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State/Territory Name: Wyoming

State Plan Amendment (SPA) #: 19-0026

This file contains the following documents in the order listed:

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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 6, 2020

Teri Green, State Medicaid Agent
Division of Healthcare Financing
6101 Yellowstone Road, Suite 210
Cheyenne, WY 82002

Dear Ms. Green,

The CMS Division of Pharmacy team has reviewed Wyoming State Plan Amendment (SPA) 19-0026 received in the Denver Regional Operations Group on December 23, 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 19-0026 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 Wyoming's state plan will be forwarded by the Denver 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: Jan Stall, Deputy Director, Wyoming Medicaid
Cori L. Cooper, Pharmacy Program Manager, Wyoming Medicaid
James G. Scott, Division Director, Denver Regional Operations Group
Ford Blunt, Denver Regional Operations Group

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION	1. TRANSMITTAL NUMBER: WY19-0026	2. STATE WYOMING
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
4. PROPOSED EFFECTIVE DATE October 1, 2019		

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: 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)	7. FEDERAL BUDGET IMPACT: a. FFY 2020 \$0 b. FFY 2021 \$0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Section 4.26 Drug Utilization Review, Pages 74-74d	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>): Section 4.26 Drug Utilization Review, Pages 74-74c

10. SUBJECT OF AMENDMENT:

The purpose of this amendment is to update Section 4.26, Drug Utilization Review, in accordance with Section 1004 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT Act). This amendment verifies that Wyoming Medicaid utilizes claim review limitations for opioids and other controlled substance claims, that Wyoming has in place programs to monitor antipsychotic medications in children, and that the Wyoming Medicaid DUR program has established processes that identify potential fraud or abuse of controlled substances by enrolled individuals, health care providers and pharmacies.

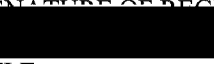
11. GOVERNOR'S REVIEW (*Check One*):

GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
 OTHER, AS SPECIFIED: Delegated to Teri Green, State Medicaid Agent, Division of Healthcare Financing

12. SIGNATURE OF STATE AGENCY OFFICIAL: 	16. RETURN TO: TERI GREEN STATE MEDICAID AGENT DIVISION OF HEALTHCARE FINANCING 6101 YELLOWSTONE ROAD, SUITE 210 CHEYENNE, WY 82002
13. TYPED NAME: TERI GREEN	CC: JOLENE FLORES, SENIOR ADMINISTRATIVE ASSISTANT (SAME ADDRESS)
14. TITLE: STATE MEDICAID AGENT	
15. DATE SUBMITTED: 12/23/19	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 12/23/19	18. DATE APPROVED: 02/06/20
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19. EFFECTIVE DATE OF APPROVED MATERIAL: 10/01/19	20. SIGNATURE OF REGIONAL OFFICIAL:  Digitally signed by James G. Scott -5 Date: 2020.03.24 15:11:01 -05'00'
21. TYPED NAME: James G. Scott	22. TITLE: Director, Division of Program Operations

REMARKS:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of WYOMING

DRUG UTILIZATION REVIEW

Citation(s)	Provision(s)
1927 (g) 42 CFR 456.700	A.1. The Medicaid agency meets the requirements of Section 1927(g)of the Act for a drug use review (DUR) program for outpatient drug claims.
1927 (g)(1)(A)	2. The DUR Program assures that prescriptions for outpatient drugs are: <ul style="list-style-type: none"> • Appropriate • Medically necessary • Are not likely to result in adverse medical results
1927(g)(1)(a) 42 CFR 456.705(b) and 456.709(b)	B. The DUR program is designed to educate physicians and pharmacists to identify and reduce the frequency of patterns of fraud, abuse, gross overuse, or inappropriate or medically unnecessary care among physicians, pharmacists, and patients or associated with specific drugs as well as: <ul style="list-style-type: none"> • Potential and actual adverse drug reactions • Therapeutic appropriateness • Overutilization and underutilization • Appropriate use of generic products • Therapeutic duplication • Drug-disease contraindications • Drug-drug interactions • Incorrect drug dosage or duration of drug treatment • Drug-allergy interactions • Clinical abuse/misuse
1927(g)(1)(B) 42 CFR 456.703 (d) and (f)	C. The DUR program shall assess data use against predetermined standards whose source materials for their development are consistent with peer-reviewed medical literature which has been critically reviewed by unbiased independent experts and the following compendia: <ul style="list-style-type: none"> • American Hospital Formulary Service Drug Information • United States Pharmacopeia-Drug Information • American Medicaid Association Drug Evaluation

