

Minutes  
Drug Utilization Review Board Meeting  
DATE: June 9, 2010



**Meeting Purpose:** Quarterly Open Board Meeting  
Meeting opened at 6:10 PM by Chair, Patrick Reilly.

**Agenda Items:**

- I. Welcome and Introductory Remarks
- II. Acceptance of March 2010 DUR Board Minutes
- III. Special Populations Program Update
- IV. Clinical Updates
- V. Topical NSAID QA
- VI. MassHealth Drug List
- VII. DUR Operational Update
- VIII. MassHealth Update      Paul Jeffrey, MassHealth

| Agenda Item       |  | Discussion   | Conclusions/Follow Up                      |
|-------------------|--|--|--|
| Review of Minutes |  |  | <u>Follow Up</u>                           |
| March, 2010       |  |  |  |
| Action            |  | A motion to approve the March 2010 DUR Board Minutes was made and seconded as written. | <u>Conclusions</u><br>Approved as written. |

| Agenda Item                               | Discussion  | Conclusions/Follow Up   |
|---|---|---|
| <b>Special Populations Program Update</b> | A brief overview of Community Case Management was presented. Program data, Special Populations Program growth and case studies were discussed. Currently there are 611 members.   | <u><b>Follow Up</b></u>   |
| <b>Action</b>                             | The MH 'Special Populations' pharmacy program continues to expand services to SWM and MH programs. Cost savings/cost avoidance has been identified as additional benefits of this value added service. Identified trends prompt development of a proactive pharmacy intervention process. | <u><b>Conclusions</b></u><br>This program represents an effective strategy to enhance the quality of care for members as a direct result of collaborative efforts between MH and CWM. |

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| <b>Clinical Updates</b> | An overview of DUR clinical accomplishments and projects for fiscal year July 09 –June 10 was given. New drug reviews, new clinical guidelines and updates, quality assurance analyses, therapeutic class reviews and initiatives were highlighted.   | <u><b>Follow Up</b></u>  |
| <b>Action</b>           | 68 new drug reviews<br>44 new drugs placed on prior authorization<br>47 new therapeutic tables<br>44 guidelines are currently online<br>Cost data are given on 10 tables<br>37 QA's were prepared<br>3 therapeutic class reviews were completed<br>7 initiatives took place including, but not limited to:<br>Antipsychotics/hypnotics, age restrictions, high utilizers and diabetic test strips | <u><b>Conclusions</b></u><br>It has been a very productive, busy year. The September drug list will be long. |

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| <b>Topical NSAID QA Analysis</b> | <p>The objectives for the analysis were given. Topical NSAID agents were listed along with the current MassHealth policies. A summary of approvals and denials from 146 prior authorizations was highlighted. A cost comparison from October 1, 2009 to March 31, 2010 was reviewed.</p> <p>Ten other insurance coverage examples were reviewed.</p>  | <u><b>Follow Up</b></u>  |
| <b>Action</b>                    | <p>New approval criteria:</p> <p>Diagnosis of acute pain caused by minor strains, sprains and contusions or osteoarthritis</p> <p>AND</p> <p>Any ONE of the following:</p> <ul style="list-style-type: none"> <li>History of a major gastrointestinal (GI) bleed, perforation or obstruction</li> <li>History of a peptic ulcer, hemorrhagic gastritis, hemorrhagic gastropathy, or erosive esophagitis or esophageal varices</li> <li>Concomitant therapy (or pharmacy claims) for an anticoagulant or antiplatelet agent (including aspirin), or chronic oral corticosteroid.</li> <li>Renal insufficiency</li> <li>GERD</li> <li>Inadequate clinical response, adverse reaction, or contraindication to acetaminophen (APAP)*</li> </ul> <p>AND</p> <p>at least 2 different generic NSAIDS</p> <p><i>*APAP trial is NOT required if diagnosis is inflammatory in nature.</i></p> | <u><b>Conclusions</b></u> <p>Recommendations included the following:</p> <ul style="list-style-type: none"> <li>Change PA requirement on Voltaren® topical gel for quantities ≤ 100 grams per month</li> <li>Expand approval indications for topical NSAID agents</li> <li>Add additional language to approval criteria with regard to GI conditions and NSAID use, anticoagulation, renal function, APAP use in inflammatory pain diagnoses</li> <li>Require a trial of Voltaren® prior to Flector®</li> </ul> <p>Add Pennsaid® to the guideline with same criteria as Flector®</p> |

