During the COVID-19 public health emergency, the West Virginia Department of Health and Human Resources, Bureau for Medical Services (BMS) allowed pharmacists to provide Medicaid members certain non-controlled prescription medications without getting their signature.

Members were also allowed up to a 90-day supply of certain non-controlled maintenance medications with each refill.

Medicaid claims data from January 2017 to June 2021 were used to look at refill data before the pandemic and after the policy change. The research found that these changes to prescription requirements improved medication access.

Pharmacists were surveyed to provide feedback on the signature policy change, as well as their opinion on the 90-day refill policy. Pharmacists felt that the change in prescription limits were beneficial without leading to waste or fraud and that they would like to take advantage of these policy changes in the future.

Overall, the changes to how pharmacy services were provided worked.
**MAJOR MEDICAID PHARMACY SERVICES FINDINGS**

<table>
<thead>
<tr>
<th>FINDINGS</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td><strong>NO SIGNATURE NEEDED</strong></td>
<td>Not requiring a signature for non-controlled prescriptions worked. 57% of pharmacists felt certain non-controlled prescriptions did not need a members signature. They also agreed that the policy helped with COVID-19 exposure.</td>
</tr>
<tr>
<td><strong>90-DAY REFILLS INCREASED</strong></td>
<td>Members took advantage of 90-day prescription refills. Refills increased substantially after the policy implementation. Compared to the first three months of 2020, the number of 90-day prescription refills following the policy implementation increased by more than 500%, and remained elevated.</td>
</tr>
<tr>
<td><strong>REFILLS REMAINED CONSISTENT</strong></td>
<td>90-day medication refills helped members get the medications they needed. The proportion of days covered among adults aged 18 to 64, and seniors aged 65 and over, remained largely the same from 2017-2020.</td>
</tr>
<tr>
<td><strong>REFILLS IMPROVED PRESCRIPTION USE</strong></td>
<td>Providers felt that 90-day refills improved members taking their medications as prescribed. 72% of pharmacists said that continued use of the 90-day refill policy will improve members taking their medications as prescribed and help reduce medication costs, and 72% also indicated the 90-day policy would particularly benefit members over age 65.</td>
</tr>
<tr>
<td><strong>NO REPORTED WASTE OR FRAUD</strong></td>
<td>Fraud, waste, and abuse were not reported issues with 90-day prescription refills. Only 9% of surveyed pharmacists felt continuing the 90-day refill policy would contribute to fraud.</td>
</tr>
</tbody>
</table>

The information summarized here comes from a larger evaluation on changes to the WV Medicaid system during COVID-19. For additional information, please contact WV Medicaid at DHHR.BMSSupport@WV.gov.
Not requiring a signature for non-controlled prescriptions worked.

57% of pharmacists felt a signature for receipt of non-controlled substances was not needed.

- **40%** Need the signature
- **57%** Not needed
- **3%** Unsure

66% of pharmacists agreed this policy helped reduce COVID-19 exposures, and 56% also agreed this policy has value if maintained in the future.

Pharmacists were also **mixed in their opinions** about this policy.

“**Unless medicines have SIGNIFICANT black market value (controlled substances or otherwise), the signature requirement is just a bureaucratic burden for pharmacist and patient.**” - Surveyed Pharmacist

“I also mentioned accountability because [the signature] has the pharmacy acknowledge that a prescription was picked up and who picked it up as well as the patient.”

- Surveyed Pharmacist
Members took advantage of 90-day prescription refills.

Following the policy implementation, the number of 90-day refills increased by more than 500% and remained elevated.

While 90-day refills increased for medications for diabetes (more than 500%), hypertension (more than 600%), and high cholesterol (about 97%), their 30-day refills decreased by more than 20%.
MAJOR FINDINGS | MEDICAID PHARMACY SERVICES DURING COVID-19

90-day medication refills helped members get the medications they needed.

The proportion of days covered among adults aged 18 to 64, and seniors aged 65 and over, remained largely constant during 2017-2020.

The proportion of days covered among children aged 0-18 remained relatively constant from 2017-2020 for diabetes, hypertension, and high cholesterol drug classes.
Providers felt that 90-day refills improved members taking their medications as prescribed.

“In rural areas it is easier for patients to get their prescriptions. Especially patients who are unable to drive themselves.” - Surveyed Pharmacist

Most pharmacists said that continued use of the 90-day refill policy will improve members taking their medications as prescribed (72%) and help to reduce medication costs (72%). Also, 72% indicated the 90-day policy would particularly benefit members over age 65.

“Many studies have shown that 90-day supplies improve adherence. This is especially true for low-income individuals where transportation can be a major barrier. The company I work for has studied adherence in detail, and 90-day supplies are the second most effective way to improve adherence.” - Surveyed Pharmacist
Fraud, waste, and abuse were not reported issues with 90-day prescription refills.

Only 9% of surveyed pharmacists felt continuing the 90-day refill policy would contribute to fraud.

Only 38% reported the policy may contribute to waste.

"Of course there will be instances when someone’s medication therapy is changed and there will be unused or wasted doses as a consequence, but the benefits of 90 [day] refills outweigh the drawbacks." - Surveyed Pharmacist