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State/Territory Name: Vermont

State Plan Amendment (SPA) #: 19-0009

This file contains the following documents in the order listed:

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 7, 2020

Michael K. Smith, Secretary
Vermont Agency of Human Services
280 State Drive - Center Building
Waterbury, VT 05671-1000

Dear Mr. Smith,

The CMS Division of Pharmacy team has reviewed Vermont State Plan Amendment (SPA) 19-0009 received in the Boston Regional Operations Group on December 31, 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 19-0009 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 Vermont's state plan will be forwarded by the Boston Regional Operations Group.

If you have any questions regarding this request, please contact Réna McClain at (410) 786-3975 or Rena.McClain1@cms.hhs.gov.

Sincerely,

/s/

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

cc: Dylan Frazer, Vermont Medicaid Policy Unit
James G. Scott, Director, Division of Program Operations
Gilson DaSilva, Boston Regional Operations Group

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL

FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES

1. TRANSMITTAL NUMBER: 19-0009

2. STATE: VERMONT

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(S): 10/1/19

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: Sec. 1927(g) of Social Security Act

7. FEDERAL BUDGET IMPACT:
a. FFY 2020 $ 4,500
b. FFY 2021 $ 0.00

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Pages 74b and 74d

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT *(If Applicable)*: Page 74b

10. SUBJECT OF AMENDMENT: SUPPORT Act Drug Utilization Review

11. GOVERNOR'S REVIEW *(Check One):*
☐ GOVERNOR'S OFFICE REPORTED NO COMMENT
☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
■ OTHER, AS SPECIFIED
SIGNATURE OF SECRETARY OF ADMINISTRATION
[redacted]

12. SIGNATURE OF STATE AGENCY OFFICIAL:
[redacted]

13. TYPED NAME: Michael K. Smith

14. TITLE: SECRETARY, AGENCY OF HUMAN SERVICES

15. DATE SUBMITTED: 12/31/19

16. RETURN TO:

DYLAN FRAZER

AGENCY OF HUMAN SERVICES
280 STATE DRIVE, CENTER BUILDING
WATERBURY, VT 05671-1000

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 12/31/19

18. DATE APPROVED: 02/07/2020

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: 10/01/19

20. SIGNATURE OF REGIONAL OFFICIAL: /s/

21. TYPED NAME: James G. Scott

22. TITLE: Director, Division of Program Operations

23. REMARKS

FORM CMS-179 (07-92)

Instructions on Back

Citation

1927(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 contra-indications
- 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 educational outreach programs to educate practitioners on common drug therapy problems to improve prescribing and dispensing practices.

G. l. The State has established a State DUR Board either:

1927(g)(3)(A), 42 CFR 456.716(a)

☒ 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 (at least one-third licensed actively practicing pharmacists and at least one-third but no more than one-half licensed and actively practicing physicians) appointed by the Commissioner of the Department of Vermont Health Access (DVHA) and approved by the Governor, 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.

The board may include other members as proposed by the Commissioner of the DVHA and approved by the Governor. The Governor determines the term limits of Board members via Executive Order.

1927(g)(3)(C), 42 CFR 456.716(d)

State/Territory: Vermont

Drug Utilization Review (continued)

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

Claim Review Limitations

- 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.

Programs to monitor antipsychotic medications to children: Antipsychotic agents are reviewed for appropriateness for all children including foster children based on approved indications and clinical guidelines.

Fraud and abuse identification: The DUR program has established a process that identifies potential fraud or abuse of controlled substances by enrolled individuals, health care providers and pharmacies.