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|-----------------------------|--|---|
| <b>MassHealth Drug List</b> | <p>There are 16 new additions effective August 2, 2010. Changes in Prior Authorization status effective August 16, 2010 were reviewed.</p> <p>Changes to the MassHealth Drug List Therapeutic class tables were discussed – evaluation criteria and cost data on the following tables will be available on August 3, 2010:</p> <p>Table 34- Antibiotics: Ophthalmic<br/> Table 48- Antiparkinsonian Agents<br/> Table 49- Calcium regulators and misc. osteoporosis agents</p> <p>There was discussion regarding drug interaction concerns with Exalgo, which will require a PA.</p> | <p><b><u>Follow Up</u></b></p>                        |
| <b>Action</b>               | <p>Regranex will require a PA for all quantities<br/> Lotemax, Ontak, and Zmax will require a PA<br/> Restasis will require a PA for quantities greater than 64 units/month.<br/> PA requirements for IV antibiotics are changing. Cubicin, Synercid, Tygacil and Zyvox will require prior authorization.</p>  | <p><b><u>Conclusions</u></b></p> <p>Informational</p> |

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| <b>DUR Operational Update</b> | <p>Prior Authorizations and call volumes from April 2009 to March 2010 remained consistent with the previous year's volumes.</p> <p>DUR call statistics from April 09 to March, 2010 showed a very low abandonment rate of 0.50% in March, 2010 however handling time was up slightly.</p> <p>Appeals peaked in May, 2009 with 35, and the lowest appeals month was March, 2010 with 9.</p> <p>Provider outreach, a new area being presented, showed that outreach calls increased steadily. In July, 09 there were 108 provider outreach calls initiated from DUR staff compared to 495 in March, 2010.</p> | <b><u>Follow Up</u></b>   |
| <b>Action</b>                 |  | <b><u>Conclusions</u></b><br><br>A high volume of work for DUR was noted. |

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| <p><b>MassHealth Update</b><br/><b>Paul Jeffrey</b></p> | <p>FY 11 is about to begin. MassHealth Pharmacy is financially on target with a \$500 M budget but the Federal Government is considering rescinding \$690 million from the Commonwealth in enhanced FMAP. This would pose significant problems as approximately \$17 million is slated for the Pharmacy Program. With these difficult times amidst us some services have unfortunately been lost. MassHealth no longer provides adult dental services.</p> <p>On March 23, 2010 Patient Protection and Affordable Care Act was passed. It contained some 2,000 pages. The rebate provision survived this Act but the MCO project was halted mid April due to the Act having somewhat ambiguous language. The PPACA allows the state to collect rebate on drugs paid by the Medicaid MCOs.</p> <p>A portion of the <b>enhanced</b> rebates for drugs, including MCO paid claims, will be recaptured by the Federal Government starting effective January 1, 2010.</p> <p>Accomplishments were highlighted.</p> <p>MassHealth converted to a preferred diabetes test strip on April 1<sup>st</sup>. This has been a successful accomplishment.</p> <p>The Antipsychotic state wide initiative is going well. We are currently in the first wave of using prior authorization to help manage step therapy in this class and all is going well.</p> <p>Some HIV and cancer treatment drugs will be available generically as new opportunities for cost savings.</p> <p>FY11 will bring a new claims processing system. POPS III is being built. The MassHealth Drug List will move to a new platform with drop down menus and electronic scribing. The creation of a new template design is in process. Also, we will be looking for supplemental rebates with manufacturers soon.</p> | <p><u><b>Follow Up</b></u></p>   |
| <p><b>Action</b></p>                                    |  | <p><u><b>Conclusions</b></u></p> |

Meeting adjourned at 8:05 PM.

Respectfully submitted by: Vincent Palumbo, Director of DUR    Date: \_\_\_\_\_

