Drug Utilization Review Board Meeting Minutes September 17, 2008

The West Virginia Medicaid Drug Utilization Review Board meeting was called to order with the following in attendance:

Members Present:

Dan Dickman, M.D., Chairperson Scott Brown, R.Ph.
Chris Terpening, PharmD., Ph.D.
John R. Vanin, M.D.
Lester Labus, M.D.
Ernest Miller, D.O.
Myra Chiang, M.D.
Steve Judy, R.Ph.
K.C. Lovin, PA-C
Kerry Stitzinger, R.Ph.
Karen Reed, R.Ph.

Members Absent:

Mary Nemeth-Pyles, M.S.N., R.N., C.S. Greenbrier Almond, M.D. Pat Regan, PharmD. David Elliott, PharmD.

DHHR/BMS Staff Present:

Peggy King, R.Ph. Pharmacy Director Gail Goodnight, R.Ph.Rebate Coordinator Vicki Cunningham, R.Ph., DUR Coordinator William B. Hopkins, Pharmacy Operations Manager Lynda Edwards, Secretary

Contract Staff:

Steve Small, R.Ph, Rational Drug Therapy Program Joe Paradis, PharmD., Health Information Designs Eric Sears, R.Ph, Unisys

I. INTRODUCTIONS

Daniel Dickman, Chairman, welcomed everyone to the Board meeting. Members of the Board and interested parties introduced themselves.

II. APPROVAL OF THE MAY 14, 2008, MINUTES

A motion was made to accept the minutes of the May 14, 2008 DUR Board meeting as written. The motion was seconded and passed unanimously.

III. OLD BUSINESS

A. Report from Nominating Committee and Election of Officers for 2009-2010

The Nominating Committee reported that they had been unable to meet and would present a slate of officers for election at the November 19, 2008 meeting.

IV. NEW BUSINESS

Dr. Dickman presented the following items of new business:

A. Presentation from Ethics Commission

Dr. Dickman introduced Theresa Kirk, an attorney from the Ethics Commission. Ms. Kirk discussed the Ethics Act and defined the Board members' responsibilities related to confidential information that might be obtained as a member of the Board. She also discussed the limitations on gifts and honorariums received from entities that are affected by decisions of the DUR Board. Ms. Cunningham said that avoiding the appearance of impropriety is very important and that DUR Boards have come under scrutiny because of various articles in newspapers and journals regarding the relationships of health care providers to drug companies. She said that this training will be provided on a regular basis so that the Board members, since they are classified as public servants, will be aware of changes to the Ethics laws.

B. Automated Prior Authorization Application – Update on Implementation

Ms. Cunningham said that the pharmacy program has received \$4.2 million for purchasing technological products to provide enhanced medication management. An Automated Prior Authorization System will be added to the Point of Sale system and will be implemented on November 18. Health Information Designs (HID) won the contract for the Auto PA, and was represented by Joe Paradis.

Mr. Paradis gave a brief overview of the process and also said that some prior authorizations would still need to be done manually. The Rational Drug Therapy Program will continue to issue those prior authorizations. He reviewed flow sheets with examples of PA criteria that can be implemented in the Auto PA system. He said any changes to criteria could be entered and implemented overnight. The Automated PA system can check the present criteria and past history to see if approved drugs have been used before issuing a prior authorization for a non-preferred drug. The Board can decide how far the system should search for a diagnosis or history of past use of preferred agents and that will be programmed into the system. Ms. Cunningham said that all the criteria has been entered into the system and will be tested over the next two weeks. She said it will allow BMS to require the appropriate diagnosis for many drugs without requiring additional phone calls or faxes from prescribers and providers.

Ms. Cunningham asked the Board to review a spreadsheet of therapeutic classes of drugs and decide the appropriate length for trials of preferred agents and also the length of time that PA should be issued for several classes of drugs. In the interest of time, it was decided that the Bureau should set the length of time for trials of non-preferred agents and the duration of the PA and report them back to the DUR Board for review.

V. <u>REPORTS</u>

A. Rational Drug Therapy Program

Steve Small, Director of the Rational Drug Therapy Program (RDTP), discussed utilization for the quarter. He reported on edit overrides and prior authorizations given. He then reported the number of denied claims and approved claims. He stated that the average wait time on the phones does not exceed three minutes.

He discussed the problems with duplication of drug classes being requested and the problems with *bid* and *tid* dosing requests for drugs intended for once daily use. He said that these were opportunities for provider education.

The new criteria change for narcotics was discussed and the ability of some clients to pay cash for these drugs while still on Medicare and Medicaid. The limitations placed on these drugs were to deter the amount of drugs available to sell on the street. Ms. Cunningham will provide reports to the Board about narcotic utilization as they become available.

B. Health Information Designs

Joe Paradis, HID, stated that HID has sent out 1355 letters including over 7000 patients regarding antipsychotics and the guidelines. He also discussed the bronchodilators and the fact that albuterol is still available in CFC canisters.

Mr. Paradis presented reports on muscle relaxant utilization and asked if the Board wanted to focus a population based intervention on their chronic use. It was decided that limiting the duration of use for muscle relaxants might lead to an increase in the number of controlled pain medications that are prescribed.

Ms. Cunningham stated that the utilization of proton pump inhibitors continued to grow every quarter and doses for acute problems were often continued chronically. She said that some programs have been developed to educate providers regarding appropriate use and weaning patients to H₂ blockers when appropriate. She will bring these to the Board for their review in the future.

C. Unisys Report

Eric Sears gave an overview of the Unisys Quarterly Report (2nd Quarter 2008). It was asked if our utilization compared favorably with other states. Mrs. King stated it did compare favorably with other states in the SSDC pool.

D. <u>OTHER BUSINESS</u>

None.

E. OPEN TO THE FLOOR

There were no comments from the floor.

F. <u>NEXT MEETING AND ADJOURNMENT</u>

A motion was made and seconded that the meeting be adjourned. All were in favor. The meeting was concluded at 6 p.m. The next meeting will be held on November 19, 2008, from 4:00 p.m.-6:00 pm.

Respectfully submitted,

Lynda L. Edwards Secretary