

**INFORMATIONAL LETTER NO. 2256-MC-FFS**

**DATE:** August 13, 2021

**TO:** Iowa Medicaid Physicians, Dentists, Advanced Registered Nurse Practitioners, Therapeutically Certified Optometrists, Podiatrists, Pharmacies, Home Health Agencies, Rural Health Clinics, Clinics, Skilled Nursing Facilities, Intermediate Care Facilities, Nursing Facilities – Mental ILL, Federally Qualified Health Centers (FQHC), Indian Health Service, Maternal Health Centers, Certified Nurse Midwife, Community Mental Health, Family Planning, Residential Care Facilities, ICF/ID State and Community-Based ICF/ID Providers, and Physician Assistants

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS),

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** September 2021 Iowa Medicaid Pharmacy Program Changes

**EFFECTIVE:** September 1, 2021

**\*\*\*\*This Informational Letter (IL) replaces IL 2245-MC-FFS.\*\*\*\***

**Background:**

The Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act requires state Medicaid programs to have in place prospective safety edits for subsequent fills for opioids. In December 2020, additional minimum standard requirements were added to the rule. To further implement section 1927(g)(1) of the Act, and consistent with section 1004 of the Act, the Centers for Medicare and Medicaid Services (CMS) proposed that states establish safety edit limitations on the days' supply for an initial prescription opioid fill for beneficiaries who have not filled an opioid prescription within a defined time period to be specified by the state.

**Point of Sale (POS) Billing Update:**

Effective September 1, 2021, a prospective drug utilization review (ProDUR) edit of an initial 7-day opioid supply limit for opioid-naïve patients will be implemented. Opioid-naïve is defined as no opioid in Medicaid claims history in the previous 60 days. The claim would need to comply with all other established ProDUR edits.

## Prior Authorization (PA):

PA is required to exceed a 7-day supply in an opioid-naïve member. Requests should be submitted on the **Initial Days' Supply Limit Override PA form**, which is available on the [Preferred Drug List \(PDL\) website](#)<sup>1</sup>. PA criteria to exceed the initial days' supply limit, specific to various scenarios, is as follows:

Requests for medications exceeding the initial days' supply limit require PA. Payment will be considered under the following conditions:

1. Diagnosis is provided; and
2. Medical rationale for exceeding the initial days' supply limit is provided; and
3. Requests for opioids exceeding the 7 day initial supply limit will be considered:
  - a. For patients with active cancer, patients experiencing acute sickle cell crises, end-of-life palliative care, or on an individual case-by-case basis based on medical necessity documentation provided; and
  - b. Request must meet all other opioid requirements (quantity limits, morphine milligram equivalents (MME), and the PDL). If requests do not comply with these requirements, separate, additional PA is required. Please reference and use the following PA forms at the [PDL website](#)<sup>2</sup> where appropriate:
    - i. Quantity Limit Override Form (exceeds established quantity limit)
    - ii. High Dose Opioid PA Form (exceeds established MME limit)
    - iii. Short-Acting Opioids PA Form (non-preferred short-acting opioids)
    - iv. Long-Acting Opioids PA Form (non-preferred long-acting opioids)
4. Requests for non-opioid drugs subject to the initial days' supply limit will be considered on an individual case-by-case basis, based on medical necessity documentation provided.

If you have questions, please contact the appropriate managed care organization (MCO) or the IME Pharmacy POS Helpdesk at 877-463-7671, locally in Des Moines at 515-256-4608, or by e-mail at [info@iowamedicaidpdl.com](mailto:info@iowamedicaidpdl.com).

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<sup>1</sup> [PA Forms | Iowa Medicaid PDL](#)

<sup>2</sup> [PA Forms | Iowa Medicaid PDL](#)