



Executive Office of Health and Human Services
RI Department of Human Services
Drug Utilization Review (DUR) Board Meeting Minutes
Tuesday, June 9, 2020
10:30 a.m.

DUR Board Members Attending	Richard Wagner, MD (Brown) Jerry Fingerut (EOHHS) Linda Rowe-Varone, PharmD, BCPP Steve Kogut, PhD, MBA, RPh (URI) Mark Lorson, PharmD, BCACP, BCGP (NHPRI)
Others Attending	Karen Mariano, RPh (DXC Technology) Ann Bennett, MHSA (DXC Technology) Heather Kissinger, PharmD (HID)

The meeting began at 10:33 a.m. The minutes of the December meeting were approved with the following changes:

- Page 2, paragraph 1, remove the last sentence regarding follow-up in April.
- Page 2, paragraph 6, remove “for the December meeting.”
- Page 2, paragraph 7, remove “for the December meeting.”

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, 24 recipients were identified and reviewed, and 24 cases were created during 4th quarter 2019 and 1st quarter 2020. 5 responses have been received so far. Denominators included 656 recipients receiving benzodiazepines and 330 recipients receiving opioid prescriptions. The Board agreed that the cases where prescribers were different was problematic. NHP reported a recent review of concurrent benzodiazepines, opioids, and muscle relaxers where certain cases were referred to fraud, waste and abuse due to a prescriber not practicing in the state anymore. The Board discussed algorithms for dose intensity of benzodiazepines, dosing intervals, benzodiazepines with no active metabolites (oxazepam, lorazepam, and temazepam) versus clonazepam with active metabolites and a long half-life. The Board requested to continue the concurrent opioid and benzodiazepine targeted intervention going forward and provide specifics on how the criteria parameters during the next meeting. HID would follow up in September.

Utilization of atypical antipsychotics under the indicated age during 4th quarter 2019 and 1st quarter 2020 was presented to the Board, 6 recipients were identified during 4th quarter and 7 recipients were identified during 1st quarter. HID stated that 3 recipients identified were from the previous quarter. The Board questioned about the 17-year-old recipient who received clozapine during 4th quarter and requested more information. HID stated the recipient was not identified during 1st quarter 2020 so potentially aged out or is no longer covered under FFS. The Board requested DXC to determine the 17 year old’s coverage from 4th quarter and to continue tracking this issue going forward. HID would follow-up in September.

For the intervention addressing recipients receiving > 90 MME (Morphine Milligram Equivalent) daily, 13 recipients were identified, and 13 cases were created during 4th quarter 2019 and 1st quarter 2020. 4

response has been received so far and the denominator was 330 unique recipients received an opioid. The Board requested to repeat the mailer. HID would follow-up in September.

For the intervention addressing recipients receiving ≥ 365 days' supply of a proton pump inhibitor (PPI), 22 recipients were identified, and 22 cases were created. During the previous meeting the Board requested the denominators and a report on responses received. HID stated the denominator for PPI use was 1,499 unique recipients and 5 responses were received. The Board discussed concurrent PPI and NSAID use where long-term PPI use may be appropriate. The Board determined this was not an issue.

For the intervention addressing recipients receiving methadone maintenance with concurrent opioid prescriptions, 6 recipients were identified during 4th quarter 2019 and 3 recipients were identified during 1st quarter 2020, all 3 patients were from the previous quarter. Additionally, over the past 4 quarters there have been 2 unique recipients consistently receiving concurrent methadone maintenance with opioid prescriptions. The Board requested to know if NHP was performing a similar intervention. NHP responded that in order to review they would need behavioral health data. The Board requested HID to repeat the mailer for the 3 recipients identified during 1st quarter, report the number of recipients during the next meeting for 2nd quarter, and graph, over time. HID would follow-up in September.

Outside of the requested specialty mailing requests, HID presented information regarding 8 additional follow-up items; opioid induced constipation (OIC) agent utilization, naloxone utilization, biologic agent utilization, tramadol utilization, stimulant utilization, atypical antipsychotic utilization in recipients < 18 years of age, unique recipients receiving > 10 prescriptions per month, and statin utilization.

For the follow-up item addressing OIC agent utilization, HID reported that 3 unique recipients received the OIC medication Movantik during 4th quarter 2019 and 1st quarter 2020. 2 recipients were receiving concurrent suboxone and 1 recipient was not receiving concurrent opioid therapy. The Board requested that DXC and HID work to review and approve RDUR criteria to review OIC medication utilization within the FFS population and report back during the next DUR meeting. HID would follow up in September.

