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State/Territory Name: Maryland

State Plan Amendment (SPA) #: 19-0011

This file contains the following documents in the order listed:

- 1) Approval Letters
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- 3) Approved SPA Pages



Center for Medicaid and CHIP Services

Disabled and Elderly Health Programs Group

February 6, 2020

Mr. Dennis Schrader
Chief Operating Officer and Medicaid Director
Maryland Department of Health
20 W. Preston St, 5th Floor
Baltimore, MD 21201

Dear Mr. Schrader:

The CMS Division of Pharmacy team has reviewed Maryland's State Plan Amendment (SPA) 19-0011 received in the Philadelphia Regional Operations Group on December 19, 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 19-0011 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 Maryland's state plan will be forwarded by the Philadelphia Regional Operations Group.

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

Sincerely,

/s/

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

cc: Nina McHugh, Medicaid Provider Services Administration MD Department of Health
Katia Fortune, Maryland Policy and Compliance
Frances McCullough, Director, CMS Philadelphia Regional Operations Group
Talbatha Myatt, CMS Philadelphia Regional Operations Group

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER <u>19-0011</u>	2. STATE <u>MD</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>October 1, 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>N/A</u>	7. FEDERAL BUDGET IMPACT a. FFY <u>2019</u> \$ <u>0</u> b. FFY <u>2020</u> \$ <u>0</u>
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT <u>Att. 1 pg. 74D (19-0011)</u>	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) <u>Att. 1 pg. 74D (NEW)</u>
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10. SUBJECT OF AMENDMENT
Under this amendment, Maryland is updating its State Plan to include new drug review and utilization requirements set forth in section 1902(o) of the Act. Specifically, Maryland is updating language to identify claim review limitations on safety edits and retrospective reviews, programs to monitor antipsychotic medications to children and fraud and abuse identification requirements.

11. GOVERNOR'S REVIEW (Check One)

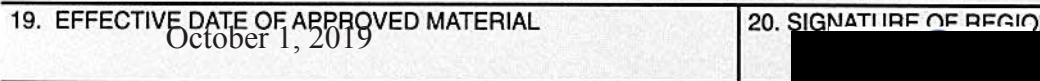
GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL 	16. RETURN TO Dennis Schrader Medicaid Director Maryland Department of Health 20 W. Preston St, 5th Floor Baltimore, MD 21201
13. TYPED NAME <u>Dennis Schrader</u>	
14. TITLE <u>Medicaid Director Maryland Department of Health</u>	
15. DATE SUBMITTED <u>December 19, 2019</u>	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED <u>December 19, 2020</u>	18. DATE APPROVED <u>February 6, 2020</u>
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL <u>October 1, 2019</u>	20. SIGNATURE OF REGIONAL OFFICIAL  Digitally signed by James G. Scott -S Date: 2020.02.18 13:18:57 -06'00'
21. TYPED NAME <u>James G. Scott</u>	22. TITLE <u>Director, Division of Program Operations</u>

23. REMARKS

State/Territory: MARYLANDCitation

Public Law 115-271
 1902(oo) [42 U.S.C 1396(a)]
 Section 1004 of the Substance
 Use-Disorder Prevention that
 Promotes Opioid Recovery and
 Treatment for Patient and
 Community Act (SUPPORT Act)

- K. The DUR Program includes claim review limitations on:
- Prospective safety edits on opioid claims to review day's supply, early refills, duplicate fills and quantity limitation for clinical appropriateness.
 - Prospective safety edits on maximum daily morphine milligram equivalents (MME) on opioid medication to limit the daily MME.
 - Retrospective reviews on opioid claims exceeding these above limitations on a regular basis.
 - Retrospective reviews on concurrent use of opioids and benzodiazepines/antipsychotics on a regular basis.

Programs to monitor antipsychotic medications to children:

- Antipsychotics medications are reviewed for clinical appropriateness for all children up to age of 18 based on approved indications and clinical guidelines.

Fraud and Abuse Identification Requirements

- The DUR Program includes process that identifies potential fraud, waste or abuse of controlled substances by enrolled participants, health care providers and pharmacies.