



**Executive Office of Health and Human Services  
RI Department of Human Services  
Drug Utilization Review (DUR) Board Meeting Minutes  
Tuesday, December 14, 2021  
10:30 a.m.**

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| DUR Board Members Attending | Richard Wagner, MD (Brown)<br>Jerry Fingerut (EOHHS)<br>Linda Rowe-Varone, PharmD, BCPP<br>Mark Lorson, PharmD, BCACP, BCGP (NHPRI) |
| Others Attending            | Kelly Leighton (Gainwell Technologies)<br>Ann Bennett, MHSA (Gainwell Technologies)<br>Heather Kissinger, PharmD (Kepro)            |

The meeting began at 10:50 a.m. The minutes of the June meeting were approved as written.

**DUR Topics for Follow-Up**

The Board reviewed Prescribing Patterns after provider education mailings.

For the letter addressing the concurrent use of benzodiazepines and opiates, 9 recipients were identified and reviewed, and 9 cases were created during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021 which represented 0.02% of the FFS population. 4 responses have been received so far. Denominators included 446 recipients receiving benzodiazepines and 237 recipients receiving opioid prescriptions. Benchmarking against another state showed 35,300 recipients receiving a benzodiazepine, 48,769 patients receiving an opioid, and 8,000, or 0.94% of the population receiving concurrent therapy. The Board noted that Rhode Island FFS had a much lower percentage of concurrent therapy compared to the benchmark state. The Board requested to add language into the concurrent therapy letter requesting that prescribers check the PDMP prior to dispensing controlled substances. Kepro would work with Gainwell to modify the letter and Kepro would follow-up in April.

Utilization of atypical antipsychotics under the indicated age during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021 was presented to the Board, 4 recipients were identified during 2<sup>nd</sup> quarter and 8 recipients were identified during 3<sup>rd</sup> quarter, 4 of which overlapped from 2<sup>nd</sup> quarter. 0.05% of the RI FFS Medicaid pediatric population received atypicals under the indicated age during 3<sup>rd</sup> quarter and benchmarking against another state showed approximately 3% of the pediatric population received atypicals under the indicated age. The Board requested to send the list of recipients to Karen who were lacking appropriate diagnosis for use to ensure proper utilization and location of recipient. The Board requested to continue tracking this issue going forward. Kepro would follow-up in April.

For the intervention addressing recipients receiving > 90 MME (Morphine Milligram Equivalent) daily, 4 recipients were identified, and 4 cases were created during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021. 1 response has been received so far and the denominator was 237 unique recipients received an opioid over the two quarters combined. Additionally, Kepro reported as follow-up that 18 recipients were identified, and 18 cases were created during the entire year lookback with a denominator of 543 recipients receiving an opioid during 2020 which were sent to Karen to determine location. The Board requested to benchmark against another state during the next meeting and continue tracking this intervention. Kepro would follow-up in April.

For the intervention addressing stimulant exceeds max dose, 20 unique recipients were identified, and 20 cases were created during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021. 4 responses have been received so far and the denominator was 491 unique recipients received a stimulant. Per follow-up, Kepro reported a breakdown of all recipients who were identified by the stimulant max dose criteria for 2<sup>nd</sup> and 3<sup>rd</sup> quarter data, including age, medication, dose received, and specifically recipients ≥ 40 years of age receiving stimulants exceeding the max dose with a history or risk of cardiovascular disease. No prescriber trends were identified during the targeted review. Kepro reported that benchmarking against another state was not an option due to the same criteria not being active in other states. The Board stated that review of the stimulant class occurred during the P&T meeting and the committee was appreciative that the class in unrestricted and the medications, both stimulant and non-stimulants were not being used outside of their indications. The Board requested to repeat the mailer for 4<sup>th</sup> quarter and report back. Kepro would follow-up in April.

For the request to review patients receiving an opioid with no naloxone, 14 recipients and 14 cases were created with 5 responses received during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021. The denominator for opioid utilization was 237 unique recipients. During the previous meeting the Board requested to modify the criteria to look back 365 days for naloxone use and to also add a lookback of 365 days to the poisoning diagnosis in the alternate opioid non naloxone criteria. Kepro stated this change could not be completed due to system limitations of 180 day lookback into claims for DUR criteria. The Board discussed concomitant dispensing of naloxone with opioid prescriptions noting that in certain instances patients refuse naloxone or on second opioid fills patients may not need another prescription for naloxone. Neighborhood commented that Lifespan pharmacy has a message built into their POS system in order to promote the dispensing of naloxone with each opioid prescription. The Board requested to know if the recipient review included nursing home patients. Kepro stated that nursing home patients enrolled in FFS Medicaid were included in the review. The Board discussed whether naloxone prescriptions were reported to the PDMP. Kepro stated they were and would send the Board information regarding RI PDMP requirements via email. Per a P&T committee request, the Board requested to know of each opioid claim dispensed during 4<sup>th</sup> quarter 2021, how many instances was naloxone dispensed on the same date of service for the recipient receiving the opioid claim. The Board also requested to continue the mailer for 4<sup>th</sup> quarter 2021. Kepro would follow-up in April.

