



CSM 2482-FR SUPPORT ACT **NEW UPDATES**

Opioid drugs (“opioids”) have serious risks such as addiction, overdose, and death. The epidemic of opioid overdose, misuse, and opioid use disorders is a critical public health issue that affects the lives of millions of Americans. Research shows the opioid overdose epidemic has a disproportionate impact on Medicaid beneficiaries.¹ The new Medicaid regulation advances CMS efforts to combat the opioid crisis and align with current standards of care.²

Beginning March 1, 2021, the following new drug management programs are being put in place to help prevent and combat opioid overuse:

- Opioid prescriptions will be monitored for new requirements involving safe dosage levels, early refills, and quantity supply of opioids that may be dispensed. If one or more opioid prescription(s) meets or exceeds a safe dosage limit or the approved refill threshold, the prescription(s) will be stopped at the pharmacy for review and discussion with the prescriber to ensure that the prescription(s) is medically necessary, appropriate and not likely to result in adverse medical events.
- Due to safety concerns, the amount of opioids will be limited to a certain number of days and fills for members initiating opioid therapy (i.e., opioid naïve).
- When a member is taking medication assisted treatment (MAT), opioid prescription(s) will be stopped at the pharmacy for review and coordination of care.
- Pharmacists will be alerted when a member is on a drug combination that may place the member at high risk for opioid overdose. These safety alerts will message the pharmacist to consider co-dispensing or obtaining a co-prescription for naloxone-for the member with the goal of mitigating the risk for opioid overdose. [**Note:** Pharmacist prescriptive authority is dictated by state law.]

Depending on applicable state law, members may be exempt from these drug management programs if they reside in a long-term care facility, including intermediate care facilities for people with developmental disabilities. Members who are receiving hospice or palliative care or active treatment for

¹ <https://www.cdc.gov/drugoverdose/data/statedeaths.html>

² CMS 2482-FR Medicaid Program; Establishing Minimum Standards in Medicaid State Drug Utilization Review (DUR) and Supporting Value-Based Purchasing (VBP) for Drugs Covered in Medicaid, Revising Medicaid Drug Rebate and Third Party Liability (TPL) Requirements

sickle cell disease or cancer-related pain may also be exempt. For exemptions not automatically applied, prior authorization may be submitted.

Table 1 below provides descriptions of the automated safety reviews that will be done at the point of sale before an opioid is dispensed.

Table 1: Descriptions of Automated Safety Reviews

Safety Review	Description
Days Supply for Opioid Naïve Members	This restriction will limit the initial opioid fill to a certain amount of days (e.g., 7 days) for members who have not recently filled an opioid prescription.
Subsequent Fill Limits for Opioid Naïve Members	This restriction will limit the amount of opioid fills for members who have not recently filled an opioid prescription.
Duplicative Long Acting Opioid Therapy	This program will identify and deny a long-acting opioid when it overlaps with another long-acting opioid of a different active ingredient.
Opioid Cumulative Dosing	This program will deny an incoming opioid claim(s) that meets or exceeds a member's daily cumulative morphine milligram equivalent (MME) limit (e.g. ≥ 90 mg per day).
Opioid-Buprenorphine Concurrent Use	This restriction denies an incoming opioid claim when it overlaps with a claim for buprenorphine used for medication assisted treatment (MAT).
ProDUR Naloxone Pharmacy Alert	This alert sends an informational message to the pharmacy when a member has a drug combination indicating the member is at high risk for opioid overdose.
Quantity Limits for Dose Optimization	This restriction limits the quantity of opioids dispensed.
Early Refill Limits on Opioids	This restriction prevents an opioid prescription from being filled early.