

	DEPARTMENT:	Case Management
	SUBJECT:	Pharmacy Services Lock-In Program
	PRODUCT LINE:	Medicaid
	POLICY NUMBER:	068
	ORIGINAL POLICY EFFECTIVE DATE:	07/01/2013
	LAST REVISED DATE:	05/10/2026
	LAST REVIEWED DATE:	05/10/2026

SCOPE:

The purpose of the Pharmacy Services Lock-In Program is to coordinate the provision of health care services for members who abuse or misuse Medicaid benefits by seeking duplicate or medically unnecessary services, particularly for controlled substances. The Pharmacy Services Lock-In Program focuses on the abuse or misuse of prescription benefits for controlled substances. The abuse and misuse definition includes:

- Not duplicating or altering prescriptions
- Not feigning illness, using false pretense, providing incorrect enrollment status, or providing false information to obtain service
- Not seeking duplicate care from more than one provider for the same or similar condition
- Not seeking medical care that is excessive or not medically necessary

Coordination of member health care services through the Pharmacy Services Lock-In Program is intended to:

- Curb the abuse or misuse of controlled substance medications.
- Improve the quality of care for a member.
- Reduce unnecessary physician utilization.

The Pharmacy Services Lock-In Program is administered by HID (Health Information Designs, Inc.). HID may be contacted by telephone at 800-225-6998, extension 3045, by fax at 800-881-5573, or by mail at the following address:

Pharmacy Services Lock-In Program
c/o Health Information Designs
391 Industry Dr
Auburn AL 36832

POLICY:

Members remain enrolled in the Pharmacy Services Lock-In Program for two years and are continuously monitored for their prescription drug usage. At the end of the two-year enrollment period, an assessment is made to determine if the member should continue enrollment in the Pharmacy Services Lock-In Program. The member's utilization of services is reviewed prior to release from the Pharmacy Services Lock-In Program, and lock-in providers are notified of the member's release date.

Members enrolled in the Pharmacy Services Lock-In Program will be locked into one pharmacy where prescriptions for restricted medications must be filled and one prescriber who will prescribe restricted medications. Restricted medications are most controlled substances, carisoprodol, and tramadol. ForwardHealth will only cover restricted medications for the member when they are ordered by the lock-in prescriber and filled at the lock-in pharmacy.

Members who are candidates for enrollment in the Pharmacy Services Lock-In Program are sent a letter of

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intent, which explains the restriction that will be applied, how to designate a primary prescriber and a pharmacy, and how to request a hearing if they wish to contest the decision for enrollment (that is, due process). If a member fails to designate providers, the Pharmacy Services Lock-In Program may assign providers based on claims' history. In the letter of intent, members are also informed that access to emergency care is not restricted.

PROCEDURE:

Pharmacy Services Lock-In Program Process based on the DHS Retrospective Drug Utilization Review Program

1. DHS identifies the lock-in pharmacy.
2. GHC works with the member to identify the lock-in primary prescriber and when appropriate an alternate prescriber for restricted medications.
3. GHC coordinates the Pharmacy Services Lock-In Program for members with DHS and communicates with the DHS designated representative.
4. DHS provides an electronic monthly report to GHC that identifies any members that are in the Pharmacy Services Lock-In Program.
5. When GHC receives notification from DHS that a member is in the Lock-In Program the following will occur:
 - Case Management staff (Case Manager if member is in complex case management program or a Health Education Specialist) contact the member to discuss the Pharmacy Services Lock-In Program and the required forms and helps the member identify their Pharmacy Services Lock-In Program prescribing provider and their lock-in pharmacy.
 - GHC contacts the identified lock-in prescribing provider to discuss their role in the Pharmacy Services Lock-In Program. Pharmacy Services Lock-In Prescribers are required to be enrolled in Wisconsin Medicaid.
 - Member has the Pharmacy Services Lock-In Program prescribing provider and lock-in pharmacy complete the forms and send to DHS. Remind member if they do not send the forms in, DHS will assign a lock-in prescriber and lock-in pharmacy.
 - DHS send notification letters to the member, the prescribing provider and the lock-in pharmacy once providers are designated.
 - GHC will notify DHS, the lock-in member, the primary prescribing provider, any alternative prescribers when a member is enrolled in the Pharmacy Services Lock-In Program.
 - Pharmacy Lock-In Correspondence is uploaded into the electronic care management system as a document labeled correspondence.
 - Mark the LIP box in electronic care management system.

HMO Member Referral to the Pharmacy Services Lock-In Program

1. GHC can refer a member to the Pharmacy Services Lock-In Program if any of the following are documented:

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- a. Evidence of the member intentionally providing incorrect information on eligibility status or medical history to a provider to obtain restricted medications.
 - b. Evidence of the member being convicted within one year of a crime (such as forgery, theft, distribution etc.) related to restricted medications.
 - c. Two or more occurrences of violating a pain management contract within six months from the same of different prescribers.
 - d. Any combination of four or more medical appointments/urgent care visits/ emergency department visits within a 14-day time period at which the member is seeking a restricted medication as the primary reason for the visits.
 - e. A member required an ER visit of hospitalization due to suicide attempt, poisoning, or overdose from the use of restricted medications in the last 90 days.
2. GHC will review Pharmacy Services Lock-In Program members at the end of the two-year enrollment period to determine if the member should continue enrollment in the Pharmacy Services Lock-In Program and notify DHS of the recommendation.
 3. GHC prepares all documentation and acts as the DHS representative for member appeals to the Division of Hearings and Appeals related to the Pharmacy Services Lock-In Program referrals.

HMO Request for a Selected Review of Member Prescription Drug Use

HMOs not wishing to refer a member to the Pharmacy Services Lock-In Program yet concerned about the member's abuse of misuse of restricted medications, may request a selected review of the member's paid pharmacy claims. To request a selected review, GHC completes and submits the Pharmacy Services Lock-In Program Request for Review of Member Prescription Drug Use form, F-00250.

APPROVED: *Michele Bauer MD.*

DATE: 5/10/2026

REVISION HISTORY:

Rev. Date	Revised By/Title	Summary of Revision
07/01/2013	Carol E. Ebel, RN HM Mgr	New P & P
02/15/2014	Lynne Komanec, RN HM Manager	Reviewed with no changes
1/12/15	Betsy Kelly, RN	Minor formatting changes.
01/14/2016	Betsy Kelly, RN	Reviewed with no changes.
5/17/2022	Michele Bauer, MD, CMO	Updated policy to include DHS contract language.
5/17/2023	Michele Bauer, MD, CMO	Reviewed. No changes.

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5/15/2024	Michele Bauer, MD, CMO	Reviewed. No changes.
5/10/2025	Michele Bauer, MD, CMO	Reviewed. No changes.
5/10/2026	Michele Bauer, MD, CMO	Reviewed. No changes.