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**State/Territory Name: Massachusetts**

**State Plan Amendment (SPA) #: 19-032**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/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**

March 10, 2020

Marylou Sudders, Secretary  
Executive Office of Health and Human Services  
One Ashburton Place, Room 1109  
Boston, Massachusetts 02108

Dear Ms. Sudders:

The CMS Division of Pharmacy team has reviewed Massachusetts State Plan Amendment (SPA) 19-0032 received in the Division of Program Operations Group on December 30, 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 19-0032 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 Massachusetts state plan will be forwarded by the Division of Program Operations Group.

If you have any questions regarding this amendment, please contact Whitney Swears at (410) 786-6543 or [Whitney.Swears@cms.hhs.gov](mailto:Whitney.Swears@cms.hhs.gov).

Sincerely,

/s/

John M. Coster, Ph.D., R.Ph.  
Director, Division of Pharmacy

cc: Daniel Tsai, Assistant Secretary for MassHealth, Medicaid Director  
Kaela Konefal, Federal Authority Policy Analyst/State Plan Coordinator  
Paul Jeffrey, Director of Pharmacy for MassHealth  
James Scott, Director, Division of Program Operations  
Julie McCarthy, Division of Managed Care Operations  
Marie DiMartino, Division of Program Operations

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
601 East 12th Street, Suite 0300  
Kansas City, Missouri 64106-2898



Medicaid and CHIP Operations Group

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March 17, 2020

Marylou Sudders, Secretary  
Executive Office of Health and Human Services  
One Ashburton Place, Room 1109  
Boston, Massachusetts 02108

Dear Secretary Sudders:

On March 10, 2020 the CMS Division of Pharmacy approved your proposed State Plan Amendment (SPA) No. 19-0032, effective October 1, 2019. This letter conveys the Transmittal and Notice of Approval of State Plan Material (CMS-179) and the approved State plan pages. SPA No. 19-0032 amends the State's approved Title XIX State plan 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).

Enclosed is a copy of the following approved State plan page:

- Section 4, page 74d.

If you have any questions regarding this matter you may contact Marie DiMartino at (617) 565-9157 or by e-mail at [Marie.DiMartino@cms.hhs.gov](mailto:Marie.DiMartino@cms.hhs.gov).

Sincerely,

/s/

James G. Scott, Director  
Division of Program Operations

Enclosure/s

Cc (by e-mail): Daniel Tsai, Assistant Secretary for MassHealth, Medicaid Director  
Kaela Konefal, Federal Authority Policy Analyst/State Plan Coordinator

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE &amp; MEDICAID SERVICES</b>	1. TRANSMITTAL NUMBER <u>1 9 - 0 3 2</u>	2. STATE <u>MA</u>
	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 <u>10/01/2019</u>
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5. TYPE OF PLAN MATERIAL (Check One)

NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION <u>Section 1902(a)(85) of the Social Security Act</u>	7. FEDERAL BUDGET IMPACT a. FFY 2020 <u>\$ 0</u> b. FFY 2021 <u>\$ 0</u>
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT <u>Section 4 page 74d</u>	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
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10. SUBJECT OF AMENDMENT  
Drug Utilization Review (DUR) requirements

11. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED      Not required under 42 CFR 430.12(b)(2)(i)  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL <u>/s/</u>	16. RETURN TO
13. TYPED NAME <u>Marylou Sudders</u>	
14. TITLE <u>Secretary</u>	
15. DATE SUBMITTED <u>12/31/2019</u>	

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED <u>12/30/2019</u>	18. DATE APPROVED <u>03/10/2020</u>
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**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL <u>10/01/2019</u>	20. SIGNATURE OF REGIONAL OFFICIAL <u>/s/</u>
21. TYPED NAME <u>James G. Scott</u>	22. TITLE <u>Director, Division of Program Operations</u>

23. REMARKS

State Plan Under Title XIX of the Social Security Act  
State: Massachusetts

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Citation

4.26 Drug Utilization Review Program (cont.)

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

- K. 1. The DUR program includes safety edits and claims review processes, including but not limited to the following:
  - Prospective safety edits on opioid prescriptions to address days' supply, early refills, duplicate fills and quantity limitations for clinical appropriateness.
  - Prospective safety edits on maximum daily morphine milligram equivalents (MME) on opioids prescriptions to limit the daily morphine milligram equivalent (as recommended by clinical guidelines).
  - Retrospective reviews on opioid prescriptions exceeding these above limitations on an ongoing basis.
  - Retrospective reviews on concurrent utilization of opioids and benzodiazepines as well as opioids and antipsychotics on an ongoing periodic basis.
- 2. The DUR program reviews antipsychotic agents for appropriateness for all children including foster children based on approved indications and clinical guidelines.
- 3. The DUR program has established a process that identifies potential fraud or abuse of controlled substances by enrolled individuals, health care providers and pharmacies.