

Updated Notice from the Michigan Department of Health & Human Services: Prescription Drug Monitoring Program Requirements for Providers

On October 1, 2021, the MDHHS required Michigan Medicaid providers or their designees who prescribe a controlled substance to:

- Check the Michigan Automated Prescription System (MAPS) for the beneficiary's 12-month prescription drug history before prescribing controlled substances
- Retain documentation of the required MAPS check in accordance with the Medicaid record retention policy

On February 24, 2022, the MDHHS provided clarification on MAPS record retention requirements:

• Documentation of the required MAPS check should be retained in accordance with either the Medicaid record retention policy, or the MAPS record retention policy of five years, whichever applies to the individual provider.

For your convenience, the original bulletin and updated L-letter are attached.



February 24, 2022

<Provider Name> <Provider Address 1> <City> <State> zipcode5-zipcode4

Dear Pharmacy Providers and Medicaid Health Plans:

RE: Clarification of Michigan Automated Prescription System (MAPS) Record Retention

The purpose of this letter is to provide clarification to the record retention requirement noted in bulletin <u>MSA 21-30</u>, Prescription Drug Monitoring Program Requirement for Providers.

This policy contained federal Medicaid requirements for providers to check MAPS prior to prescribing a controlled substance to Medicaid beneficiaries. The federal requirement includes documentation retention requirements. In the policy, the Michigan Department of Health and Human Services (MDHHS) stated that this documentation should be retained in accordance with the Medicaid record retention policy.

MDHHS is clarifying this requirement to accommodate the documentation retention requirements for MAPS set by the Michigan Department of Licensing and Regulatory Affairs (LARA).

Documentation of the required MAPS check should be retained in accordance with either the Medicaid record retention policy, or the MAPS record retention policy of five years, whichever applies to the individual provider.

References:

- MDHHS <u>Medicaid Provider Manual</u>, General Information for Providers, Section 14 Record Keeping.
- LARA MAPS: <u>www.michigan.gov/lara</u> >> Bureau List >> Professional Licensing >> Michigan Automated Prescription System (MAPS) >> MAPS Users or contact <u>BPL-</u> <u>MAPS@michigan.gov</u>.

Any other questions can be directed to Vicki Goethals via email at GoethalsV@michigan.gov.

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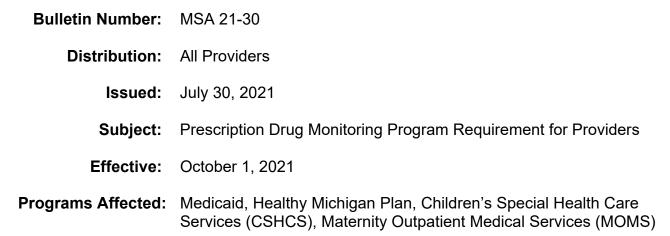
An electronic version of this document is available at <u>www.michigan.gov/medicaidproviders</u> >> Policy, Letters & Forms.

Sincerely,

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Kate Massey, Director Health and Aging Services Administration





Medical Services Administration

The purpose of this bulletin is to notify providers of federal Medicaid requirements that apply to prescribers of controlled substances to Medicaid beneficiaries. These requirements are outlined in Sections 5041 and 5042 of the Substance Use–Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act and the amendment of Title XIX of the Social Security Act (42 USC 1396 et seq.), Section 1944. The purpose of these requirements is to protect Medicaid beneficiaries by strengthening program integrity and care quality.

Effective October 1, 2021, Michigan Medicaid providers or designees of such providers who prescribe a controlled substance are required to check the <u>Michigan Automated Prescription</u> <u>System (MAPS)</u> for the beneficiary's 12-month prescription drug history before prescribing controlled substances. Documentation of the required MAPS check should be retained in accordance with the Medicaid record retention policy.

As a best-practice, Medicaid enrolled pharmacies are encouraged to check MAPS prior to dispensing a controlled substance when providing care to Medicaid beneficiaries based on their professional judgement.

Exemptions to this requirement include:

- Beneficiaries who are receiving cancer treatment or hospice/palliative care in long-term care facilities described in 1396d of Title XIX or other facilities with single pharmacy contract, and
- Prescriptions provided during declared natural disasters or emergency services.

Manual Maintenance

Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be e-mailed to Provider Inquiry, Department of Health and Human Services, at <u>ProviderSupport@michigan.gov</u>. When you submit questions, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 1-800-292-2550. Atypical Providers may phone toll-free 1-800-979-4662.

An electronic version of this document is available at <u>www.michigan.gov/medicaidproviders</u> >> Policy, Letters & Forms.

Approved

Kate Massey, Director Medical Services Administration