For the follow-up item addressing naloxone utilization, HID reported that 54 prescriptions were filled during 4th quarter 2019 and 62 prescriptions were filled during 1st quarter 2020. NPH reported approximately 800 prescriptions were filled during 4th quarter 2019 and approximately the same number filled during 1st quarter 2020. NPH also reported the number of unique recipients, showing approximately 60 unique recipients filled more than 1 naloxone prescription each quarter. The Board requested HID to continue utilization review and add unique recipients to utilization data reported. HID would follow up in September.

For the follow-up item addressing biologic agent utilization, HID presented 6 different classes of biologics, FDA approved indications, and utilization. The Board requested HID to work with DXC for the recipients with missing diagnoses for use and to continue utilization review. HID would follow up in September.

For the follow-up item addressing tramadol utilization, HID reported that 40 unique recipients received 103 total prescriptions for tramadol products during 4th quarter 2019 and 1st quarter 2020. HID presented limitations around tramadol utilization from other states to provide insight into other states PA options. DXC discussed prospective options for tramadol monitoring within RI FFS which included: daily accumulator, days' supply, and point of sale warning for concurrent therapy. The Board discussed prescribers assuming less risk with tramadol compared to other opioids which is not the case. The

Board discussed the risk of seizures associated with tramadol, as well as other medications such as fluoroquinolones and bupropion, which has a dose related curve except during sleep. The Board requested that HID report on the percentage of tramadol prescriptions compared to all opioids during the next DUR meeting. HID would follow-up in September.

For the follow-up item addressing stimulant medication utilization, HID reported that 48 new criteria were developed to target max daily dosing for stimulant products. During the previous cycle 10 unique recipients were identified by the max dosing criteria with 325 unique recipients receiving any stimulant medication during the same time frame. The Board requested to review the stimulant max dose criteria during the next quarter. HID would follow-up in September.

For the follow-up item addressing atypical antipsychotic utilization in recipients < 18 years of age (yoa), HID reported that 153 unique recipients < 18 yoa received atypicals during 4th quarter 2019 and 1st quarter 2020. 13 unique recipients < 18 yoa received more than 1 atypical, 65 unique recipients < 18 yoa received concurrent therapy with a stimulant and 27 received concurrent therapy with a sedative hypnotic. The Board requested that DXC and HID work to review and approve RDUR criteria to review atypical antipsychotics used concurrently with sedatives hypnotics/anxiolytics and review during the next quarter. HID would follow-up in September.

For the follow-up item addressing recipients receiving greater than 10 regularly prescribed medications per month, HID reported that 34 unique recipients were identified during 1st quarter 2020 and approximately 9,800 unique recipients filled prescriptions during the same timeframe. The Board discussed polypharmacy and incidence increases as the age of a patient increases referencing a recent R1 APCD study that found 7% of adults ≥ 50 years of age received > 10 medications chronically. DXC stated a report would be provided during the next meeting to show the age breakdown for FFS enrollees.

For the follow-up item addressing statin utilization, HID reported that 778 unique recipients filled a statin prescription during 1st quarter 2020. 361 recipients were male, and 417 recipients were female. The Board requested to re-run the query reviewing age by decade and the male/female ratio for each decade. HID would follow-up in September.

ADURS (American Drug Utilization Review Society) Topics

The Board reviewed slides that presented recent ADURS topics. Topics reviewed included: Medication Assisted Treatment (MAT), Advisory Community on Immunization Practices (ACIP), waiving proof of delivery, and an update on the CMS survey.

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 2019 and 1st quarter 2020.

High Volume Prescribers of Opioids

The Board reviewed a slide that presented high volume prescribers of opioids for 4th quarter 2019 and 1st quarter 2020. The Board requested DXC and HID to review the claims detail and perform an internal analysis of outliers based on the highest prescriber use rates. HID would follow-up in September.

Opioid Utilization Report

The Board reviewed slides that presented long and short acting opioid utilization during 4th quarter 2019 and 1st quarter 2020. Overall number of claims compared to the number of claims for short acting and long acting agents was reviewed as well as annual counts of long and short acting opioids by year from 2015 - 2019.

HR-6 and FFY 2019 CMS Report Update

DXC provided an update regarding HR-6 specific to point of sale communications on overlapping claims and the accumulator edit. DXC provided an update regarding the FFY 2019 CMS report and the extension of due date to September 30th.

New Business

The Board requested the following topics to be reported on during the September meeting; utilization of HIV medications for appropriate indication, utilization of glucagon compounds to determine appropriate utilization, SGLT2 and GLP-1 utilization for appropriate use, and migraine preventative treatment utilization. HID would follow-up.

Meeting Confirmation and Adjournment

The 2020 DUR meetings were confirmed as: September 15th, December 15th. The meeting adjourned at 11:59 a.m.