

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: West Virginia 4.26 Drug Utilization Review Program

Page 74f

Citation
1902 (a)(85)

K. West Virginia Medicaid has fully implemented 1902(a)(85) in conjunction with Section 1004 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (P.L. 115-271). The State is in compliance with the new drug review and utilization requirements set forth in Section 1902 (a)(1985) of the Act, as follows:

West Virginia Medicaid has safety and clinical edits in place that include:

1. Safety Edits including subsequent opioid fills and maximum daily Morphine Milligram Equivalents (MME)-
 - a. Prospective safety edits on opioid prescriptions to address:
 - i. Days' supply
 - ii. Early refills
 - iii. Duplicate refills
 - iv. Quantity limits
 - v. Daily Morphine Milligram Equivalents (MME) as recommended by clinical guidelines
 - b. Retrospective reviews on opioid prescriptions exceeding:
 - i. Days' supply
 - ii. Early refills
 - iii. Quantity limits
 - iv. Daily Morphine Milligram Equivalents (MME) as recommended by clinical guidelines
2. Concurrent Utilization of Opioids and Benzodiazepines
 - a. The State has implemented DUR edits and retrospectively monitors results of edits for concurrent use of opioids and benzodiazepines on an ongoing basis.
3. Concurrent Utilization of Opioids and Antipsychotics
 - a. The State has implemented DUR edits and retrospectively monitors results of edits for concurrent use of opioids and antipsychotics.
4. Program to Monitor Antipsychotic Medications in Children
 - a. The State has implemented and monitors results of the following DUR edits for children, including foster children, utilizing antipsychotics:
 - i. Age restrictions
 - ii. Diagnosis restrictions
 - iii. Duplication of antipsychotics
5. Process that identifies potential fraud or abuse-
 - A. A lock in program is in place to identify members who meet criteria for doctor shopping or pharmacy hopping in order to obtain inappropriate controlled substances.
 - B. A monthly report of claims that exceed set dollar amounts is generated and reviewed regularly to ensure correct pharmacy billing and appropriate use of the drugs utilized.
 - C. Regular reports of Top Prescribing Providers and Top Pharmacies are generated. Prescriptions generated by the identified prescribers and filled by the reported pharmacies are reviewed for appropriateness.
6. **Annual Report on DUR Activities-** The DUR Coordinator completes a report on DUR Activities and submits it annually to the Center for Medicare and Medicaid (CMS)

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