

Apple Health Policy: Opioids - Update

Ryan Pistoiresi, PharmD, MS

Assistant Chief Pharmacy Officer

Washington State Health Care Authority

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Timeline of HCA Opioid Policy Updates

- ▶ **November 2017:** Implemented acute and chronic limits for long-acting and short-acting opioids. Created expedited authorizations for overrides and opioid attestation form.
- ▶ **November 2019:** Updated opioid attestation form and authorizations for prescriptions over 120 Morphine Milligram Equivalents (MME) per day. Include new clinical criteria to mirror new opioid pain rules in 2019.
- ▶ **October 2021:** Creating clinical policy regarding how providers must check the Prescription Monitoring Program (PMP) prior to prescribing and dispensing prescriptions for controlled substances.

Review of November 2019 Changes

- ▶ HCA updated its opioid clinical policy and forms to comply with Section 1004 of the SUPPORT Act.
- ▶ The **S**ubstance **U**se-Disorder **P**revention that **P**romotes **O**pioid **R**ecovery and **T**reatment for Patients and Communities Act (SUPPORT Act) was signed into law in 2018 to direct federal agencies to act on the 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)

What does Section 1004 do?

- ▶ Section 1004 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.

What did HCA do?

- ▶ Apple Health applies a prior authorization (PA) to claims that result in, either alone or in combination, a daily MME of over 120.
 - ▶ The opioid attestation form is 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 state rules that went into effect on January 1, 2019 for high dose opioids.

What did HCA do?

- ▶ Apple Health applies a PA to claims that result in, either alone or in combination, a daily MME of over 200.
 - ▶ These requests 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.

What did HCA do?

- ▶ Policy was presented at October 2019 DUR meeting as information only.
- ▶ Policy was finalized and made effective November 1, 2019.
- ▶ DUR Board motion today is for November 2019 opioid policy updates.
 - ▶ October 2021 updates do not impact the current opioid clinical policy.

Preview of October 2021 Changes

- ▶ HCA is working to implement Section 5042 of the SUPPORT Act by October 1, 2021.
- ▶ Section 5042 of the SUPPORT Act (codified in 42 USC 1396) directs all state Medicaid programs to require providers check the PMP prior to prescribing controlled medications.
 - ▶ This policy will include all controlled medications, not just opioids like the other policies
- ▶ “Beginning October 1, 2021, a State shall require each covered provider to check, in accordance with such timing, manner, and form as specified by the State, the prescription drug history of a covered individual being treated by the covered provider through a qualified prescription drug monitoring program ... before prescribing to such individual a controlled substance.”

What is HCA doing?

- ▶ HCA is updating its rules and procedures to comply with this new federal law by October 1, 2021.

- ▶ To comply, HCA will:
 - ▶ publish a clinical policy on how providers should check the PMP;
 - ▶ create a compliance monitoring process, which may include prescriber education regarding the policy requirements;
 - ▶ submit annual reports to CMS as described in 42 USC 1396w-3a(e)(1); and
 - ▶ provide communications to external stakeholders impacted by this law;

What is the new clinical policy?

- ▶ Prescribers writing a prescription for any controlled medication for a Medicaid patient must check the Washington State Prescription Drug Program (PMP) no more than 10 days prior to writing the prescription.
- ▶ Pharmacists will be required to check the PMP no more than 48 hours prior to filling any controlled medication for a Medicaid client.
- ▶ Requirements will be added to WAC and the Provider Guide(s).
- ▶ Checks will not stop or limit opioid prescriptions.

What is the new clinical policy?

- ▶ Providers and pharmacists must review all current prescriptions documented in the PMP .
- ▶ Providers and pharmacists may delegate this review to anyone in their practice setting with authorization to access the PMP so long as they provide the pharmacist the review of all current prescriptions prior to the prescription being written.
- ▶ The provider or pharmacist must review the patient's history in the PMP and document date and time in the patient's record.
 - ▶ After a good faith effort, if they are unable to access the PMP, they must document in the patient's record that they were unable to, but intend to do so whenever access to the PMP is available.

What is the new monitoring program?

- ▶ HCA will measure PMP qualified checks performed by prescribers, pharmacists, or their delegate. A qualified check will be measured by matching date written on prescriptions in claims data with PMP data.
- ▶ Claims data will identify the date filled for a prescription and PMP data will reflect whether any pharmacist or their delegate checked the PMP within 48-hours of the date filled.
 - ▶ A check by a prescriber will be determined by the log of the PMP which shows whether the prescriber, their delegate, or their facility accessed the patient's prescription drug history no more than 10 days prior to the date written on the prescription. A check by a prescriber outside the 10-day window, either before or after, will count as an unqualified check
 - ▶ A check by a pharmacist will be determined by the log of the PMP which shows whether the pharmacist or their delegate accessed the patient's prescription drug history no more than 48 hours prior to the date filled on the prescription. A check by a pharmacist outside the 48-hour window, either before or after, will count as an unqualified check
 - ▶ Prescriptions without any checks will be documented as unchecked prescriptions

What is the new monitoring program?

- ▶ HCA may send educational letters to prescribers and pharmacists who are below 80% for qualifying checks.
- ▶ Once the previous federal fiscal year's claims are finalized (e.g., October 1, 2021 to September 30, 2022), HCA will need to identify qualifying claims and match to PMP data for all identified clients to be reported by the next DUR report (e.g., June 30, 2023).
- ▶ Standard reports on PMP check will need to measure prescriber-level checks and facility-level checks.

How is HCA communicating these changes?

- ▶ HCA is creating a comprehensive communications plan in place for which to describe the new requirements to prescribers and pharmacists
- ▶ The communication plan must document how this is different than existing WAC in opioid prescribing rules
- ▶ Key messages for the communications plan include:
 - ▶ New federal requirements apply to Medicaid patients
 - ▶ Expectations for providers, prescribers, and pharmacies on how to meet these new requirements
 - ▶ Does not stop or limit prescription opioids
 - ▶ Helping providers make informed prescribing decisions – Better health, better treatment

How do I contact HCA?

- ▶ To stay current with the SUPPORT Act implementation
<https://www.hca.wa.gov/about-hca/apple-health-medicaid/support-act>
- ▶ For opioid policy questions, email: [Apple Health Pharmacy Policy](#)



Questions?

More information:

<http://www.hca.wa.gov/>

Ryan Pistoiresi, PharmD, MS,
Assistant Chief Pharmacy Officer
ryan.pistoiresi@hca.wa.gov
360-725-0473