MEDICAID POLICY INFORMATION SHEET

Policy Analyst: Vick	i Goethals
Phone Number: 517	'-335-6611
Initial 🗌	Public Comment 🖂 Final 🗌
Brief description o	policy:
prescription drug pre requirements pursu	2024, a pharmacy may offer a program to automatically refill outpatient oducts provided the pharmacy complies with the following informed consent ant to the Centers for Medicare & Medicaid Services (CMS) published ons to the 2014 Policy on Automatic Delivery of Prescriptions".
Reason for policy (problem being addressed):
•	y consent prior to providing each refill will help ensure medical necessity tion adherence, while also reducing waste.
Budget implication budget neutral will cost MDHHS will save MDHHS	\$, and (select one) budgeted in current appropriation
Is this policy chang	ge mandated per federal requirements?
No	
Does policy have o	perational implications on other parts of MDHHS?
No	
Does policy have o	perational implications on other departments?
No	
Summary of input: controversial (E) acceptable to mo limited public inte	st/all groups
Supporting Docum	entation:
State Plan Amendm If Yes, please provid	· — — · — — —

1/18 Policy Info Sheet

DRAFT FOR PUBLIC COMMENT				
Michigan Department of Health and Human Services	Project Number: 2341-l	Pharmacy Date: October 3, 2023		
	vember 7, 2023	-marmacy Date. October 3, 2023		
Proposed Effective Date: January 1, 2024				
Direct Comments To: Vicki Goethals Address:				
E-Mail Address: go	oethalsv@michigan.gov			
Phone:	Fax:			
Policy Subject: Documenting Beneficiary Consent Authorizing Automatic Refills of Prescribed Pharmacy Products				
Affected Programs: Medicaid, Healthy Michigan Plan, Children's Special Health Care Services (CSHCS), Maternity Outpatient Medical Services (MOMS), Plan First				
Distribution: Pharmacy Providers				
Summary: Effective January 1, 2024, a pharmacy may offer a program to automatically refill outpatient prescription drug products provided the pharmacy complies with the following informed consent requirements pursuant to the Centers for Medicare & Medicaid Services (CMS) published guidance, "Clarifications to the 2014 Policy on Automatic Delivery of Prescriptions".				
Purpose: The purpose of this policy is to ensure compliance with CMS Guidelines for automatic pharmacy refills to reduce fraud, waste, and abuse while additionally assisting in medication adherence.				
Cost Implications: Budget neutral				
Potential Hearings & Appeal Issues: None				
State Plan Amendment Required: Yes \(\subseteq \text{No } \subseteq \) If yes, date submitted: Public Notice Required: Yes \(\subseteq \text{ No } \subseteq \) Submitted date:				
Tribal Notification: Yes ☐ No ⊠ - Date:				
THIS SECTION COMPLETED BY RECEIVER				
☐ Approved	<u>=</u>	Comments		
Discouraced	<u> </u>	ee Comments Below		
Disapproved		ee Comments in Text		
Signature:		Phone Number		
Signature Printed:				
Bureau/Administration (pleas	Date			

Comment001 Revised 6/16

Proposed Policy Draft

Michigan Department of Health and Human Services Behavioral & Physical Health and Aging Services Administration

Distribution: Pharmacy Providers

Issued: December 1, 2023 (Proposed)

Subject: Documenting Beneficiary Consent Authorizing Automatic Refills of

Prescribed Pharmacy Products

Effective: January 1, 2024 (Proposed)

Programs Affected: Medicaid, Healthy Michigan Plan, Children's Special Health Care

Services (CSHCS), Maternity Outpatient Medical Services (MOMS),

Plan First

The purpose of this bulletin is to inform pharmacy providers that, effective January 1, 2024, a pharmacy may offer a program to automatically refill outpatient prescription drug products provided the pharmacy complies with the following informed consent requirements pursuant to the Centers for Medicare & Medicaid Services (CMS) published guidance, "Clarifications to the 2014 Policy on Automatic Delivery of Prescriptions".

This bulletin is also in accordance with the United States Government Accountability Office (GAO) recommendation in its July 2015 report "Medicaid: Additional Reporting May Help CMS Oversee Prescription-Drug Fraud Controls" that Medicaid programs review pharmacy automatic refill programs and corresponding Medicaid policies as a potential concern for waste and unnecessary costs.

Obtaining beneficiary consent prior to enrollment into an automatic refill program will help ensure medical necessity and reduce waste, while also assisting in medication adherence.

Controlled substance refill requirements are still in place.

Informed Consent

Beneficiary participation in an automatic refill program must be voluntary and opt-in only.

Beneficiary consent must be obtained prior to enrollment into an automatic refill program from either the beneficiary or a beneficiary's representative either electronically or in written form.

Consent must be obtained for each prescription. The consent should include, at a minimum, instructions on how to withdraw a prescription medication from refill through the program or to disenroll entirely from the program. For each prescription enrolled in the pharmacy automatic

refill program, the pharmacy shall also obtain an annual renewal consent no later than 12 months since the prescription was previously enrolled in the program.

The pharmacy shall complete a drug regimen review for each prescription refilled through the program at the time of refill.

Each time a prescription is refilled through the program, the pharmacy shall provide a written or electronic notification to the beneficiary or the beneficiary's representative confirming that the prescription medication is being refilled through the program.

The beneficiary or beneficiary's representative shall, at any time, be able to withdraw a prescription medication from automatic refill or to disensoll entirely from the program. The pharmacy shall document and maintain such withdrawal or disensollment.

The pharmacy shall provide a full refund to the beneficiary, beneficiary's representative, or Medicaid for any prescription medication refilled through the program if the pharmacy was notified that the beneficiary did not want the refill, regardless of the reason, where the pharmacy had been notified of withdrawal or disenrollment from the program prior to dispensing the prescription medication.

No reproduction of past signatures is allowed.

Exclusions

A licensed intermediate care facility, as defined in <u>Michigan Public Health Code Article 17</u>, <u>Section 333.20108</u>, that automatically refills prescription medications for Medicaid beneficiaries need not comply with the provisions of this section.

This policy does not affect retail refill reminder programs that require the beneficiary to pick up the prescription.

Documentation Requirements

Written or electronic consent to enroll each medication into a pharmacy's automatic refill program must be retained in accordance with the Medicaid record retention policy.

Signature Log requirements as identified in Medicaid policy bulletin <u>HASA 22-13</u> are still in place.

A pharmacy shall make available any written or electronic notification required by this section in alternate languages as required by state or federal law.

MDHHS recommends that pharmacies have written policies and procedures describing their automatic refill program setting forth, at a minimum, how the pharmacy will comply with these requirements.