



MedStar Family Choice

MEDICAID OPIOID PRESCRIBING

The Department of Health and Mental Hygiene (DHMH) and the eight Medicaid Managed Care Organizations (MCOs) in the Maryland's HealthChoice Program will implement several policy changes which may affect your practice. These policy changes are being made in light of the increasing number of opioid-related deaths occurring in Maryland and amongst Maryland Medicaid beneficiaries.

These policies pertain to opiate prescribing and are being implemented no later than July 1, 2017 for all Maryland Medicaid Patients, including those served by a MCO or Medicaid Fee-For-Service.

PRIOR AUTHORIZATION (effective July 1, 2017)

Prior authorization will be required for:

- long-acting opioids
- Fentanyl products
- methadone for pain
- any opioid prescription (or combination of opioid prescriptions) that results in a patient exceeding 90 morphine milliequivalents (MME) per day. Instructions on calculating MME are available at: https://www.cdc.gov/drugoverdose/pdf/calculating_total_daily_dose-a.pdf

In order to receive prior authorization, prescribers must attest to the following:

- Prescriber has reviewed controlled substance prescriptions in a Prescription Drug Monitoring Program (Example: CRISP-Chesapeake Regional Information System for our Patients). For more information about the PDMP, visit the DHMH website: <http://bha.dhmh.maryland.gov/pdmp/Pages/Home.aspx>
If you are not already a registered CRISP user you can register for **free** at: https://crisphealth.force.com/crisp2_login
- Prescriber will utilize random Urine Drug Screens.
- Prescriber has provided or offered a prescription for naloxone to the patient or patient's household if the patient has:
 - a history of substance use disorder
 - requires more than 50 MME
 - is prescribed both opioids and benzodiazepines
 - is prescribed other sedative hypnotics
 - or for any other reason deemed clinically appropriate.
- Prescriber and patient have signed a Pain Management/Opioid Treatment Agreement/Contract and it is stored in the patient's medical record.

In the coming months, DHMH will be offering further training on the new opioid prescribing policies outlined here. We urge you to evaluate patients impacted by these policy changes, and where appropriate, step them down to lower doses, or utilize non-opioid first line treatments.