MEDICAID DRUG UTILIZATION REVIEW

ANNUAL REVIEW REPORT CROSSWALK

Renumbering Changes:

Current		Amended Version	
I.	State Abbreviation	I.	Demographic Information
II.	Medicaid Agency Information	II.	Prospective DUR
III.	Prospective DUR	III.	Retrospective DUR
IV.	Retrospective DUR	IV.	DUR Board Activity
V.	Physician Administered Drugs	V.	Physician Administered Drugs
VI.	DUR Board Activity	VI.	Generic Policy and Data Utilization
VII.	Generic Policy and Utilization Data	VII.	Program Evaluation/Cost Savings/Cost Avoidance
VIII.	Program Evaluation / Cost Savings	VIII.	Fraud, Waste and Abuse Detection
IX.	Fraud, Waste, and Abuse Detection	IX.	Innovative Practices
X.	Innovative Practices	X.	E-Prescribing
XI.	E-Prescribing	XI.	Managed Care Organizations (MCO)
XII.	Null	XII.	Executive Summary

ATTACHMENT 1 – PRODUR REVIEW SUMMARY – **Deleted** due to duplicity

ATTACHMENT 2 – PROSPECTIVE DUR PHARMACY COMPLIANCE REPORT – **renumbered** as ATTACHMENT 1

ATTACHMENT 3 – RETROSPECTIVE DUR SCREENING AND INTERVENTION SUMMARY REPORT – **renumbered and renamed** – ATTACHMENT 2 - RETROSPECTIVE EDUCATIONAL OUTREACH SUMMARY

ATTACHMENT 4 - SUMMARY OF DUR BOARD ACTIVITIES – **renumbered** ATTACHMENT 3

ATTACHMENT 5 - GENERIC DRUG SUBSTITUTION POLICIES **renumbered** ATTACHMENT 4

ATTACHMENT 6 - COST SAVINGS ESTIMATES – **renamed** as COST SAVINGS/COST AVOIDANCE METHODOLOGY and **renumbered** ATTACHMENT 5

ATTACHMENT 7 - PRESCRIPTION DRUG MONITORING PROGRAM **deleted** as the survey questions are sufficient.

ATTACHMENT 8 - INNOVATIVE PRACTICES – **renumbered** ATTACHMENT 6

ATTACHMENT 9 - E-PRESCRIBING ACTIVITY SUMMARY –**renumbered** Attachment 7

ATTACHMENT 8 – EXECUTIVE SUMMARY - **new**

Clarifications:

TABLE 1 -TOP 10 Prospective DUR Criteria Reviewed by DUR BOARD – This Table combines two previous data requests (ATT 1 ProDUR Review Summary and Table 1- ProDUR Criteria reviewed by DUR Board and reduces the data being requested by specifying that only the TOP 10 problems should be reported as opposed to all problems during the previous fiscal year.)

II. MEDICAID AGENCY INFORMATION - #2. and #3. moved to new Section II. Prospective DUR

Deletions from Current version:

II. Medicaid Agency Information - Street Address, City/State/Zip Code –not necessary

III. Prospective DUR – Therapeutic Duplication questions removed as not providing useful information back to states

ATTACHMENT 1 –ProDUR Review Summary- duplicative, information captured in new Table 1.

III. Prospective DUR – Deleted Therapeutic Duplication questions in #5

IV. Retro DUR- deleted #3- due to duplication of information requested.

ATTACHMENT 7- deleted survey questions are sufficient.

Additions to the amended survey submission:

I. Medicaid Agency Information - email address added

II. Prospective DUR- added questions 3, 4, 5, 6, 8,9,11 to clarify the state's processing of data.

III. RetroDUR – Decreased the quantity of data states are to submit for TOP 20 to TOP 10 problems

IV. DUR Board Activity – slightly reworded questions 1, 2 & 3.

VI. Generic policy and Utilization Data –revised wording of question 1, added new question 2 for details regarding "Brand Medically Necessary" practices, renumbered #2 to #3, 3 to 4 and added question 5 asking the states to provide policies that would impact the responses to the previous questions.

VII. Program Evaluation/ Cost Savings – renamed Program Evaluation/ Cost Savings/Cost Avoidance, deleted question 3 as Attachment 6 was eliminated and added chart to capture monetary figures requested and renumbered question 5 to question 3.

VIII. Fraud, Waste and Abuse Detection – Created subsections A- E as listed below-

A. Lock-IN or Patient Review and Restrictive Program-this is refinement of questions 1-4 in the current survey, and have added 2 new questions 5 and 6 to gather further details on how the states operate these programs.
B. Prescription Drug Monitoring Programs- previously there was only question # 4, in the survey on this topic. The new question 1 asks for details on how the state program operates, question 2 inquires if the state faces barriers.
C. Pain Management Controls – is a new section with 4 questions allowing the states to detail if they have a pain management program in place and to detail how it operates.
D. Opioids – new section with 2 questions regarding screening and limitations on prescribing of this drug category.
E. Morphine Equivalent Daily Dose – is a new sections with 3 questions to determine if states have implemented practices to better monitor prescribing of this additive drug category and/to educate prescribers.
F. Buprenorphine – a new section with 5 questions to monitor the prescribing restrictions states have in place for this drug category.
G. Psychotropic Drugs/Stimulants- a new section with 2 questions added to obtain further insight as to how the state is monitoring prescribing of drugs in these categories.

XI. Managed Care Organizations (MCOs) – This is new sections added to better understand the ways state agencies oversee the MCO pharmacy drug programs. Currently MCOs are not required to submit DUR report to CMS. With the movement of large portions of Medicaid populations into MCOs, CMS is interested in having a better understanding of state oversight in this area.

XII. Executive Summary - this a new section however, in the past, states have generally provide a summary report of overall activities during the preceding year, therefore this is not an additional burden but we are providing a specific place to be include it in the report.

INSTRUCTIONS: Nomenclature format for attachments and tables – to provide a standardized format for naming documents when uploading files to the survey tool.