

## **Table of Contents**

**State/Territory Name: KS**

**State Plan Amendment (SPA) #: 19-0019**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-14-26  
Baltimore, Maryland 21244-1850



**Center for Medicaid and CHIP Services**

**Disabled and Elderly Health Programs Group**

February 24, 2020

Mr. Adam Proffitt  
Medicaid Director  
KDHE, Division of Health Care Finance  
900 SW Jackson St Rm 900N  
Topeka, KS 66612-1220

Dear Mr. Proffitt:

The CMS Division of Pharmacy team has reviewed Kansas State Plan Amendment (SPA) 19-0019 received in the Kansas City Regional Operations Group on December 4, 2019. This SPA proposes to allow the state to comply with the Medicaid Drug Utilization Review (DUR) provisions included in Section 1004 of the Substance Use-Disorder Prevention that promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (P.L. 115-271).

Based on the information provided and consistent with the regulations at 42 CFR 430.20, we are pleased to inform you that SPA 19-0019 is approved with an effective date of October 1, 2019. A copy of the signed CMS-179 form, as well as the pages approved for incorporation into Kansas's state plan will be forwarded by the Kansas City Regional Operations Group.

If you have any questions regarding this request, please contact Justin Aplin at (410) 786-6901 or [Justin.Aplin@cms.hhs.gov](mailto:Justin.Aplin@cms.hhs.gov).

Sincerely,

Cynthia R. Denemark, R.Ph.  
Deputy Director  
Division of Pharmacy  
DEHPG/CMCS/CMS

cc: James G. Scott, Director, Kansas City Regional Operations Group  
Karen Hatcher, Kansas City Regional Operations Group  
William C. Stelzner, KDHE, Division of Health Care Finance

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>		1. TRANSMITTAL NUMBER: <u>KS 19-0019</u>	2. STATE Kansas
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE October 1, 2019	
5. TYPE OF PLAN MATERIAL ( <i>Check One</i> )  <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT ( <i>Separate Transmittal for each amendment</i> )			
6. FEDERAL STATUTE/REGULATION CITATION 42 CFR §456 Subpart K, Section 1902(a)(85) of the Act		7. FEDERAL BUDGET IMPACT a. FFY 2020 \$0 b. FFY 2021 \$0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT  Kansas State Medicaid Plan, Section 4.26, page 74b, page 74d (New), and page 74e (New)		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT ( <i>If Applicable</i> )  Kansas State Medicaid Plan, Section 4.26, page 74b	
10. SUBJECT OF AMENDMENT Update Section 4.26 of the Kansas State Medicaid Plan as outlined in 1902(a)(85) and Section 1004 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act			
11. GOVERNOR'S REVIEW ( <i>Check One</i> ) <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input checked="" type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED                      Adam Proffitt is the <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL                      Governor's Designee			
12. SIGNATURE OF STATE AGENCY OFFICIAL  _____ 13. TYPED NAME Adam Proffitt 14. TITLE State Medicaid Director 15. DATE SUBMITTED December 2, 2019		16. RETURN TO Adam Proffitt, State Medicaid Director KDHE, Division of Health Care Finance Landon State Office Building 900 SW Jackson, Room 900-N Topeka, KS 66612-1220	
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED December 2, 2019		18. DATE APPROVED February 24, 2020	
<b>PLAN APPROVED – ONE COPY ATTACHED</b>			
19. EFFECTIVE DATE OF APPROVED MATERIAL October 1, 2019		20. SIGNATURE OF REGIONAL OFFICIAL  _____	
21. TYPED NAME  James G. Scott		22. TITLE  Director, Division of Program Operations	
23. REMARKS			

Revision: HCFA-PM- (MB)

State/Territory: Kansas.Citation1927(g)(2)(C)  
42 CFR §456.709(b)

- F. 2. The DUR program assesses data on drug use against explicit predetermined standards including but not limited to monitoring for:
- Therapeutic appropriateness
  - Overutilization and underutilization
  - Appropriate use of generic products
  - Therapeutic duplication
  - Drug-disease contraindications
  - Drug-drug interactions
  - Incorrect drug dosage/duration of drug treatment
  - Clinical abuse/misuse

1927 (g)(2)(D)  
42 CFR §456.711

3. The DUR program through its State DUR Board, using data provided by the Board, provides for active and ongoing education outreach programs to educate practitioners on common drug therapy problems to improve prescribing and dispensing practices.

1927(g)(3)(A)  
42 CFR §456.716(a)

- G. 1. The DUR program has established a State DUR Board either:
- Directly, or
- Under contract with a private organization

1927(g)(3)(B)  
42 CFR §456.716  
(A) and (B)

2. The DUR Board membership includes health professionals (one-third licensed actively practicing pharmacists and one-third but no more than 51 percent licensed and actively practicing physicians) with knowledge and experience in one or more of the following:
- Clinically appropriate prescribing of covered outpatient drugs
  - Clinically appropriate dispensing and monitoring of covered outpatient drugs
  - Drug use review, evaluation and intervention
  - Medical quality assurance

1927(g)(3)(C)  
42 CFR §456.716(d)

3. The activities of the DUR Board include:
- Retrospective DUR
  - Application of Standards as defined in section 1927(g)(2)(C), and
  - Ongoing interventions for physicians and pharmacists targeted toward therapy problems or individuals identified in the course of retrospective DUR

Revision: CMS-PM-  
No.

(MB)

OMB

State/Territory:  Kansas .

Citation

1902(a)(85) and Section 1004  
of the Substance Use-  
Disorder Prevention that  
Promotes Opioid Recovery  
and Treatment for Patients  
and Communities Act

K. OPIOID MEDICATION USE CLAIMS REVIEW  
REQUIREMENTS

Prospective Safety Edits:

Prospectively manages opioid drug use with a prior authorization process. Through legislative approval, the state DUR Board reviews, amends, and approves prior authorization criteria proposed by the agency.

Prospective Edit Inclusions on days supply, early, duplicate, quantity limits and MME limits:

- Prospective Safety Edits on opioids including early, duplicate fill, days supply, and quantity limits for clinical appropriateness
- Maximum Daily Morphine Milligram Equivalents (MME) Safety Edits: limits the daily morphine milliequivalent as recommended by clinical guidelines

Retrospective Drug Utilization Review includes, on an ongoing basis:

- Concurrent use of opioids and benzodiazepines
- Concurrent use of opioids and antipsychotic medications
- Opioid prescriptions exceeding state defined limitations
- Opioid prescriptions exceeding the above limitations for day's supply, early refills, duplicate fills, quantity limitations, and maximum daily morphine milligram equivalents (MME)

Revision: CMS-PM-

(MB)

OMB No.

State/Territory:  Kansas .

Citation

1902(a)(85) and Section 1004 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act

L. PROGRAM TO MONITOR ANTIPSYCHOTIC MEDICATIONS IN CHILDREN

Prospective Safety Edits:

Prospectively manages antipsychotic drug use with a DUR Board Prior Authorization process and through state policies.

Antipsychotic agents are reviewed for appropriateness for all children, including foster children, based on clinical guidelines and the state DUR Board approved medical necessity criteria.

M. FRAUD AND ABUSE IDENTIFICATION REQUIREMENTS

1902(a)(85) and Section 1004 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act

The State has in place a process that identifies potential fraud or abuse of controlled substances by individuals enrolled under the State plan, health care providers prescribing drugs to individuals so enrolled, and pharmacies dispensing drugs to individuals so enrolled.