective November 1, 2019

August 30, 2019



Overview of Apple Health Opioid Policy

What's new?

- ▶ New attestation criteria for prescriptions over 120 Morphine Milligram Equivalents (MME) per day
 - > Criteria added to the updated opioid attestation form
 - > Criteria based off new state opioid prescribing rules

What's staying the same?

- Continue to exempt patients with pain while receiving active cancer treatment, and for patients in hospice, palliative, or end-of-life care
- ➤ Continue acute pill limits (for no more than 18 pills for patients under 21 and no more than 42 pills for patients 21 and older)
- Continue chronic opioid use attestation (for greater than 42 days of opioids in a 90 day period)



Presentation Overview

- What is Apple Health doing?
- Why is Apple Health doing this?
- What is changing with the Apple Health Opioid Policy?
 - ► Morphine Milligram Equivalents (MME) criteria
 - > Pain consult options
 - > Provider exceptions
 - Acute/Chronic Opioid Use criteria
 - Exceptions
- How is Apple Health doing this?
- What's planned for the future?



What is Apple Health doing?

The SUPPORT Act

Apple Health (Medicaid) is updating its opioid policy to comply with the SUPPORT Act for November 1, 2019

- The primary changes to the opioid policy are on morphine milligram equivalents (MME) limits
 - ► Attestation is required for prescriptions over 120 MME per day
 - Attestation and supplemental documentation are required for prescriptions over 200 MME per day
 - New updated attestation form includes criteria and questions for both MME limit and chronic opioid use



Why is Apple Health doing this?

The SUPPORT Act

- October 24, 2018 that addresses the national opioid crisis
- The SUPPORT Act affects numerous federal agencies including but not limited to:
 - ► DHHS (Department of Health and Human Services)
 - ► FDA (Food and Drug Administration)
 - ► CMS (Centers for Medicare and Medicaid Services)
 - ► AHRQ (Agency for Healthcare Research and Quality)
 - SAMHSA (Substance Abuse and Mental Health Services Administration)



Why is Apple Health doing this?

The SUPPORT Act

- The SUPPORT Act requires all state Medicaid programs to have MME criteria in place for opioid prescriptions for its clients
- HCA elected to use MME criteria that went into effect for the five boards and commissions of Washington involved in ESHB 1427 implementation.
- The required pain consult and related exemptions mirrors the new WAC as a way to comply with new federal law and to minimize patient and provider impact in Washington.



- Apple Health will now apply a prior authorization (PA) to claims that result in, either alone or in combination, a daily MME of over 120.
 - ➤ The opioid attestation form will be required before clients can receive prescriptions, either alone or in combination, that are over 120 MME per day.
- The PA requires that the provider attests to having completed a consult with a pain management specialist or meet one of the exceptions as outlined in WAC.
 - ► The MME attestation form aligned with the new state rules that went into effect on January 1, 2019 for high dose opioids.



- Apple Health will apply a PA to claims that result in, either alone or in combination, a daily MME of over 200.
 - ► These requests will require BOTH the completed attestation form and supporting documentation (chart notes) for the PA to be reviewed.
- The PA requires that the provider submit clinical documentation to provide rationale for medical necessity for treatment plans that are over 200 MME per day.
 - ➤ Documentation should include a consult specific to the requested dose and information on non-pharmacologic and non-opioid pharmaceutical methods for managing the patient's pain.



- The new pain consultation requirements are mirrored after the new state-wide opioid prescribing rules from 2018 and 2019.
- The new rules requires a consultation with a pain specialist for patients above 120 MME through either:
 - ► An office visit with patient, prescriber, and pain management specialist; OR
 - ► Telephone, electronic, or in-person consultation between the pain management specialist and the prescriber; OR
 - ➤ An audio-visual evaluation conducted by the pain management specialist remotely where the patient is present with either the physician or a licensed health care practitioner designated by the physician or the pain management specialist



- Provider exceptions to the pain consultation requirement include:
 - ➤ You are a board certified pain management specialist; OR
 - ➤ You have successfully completed a minimum of twelve category I continuing education hours on chronic pain management within the previous four years. At least two of these hours must was dedicated to substance use disorders; OR
 - ➤ You are a pain management physician working in a multidisciplinary chronic pain treatment center or a multidisciplinary academic research facility
 - ➤ You have a minimum of three years of clinical experience in a chronic pain management setting, and at least thirty percent of their current practice is the direct provision of pain management care; OR
 - ➤ Your patient requires greater than 120 MME per day for active cancer pain, palliative care, end of life care or is in hospice



Acute/Chronic Opioid Limits

- New MME limit is in addition to acute pill limit
 - ► Age 20 and younger: no more than 18 pills AND 120 MME per prescription
 - ► Age 21 and older: no more than 42 pills AND 120 MME per prescription
- Attestations for chronic opioid use will now only be accepted after clients have 35 days of opioid use
 - Providers who have submitted an attestation for opioid use greater than 120 MME will need to submit the attestation form with both the 120 MME section and chronic sections completed
- Continuing acute pill limits and attestation for chronic opioid use
 - Chronic opioid use and MME limit combined for one attestation form



Exceptions

- Prescriptions for patients with active cancer treatment, or hospice, palliative, or end-of-life care will stop for an attestation when prescriptions are greater than 120 MME per day
 - ► There is an option to select for these specific conditions on the attestation form for opioid use greater than 120 MME per day
 - ▶ Prescribers can also complete the chronic opioid use section of the attestation, if appropriate
- Previous exceptions on acute pill limits and chronic use for active cancer treatment, hospice, palliative, and end-of-life care will continue



How is Apple Health doing this?

Opioid Attestation Form Updates

▶ The opioid attestation form has been updated to include chronic opioid use and MME criteria

Question 1 will help providers understand what sections of the attestation form must be completed based on the patient's current circumstances

Supporting documentation (chart notes) are required when patients are above 200 MME per day



Future Changes to Apple Health

Prescription Monitoring Program (PMP) Check

- The SUPPORT Act requires Medicaid agencies to have criteria in place for October 1, 2021 on PMP use.
 - Providers must check the PMP prior to writing prescriptions for controlled substances to Medicaid clients
- ▶ HCA is partnering with the Department of Health (DOH) to create a process around these new federal requirements
- More information about this process will be available in 2021



Questions?

Website: https://www.hca.wa.gov/about-hca/apple-health-medicaid/support-act

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