



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

Recently, the MDHHS announced prescription drug monitoring program requirements.

Effective October 1, 2021, Michigan Medicaid providers or their designees who prescribe a controlled substance are required 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

For your convenience, a copy of the bulletin is attached.

Bulletin Number: MSA 21-30

Distribution: All Providers

Issued: July 30, 2021

Subject: Prescription Drug Monitoring Program Requirement for Providers

Effective: October 1, 2021

Programs Affected: Medicaid, Healthy Michigan Plan, Children's Special Health Care Services (CSHCS), Maternity Outpatient Medical Services (MOMS)

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 [Michigan Automated Prescription System \(MAPS\)](#) 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 ProviderSupport@michigan.gov. 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 www.michigan.gov/medicaidproviders >> Policy, Letters & Forms.

Approved

A handwritten signature in black ink, appearing to read 'K. Massey', with a long horizontal flourish extending to the right.

Kate Massey, Director
Medical Services Administration