



**Executive Office of Health and Human Services
RI Department of Human Services
Drug Utilization Review (DUR) Board Meeting Minutes
Tuesday, April 12, 2022
10:30 a.m.**

DUR Board Members Attending	Richard Wagner, MD (Brown) Mark Lorson, PharmD, BCACP, BCGP (NHPRI)
Others Attending	Karen Mariano (Gainwell Technologies) Ann Bennett, MHSA (Gainwell Technologies) Heather Kissinger, PharmD (Kepro)

The meeting began at 10:45 a.m. The minutes of the December 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 4th quarter 2021 which represented 0.007% of the FFS population. 0 responses have been received so far. Denominators included 265 recipients receiving benzodiazepines and 117 recipients receiving opioid prescriptions. Benchmarking against another state showed 0.46% of the population receiving concurrent therapy. The Board requested to continue tracking this issue going forward. Kepro would follow-up in June.

Utilization of atypical antipsychotics under the indicated age during 4th quarter 2021 was presented to the Board, 6 recipients were identified during 4th quarter accounting for 0.03% of the RI FFS Medicaid pediatric population. Benchmarking against another state showed approximately 2% of the pediatric population received atypicals under the indicated age during 4th quarter. Kepro reported on the list of 3rd quarter recipients who were lacking appropriate diagnosis for use and reported none had received appropriate diagnoses. Per DUR Board request, Kepro also reported on patient location of 3rd quarter recipients receiving atypicals under the indicated age. The Board commented that benchmarking is beneficial to the program and requested to continue tracking atypical antipsychotics under the indicated age on a quarterly basis. Kepro would follow-up in June.

For the intervention addressing recipients receiving > 90 MME (Morphine Milligram Equivalent) daily, 0 recipients were identified during 4th quarter 2021. The denominator was 117 unique recipients received an opioid during 4th quarter. Additionally, Kepro reported as follow-up that 15 recipients were identified, and 15 cases were created during the entire year lookback of 2020 with a denominator of 543 recipients receiving an opioid. The Board previously requested the location of the 15 unique recipients and Kepro shared this information which was compiled by Gainwell. The Board requested to continue tracking this intervention. Kepro would follow-up in June.

For the intervention addressing stimulant exceeds max dose, 9 unique recipients were identified, and 9 cases were created during 4th quarter 2021. No responses have been received so far and the denominator was 387 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 4th 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 requested to continue tracking this intervention. Kepro would follow-up in June.

For the request to review patients receiving an opioid with no naloxone, 8 recipients and 8 cases were created with 2 responses received during 4th quarter 2021. The denominator for opioid utilization was 117 unique recipients. Neighborhood commented that during 4th quarter approximately 4,800 recipients received opioid agonists without naloxone and 345 recipients received opioid agonists with naloxone dispensed at some point during the quarter. The Board commented that benchmarking is helpful to see other population utilization trends. The Board requested to continue the mailer for 1st quarter 2022. Kepro would follow-up in June.

For the intervention addressing tramadol utilization, Kepro reported that 21 unique recipients received 62 total prescriptions for tramadol products during 4th quarter 2021. 5 unique recipients were targeted, one for tramadol use in renal impairment, two for concurrent use of tramadol with a SSRIs, one for tramadol use in the pediatric population, and another for therapeutic duplication of tramadol products. Kepro reported that tramadol made up 26% of all opioid claims for RI FFS during 4th quarter, compared to 19% for a benchmark state. Gainwell commented that 26% is accurate for RI FFS as all tramadol prescriptions require a prior authorization (PA) which are processed by Gainwell. Gainwell commented that opioid PA claims often lack pertinent information. Neighborhood added that they don't track tramadol utilization. Previously the Board requested to know if the recipient who was receiving tramadol and sertraline during 3rd quarter had a history or medication that would indicate a seizure disorder. Kepro reported that the recipient did not have a history of or medication that would indicate seizure disorder. The Board requested to continue tracking tramadol criteria for 1st quarter only and to not mail any additional letters. Kepro would follow-up in June.

