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

- The SUPPORT Act is federal legislation that was signed into law on 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.



Morphine Milligram Equivalent (MME) limit

- 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.



Morphine Milligram Equivalent (MME) limit

- 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.



Morphine Milligram Equivalent (MME) limit

- The new pain consultation requirements are mirrored after the new statewide 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



Morphine Milligram Equivalent (MME) limit

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

One information about this process will be available in 2021





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

Email: applehealthpharmacypolicy@hca.wa.gov

