

December 30, 2019

Brian Zolynas
Division of Medicaid and Children's Health Operations
U.S. Department of Health & Human Services
Centers for Medicare & Medicaid Services
90 Seventh Street, Suite 5-300 (5W)
San Francisco, CA 94103-6707

RE: Arizona SPA #19-020, "Opioid DUR"

Dear Mr. Zolynas:

Enclosed is State Plan Amendment (SPA) #19-020, Opioid DUR, which updates the State Plan to comply with SUPPORT Act opioid drug utilization review requirements, effective October 1, 2019. Please see below for information regarding public comment and Tribal Consultation requirements:

Public Comment:

- <https://www.azahcccs.gov/AHCCCS/PublicNotices/>
- <https://www.azahcccs.gov/AHCCCS/PublicNotices/Opioid-DUR.html>

Tribal Consultation:

- <https://www.azahcccs.gov/AmericanIndians/TribalConsultation/meetings.html>
- https://www.azahcccs.gov/AmericanIndians/Downloads/Consultations/Meetings/2019/TC_Master_11052019.pdf

If you have any questions about the enclosed SPA, please contact Alex Demyan at (602) 417-4130.

Sincerely,



Dana Hearn
Assistant Director
Arizona Health Care Cost Containment System (AHCCCS)

cc: Blake Holt, CMS
Brian Zolynas, CMS
Mohamed Arif, AHCCCS

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER <u>1 9 — 0 2 0</u>	2. STATE Arizona
3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
4. PROPOSED EFFECTIVE DATE October 1, 2019	

TO: REGIONAL ADMINISTRATOR
CENTERS FOR MEDICARE & MEDICAID SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

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 42 CFR Part 447	7. FEDERAL BUDGET IMPACT a. FFY 2020 \$ 0 b. FFY 2021 \$ 0
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Page 74 e-f	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (<i>If Applicable</i>) N/A

10. SUBJECT OF AMENDMENT

Updates the State Plan to comply with SUPPORT Act requirements regarding opioid drug utilization reviews.

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

- GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL 	16. RETURN TO Dana Hearn 801 E. Jefferson, MD#4200 Phoenix, Arizona 85034
13. TYPED NAME Dana Hearn	
14. TITLE Assistant Director	
15. DATE SUBMITTED 12/30/2019	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED	18. DATE APPROVED
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL	20. SIGNATURE OF REGIONAL OFFICIAL
21. TYPED NAME	22. TITLE

23. REMARKS

Revision: HCFA-PM-93-3 (MB)
April 1993

OMB No.

State/Territory: Arizona

The State is in compliance with the new drug review and utilization requirements set forth in section 1902(o) of the Act, as follows:

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)

1. Claim Review Requirements

- a. The following Safety Edits have been implemented at the Point-of-Sale including Early, Dosage, Duplicate, and Quantity Limits:
 - i. The state has implemented the following prospective opioid safety edits:
 - (1) Quantity limits, including days' supply limits;
 - (2) Length of therapy limits;
 - (3) Refill frequency (percent to refill) limits;
 - (4) Duplicate fills; and
 - (5) Maximum Morphine Milligram Equivalent (MME) per Day Limits.
 - ii. The state has implemented the following retrospective opioid safety reviews:
 - (1) Quantity limits, including days' supply limits;
 - (2) Length of therapy limits;
 - (3) Refill frequency (percent utilized to refill) limits;
 - (4) Duplicate fills; and
 - (5) Maximum MME/ Day reviews.

2. Concurrent Utilization Alerts

- a. Opioid and Benzodiazepines Current Fill Reviews
 - i. The state has implemented and monitors results of Point-of-Sale alerts for concomitant use of opioids and benzodiazepines.
- b. Opioid and Antipsychotic Concurrent Fill Reviews
 - i. The state has implemented and monitors results of Point-of-Sale alerts for concomitant use of opioids and antipsychotics.

TN No.

Supersedes Approval Date: _____

Effective Date: October 1, 2019

TN No. NEW

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c. Opioid and Antipsychotic and Benzodiazepine Current Fill Reviews

(i)The state has implemented and monitors results of Point-of-Sale alerts for concomitant use of opioids with an Antipsychotic and a Benzodiazepine.

3. Program to Monitor Antipsychotic Medication Use by Children

- a. The state has implemented and monitors the following:
- i. Age restrictions;
 - ii. Quantity limits;
 - iii. Prior authorization for duplicate therapy; and
 - iv. Medication use in Foster Children.

4. Fraud, Waste and Abuse Identification.

- a. The State has implemented policy requirements and monitors the results including but not limited to the following:
- i. Number of opioid prescribers per member;
 - ii. Number of pharmacies utilized per member for opioid fills;
 - iii. Prior authorization requirements for long acting opioids;
 - iv. Controlled Substances Prescription Monitoring Program, the State's PDMP, review for all prior authorization requests for opioids; and
 - v. Controlled and Non-Controlled Utilization including the following:
 1. Atypical Antipsychotics;
 2. Benzodiazepines;
 3. Hypnotics;
 4. Muscle Relaxants;
 5. Opioids
 6. Stimulants; and
 7. Others as identified.

TN No.

Supersedes

Approval Date: _____

Effective Date: October 1, 2019

TN No. NEW