Kepro presented two tramadol criteria for follow-up and DUR Board discussion. After the June DUR meeting the Board requested to modify the alert message for criteria 720, concurrent SSRI and tramadol use and criteria 723, concurrent opioid and tramadol use. Kepro presented the DUR Board suggestions and requested assistance with modified alert messages. The Board recommended to leave the alert message as written and table indefinitely as the board member who requested the modifications was not present.

For the intervention addressing tramadol utilization, Kepro reported that 33 unique recipients received 59 total prescriptions for tramadol products during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021. 2 unique recipients were targeted, one for concurrent use of tramadol with sertraline, and another for concurrent use of tramadol with a phenothiazine. The Board requested to know if the recipient who was receiving tramadol and sertraline had a history or medication that would indicate a seizure disorder. The Board requested to continue review of the tramadol criteria for intervention on a monthly basis. Kepro would follow-up in April.

Outside of the requested specialty mailing requests, Kepro presented information regarding 3 additional follow-up items: naloxone utilization, movement disorder/tardive dyskinesia medication utilization, and SGLT-2 and GLP-1 agent utilization.

For the follow-up item addressing naloxone utilization, Kepro reported that 28 prescriptions were filled for 27 unique recipients during 2<sup>nd</sup> quarter and 32 prescriptions were filled for 31 unique recipients during 3<sup>rd</sup> quarter 2021. Benchmarking against another state showed approximately 0.36% of the state's population received a naloxone prescription during 2<sup>nd</sup> and 3<sup>rd</sup> quarter. The Board requested to know the percentage of Rhode Island's FFS population and continue tracking. Kepro would follow up in April.

For the follow-up item addressing the newer movement disorder/tardive dyskinesia medication utilization, Kepro reported that there was no utilization for Austedo or Ingrezza during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021. Neighborhood commented that these medications are high spend medications and use for their population is trending upwards, in part due to a movement disorder clinic in the state. The Board requested to continue tracking utilization for 4<sup>th</sup> quarter 2021 and benchmark. Kepro would follow-up in April.

For the follow-up item addressing the utilization of SGLT-2 and GLP-1 agents, KEPRO reported that 46 unique recipients received these agents during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021. Per follow-up, Kepro reported that 40 recipients had a diagnosis of diabetes, 1 recipient had a diagnosis of cardiovascular disease without diabetes, and 5 recipients did not have any diagnosis data or other medications that would indicate the indication for use. The Board requested to benchmark and continue tracking utilization for 4<sup>th</sup> quarter 2021. Kepro would follow-up in April.

#### **ADURS (American Drug Utilization Review Society) Topics**

The Board reviewed slides that presented recent ADURS topics. Topics reviewed included: the DUR Board composition, CMS clarifies PDMP data requirement, Lucemyra coverage, Aduhelm coverage, PDMP reporting, and DUR Board authority for identifying fraud and abuse of prescription drugs.

#### **Top 10 Medications by Utilization & by Pharmacy Paid Amount**

The Board reviewed slides that presented the top 10 medications by utilization and by pharmacy paid amount during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021.

#### **High Volume Prescribers of Opioids**

The Board reviewed a slide that presented high volume prescribers of opioids for 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021. The Board requested to continue tracking the high volume prescribers on a quarterly basis.

#### **Opioid Utilization Report**

The Board reviewed slides that presented long and short acting opioid utilization during 2<sup>nd</sup> and 3<sup>rd</sup> quarter 2021. Overall number of claims compared to the number of claims for short acting and long acting agents was reviewed.

#### **P&T Committee Requested Topics**

Additional topics for review requested by the P&T committee for the April meeting included: review of opioid rescue medications concomitantly dispensed with opioids, super long acting injectable atypical antipsychotics with benchmark, continued tracking of newer movement disorder medications, and continued review of stimulant medication utilization specifically looking at pre and post COVID utilization rates. Kepro would follow-up in April.

#### **Meeting Confirmation and Adjournment**

Pending in person meeting space availability and reservations, the 2022 DUR meetings were confirmed as: April 12<sup>th</sup>, June 7<sup>th</sup>, September 20<sup>th</sup>, and December 13<sup>th</sup>. The meeting adjourned at 11:40 a.m.