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of WYOMING

DRUG UTILIZATION REVIEW

Citation(s)	Provision(s)
1927(g)(1)(D) 42 CFR 456.703(b)	D. DUR is not required for drugs dispensed to residents of nursing facilities that are in compliance with drug regimen review procedures set forth in 42 CFR 483.60. The State has nevertheless chosen to include nursing home drugs in: <u> X </u> Prospective DUR <u> X </u> Retrospective DUR
1927(g)(2)(A) 42 CFR 456.705(b)	E.1. The DUR program includes prospective review of drug therapy at the point of sale or point of distribution before each prescription is filled or delivered to the Medicaid client.
1927(g)(2)(A)(i) 42 CFR 456.705(b), (1)-(7)	2. Prospective DUR includes screening each prescription filled or delivered to an individual receiving benefits for potential drug therapy problems due to: <ul style="list-style-type: none"> • Therapeutic duplication • Drug-disease contraindications • Drug-drug interactions • Drug interactions with non-prescription or over-the-counter drugs • Incorrect drug dosage or duration of drug treatment • Drug allergy interactions • Clinical abuse/misuse
1927(g)(A)(ii) 42 CFR 456.705(c) and (d)	3. Prospective DUR includes counseling for Medicaid clients based on standards established by State law and maintenance of patient profiles.
1927(g)(2)(B) 42 CFR 456.709(a)	F.1. The DUR program includes retrospective DUR through its mechanized drug claims processing and information retrieval system or otherwise which undertakes ongoing periodic examination of claims data and other records to identify: <ul style="list-style-type: none"> • Patterns of fraud and abuse • Gross overuse • Inappropriate or medically unnecessary care among physicians, pharmacists, or Medicaid clients, or associated with specific drugs or groups of drugs.

TN No. 19-0026
Supersedes
TN No. 00-005

Approval Date 02/06/2020

Effective Date 10/01/2019

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of WYOMING

DRUG UTILIZATION REVIEW PROGRAM

Citation(s)	Provision(s)
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 no limited to monitoring for: <ul style="list-style-type: none">• 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 educational 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: <input type="checkbox"/> Directly, or <input checked="" type="checkbox"/> 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: <ul style="list-style-type: none">• 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

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of WYOMING

DRUG UTILIZATION REVIEW PROGRAM

Citation(s)	Provision(s)
1927(g)(3)(C) 42 CFR 456.716(d)	<p>G.3. The activities of the DUR Board include:</p> <ul style="list-style-type: none"> • Retrospective DUR • Application of Standards as defined in section 1927(g)(2)(C) • Ongoing interventions for physicians and pharmacists targeted toward therapy problems or individuals identified in the course of retrospective DUR
1927(g)(3)(C) 42 CFR 456.711 (a)-(d)	<p>4. The interventions include, in appropriate instances:</p> <ul style="list-style-type: none"> • Information dissemination • Written, oral and electronic reminders • Face-to-face discussions • Intensified monitoring/review of prescribers/dispensers
1927(g)(3)(D) 42 CFR 456.712 (A) and (B)	<p>H. The State assures that it will prepare and submit an annual report to the Secretary, which incorporates a report from the State DUR Board, and that the State will adhere to the plans, steps, procedures and described in the report.</p>
1927(h)(1) 42 CFR 456.722	<p><u>X</u> I.1. The State establishes, as its principal means of processing claims for covered outpatient drugs under this title, a point-of-sale electronic claims management system to perform on-line:</p> <ul style="list-style-type: none"> • Real time eligibility verification • Claims data capture • Adjudication of claims • Assistance to pharmacists, etc. applying for and receiving payment
1927(g)(2)(A)(i) 42 CFR 456.705(b)	<p><u>X</u> 2. Prospective DUR is performed using an electronic point of sale drug claims processing system.</p>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of WYOMING

DRUG UTILIZATION REVIEW PROGRAM

Citation(s)	Provision(s)
1927(j)(2) 42 CFR 456.703(c)	<p>J. Hospitals which dispense covered outpatient drugs are exempted from the drug utilization review requirements of this section when facilities use drug formulary systems and bill the Medicaid program no more than the hospital's purchasing cost for such covered outpatient drugs.</p>
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)	<p>K. Claim Review Limitations</p> <ul style="list-style-type: none"> • Prospective safety edits are in place on opioid prescriptions to address days' supply, early refills, duplicate fills and quantity limitations for clinical appropriateness. • Prospective safety edits are in place for maximum daily morphine milligram equivalents (MME) on opioid prescriptions to limit the daily morphine milligram equivalent covered by the Medicaid program. • Retrospective reviews are conducted on an ongoing basis on opioid prescriptions exceeding these above limitations. • Retrospective reviews are conducted on an ongoing periodic basis on concurrent utilization of opioids and benzodiazepines as well as opioids and antipsychotics. <p>L. Programs to monitor antipsychotic medications to children</p> <ul style="list-style-type: none"> • Antipsychotic agents are reviewed for appropriateness for all children, including foster children, based on approved indications and clinical guidelines. <p>M. Fraud and abuse identification</p> <ul style="list-style-type: none"> • The DUR program has established a process that identifies potential fraud or abuse of controlled substances by enrolled individuals, health care providers and pharmacies.