Outside of the requested specialty mailing requests, Kepro presented information regarding 6 additional follow-up items: naloxone utilization, movement disorder/tardive dyskinesia medication utilization, SGLT-2 and GLP-1 agent utilization, opioid rescue medications concomitantly dispensed with opioids, super long acting injectable antipsychotic utilization, and pre/post COVID stimulant medication utilization.

For the follow-up item addressing naloxone utilization, Kepro reported that 20 prescriptions were filled for 19 unique recipients during 4th quarter 2021 accounting for 17% of the recipients' receiving opioids. Benchmarking against another state showed approximately 9% of the recipients' receiving opioids received a naloxone prescription during 4th quarter. The Board requested to continue tracking. Kepro would follow up in June.

For the follow-up item addressing the newer movement disorder/tardive dyskinesia medication utilization, Kepro reported that 1 recipient received Austedo during 4th quarter 2021. Kepro reported that the recipient had been receiving long term therapy with fluphenazine with an extensive history of schizoaffective disorder but did not have a diagnosis of tardive dyskinesia. Neighborhood commented that they have seen an increase in Ingrezza and Austedo over the past couple years. The Board commented that bipolar and schizoaffective disorder have a fourfold risk of tardive dyskinesia. The Board requested to continue tracking utilization and benchmark. Kepro would follow-up in June.

For the follow-up item addressing the utilization of SGLT-2 and GLP-1 agents, Kepro reported that 39 unique recipients (0.07% of FFS population) received these agents during 4th quarter 2021. Per follow-

up, Kepro reported that 34 recipients had a diagnosis of diabetes, 1 recipient had a diagnosis of cardiovascular disease without diabetes, and 4 recipients did not have any diagnosis data or other medications that would indicate the indication for use. Benchmarking against another state showed 1.41% of their population received these medications during 4th quarter 2021. The Board requested to continue tracking utilization. Kepro would follow-up in June.

For the follow-up item addressing the utilization of opioids and naloxone simultaneously, Kepro reported that of the 235 opioid prescriptions dispensed to 117 unique recipients during 4th quarter, 7 unique recipients received both an opioid and naloxone on the same date of service. 1 additional unique recipient received naloxone during 4th quarter, just not on the same date of service as the opioid dispensed. The Board recommended to stop tracking this issue.

For the follow-up item addressing the utilization of super long acting injectable antipsychotics, Kepro reported that 25 unique recipients received prescriptions and none of the recipients were hospitalized during the quarter. Neighborhood commented that many of their patients on long acting injectable antipsychotics start the medications based on court orders that last up to 6 months and once the 6 months have passed they cease utilization. Neighborhood commented that hospital prevention compared to the cost of the medication is net zero for most patients. The Board commented that these medications are primarily used to prevent hospitalizations. The Board requested to repeat this review targeting the start date of the injectable antipsychotic and look back 1 year to determine if any hospitalizations occurred prior to starting the medication. Kepro would follow-up in June.

For the follow-up item addressing pre/post COVID stimulant utilization, Kepro reported that utilization by quantities dispensed declined by 17% when comparing 2021 to 2019. The Board discussed a decline in opioids and buprenorphine, theorizing that utilization of illicit drugs may be on the rise due to the decline of prescription opioids and medication assisted treatment. Neighborhood requested Kepro report on similar information for buprenorphine, looking at unique recipients who received treatment during 2019 and then compare to utilization during 2021 to determine what percent remained adherent to treatment through COVID. Kepro would follow-up in June.

ADURS (American Drug Utilization Review Society) Topics

The Board reviewed slides that presented recent ADURS topics. Topics reviewed included: Hepatitis C, digital therapeutics, Medicaid coverage for at home COVID test kits, and Omnipod Dash coverage.

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 4th quarter 2021.

High Volume Prescribers of Opioids

The Board reviewed a slide that presented high volume prescribers of opioids for 4th 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 4th 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 June meeting included: review of medications recommended by the American Diabetes Association (ADA) for weight loss in patients with

Type II Diabetes and increased Body Mass Index (BMI), and review of glimepiride utilization and hypoglycemic events. Kepro would follow-up in June.

Meeting Confirmation and Adjournment

Pending in person meeting space availability and reservations, the remaindered 2022 DUR meetings were confirmed as: June 7th, September 20th, and December 13th. The meeting adjourned at 11:28 a.m.