



SEPTEMBER 2020

KMAP GENERAL BULLETIN 20180

CMS Required Retrospective Drug Utilization Review

The Centers for Medicare and Medicaid Services (CMS), in accordance with the HR6 SUPPORT Act, requires an ongoing retrospective review of opioid prescriptions for the following safety concerns:

- Opioid claims exceeding the limitations for day's supply, early refills, duplicate fills, quantity limitations, and maximum daily morphine milligram equivalents (MME), based upon state and national safety standards
- Concurrent use of opioids and antipsychotics
- Concurrent use of opioids and benzodiazepines

Effective with dates of service on and after May 1, 2020, an ongoing review of beneficiary/member claims will be conducted, per the above CMS requirements. Provider education/notification will be communicated when applicable.

Note: The effective date of the policy is May 1, 2020. The implementation of State policy by the KanCare managed care organizations (MCOs) may vary from the date noted in the Kansas Medical Assistance Program (KMAP) bulletins. The KanCare Open Claims Resolution Log on the KMAP Bulletins page documents the MCO system status for policy implementation and any associated reprocessing.

KMAP

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593
- 7:30 a.m. - 5:30 p.m.
Monday - Friday

DXC Technology is the fiscal agent of KMAP.