



Drug Utilization Review Board Meeting Minutes February 13, 2024

DRAFT pending approval at the next meeting

DUR Board Members in attendance:

Virtual: Jennifer Meyfeldt, M.D., Charlie Moore, R.P., Dave Randolph, R.P.

DUR Board Members not in attendance: Tim Bourke, R.P., Tom Dunn, R.P., Robert Wergin, M.D.

A quorum of three voting members were in attendance.

Nebraska Medicaid & LTC attendees in person: Carisa Schweitzer Masek, R.P., Deputy Director Population Health; Leah Spencer, R.N., Program Specialist; Dianne Garside, R.P.

Contracted attendees: Virtual: Bernadette Ueda, R.P., United Health Care; Jamie Benson, R.P., Nebraska Total Care; Shannon Nelson, R.P., Molina Healthcare of Nebraska.

Nikia Bennette-Carter, R.P. and Shaleigh Hammons, Account executive., Magellan RX Management.

Public visitors in attendance in person: Tami Sova, Biogen; Jessi Bennett, Biocryst; Giuseppe Miranda, Biocryst. Others virtually.

I. Opening and Introductions

The meeting was called to order by Carisa Schweitzer at 6:32 pm when a quorum was achieved. The meeting was held at the Best Western Plus Lincoln Inn & Suites in Lincoln, NE. A copy of the Open-Meetings Act was available.

II. Conflict of Interest or changes

No changes in conflict of interest were declared.

III. Agenda approval

The agenda was unanimously approved.

IV. Approval of Minutes from DUR Board, November 2023 meeting

The minutes were unanimously approved.

V. Special Topics

A. Legislative Session Update:

Schweitzer Masek provided an update on the Nebraska legislative session that could impact pharmacy:

- Establish an increased fee-for-service (FFS) pharmacy fee until a cost of dispensing survey is completed at which time a dispensing fee cost would be determined by the survey. The MCO dispensing fee would be reimbursed in accordance with the established FFS dispensing fee. Amended to independent pharmacies.

- Establish a standard process for prior authorizations of prescription drugs.
- PBMs and how medications may be dispensed change and requirements for specialty pharmacy.
- Expand coverage for anti-obesity medications and intensive behavioral therapy.

B. Draft Schedule for 2024 projects

Masek asks the Board which previously voted upon project should be initiated for the next meeting.

Moore indicates that diabetes ties to the weight loss project which will be reviewed later. After discussion, the state will bring back data on diabetes diagnosis and outpatient hospital service as current HEDIS measure for the next meeting.

Data on concurrent opioids/benzodiazepines and atypical anti-psychotics data will be later in the year.

Masek asks the MCOs to consider how they could partner with the State in gathering data for obesity for children and adults.

C. Average Manufacturer Price (AMP) CAP Removal effect on the Preferred Drug List

Changes were made to the State preferred drug list due to preferred drugs affected by the (AMP CAP Removal), which were discontinued. The State moved alternate drugs to the preferred status due to this impact.

Garside indicates that non-preferred fluticasone (generic Flovent) is currently being set up for allowing use in pediatric patients 8 years of age and younger without a prior authorization. Arnuity Ellipta is also a preferred fluticasone medication currently.

VI. Retrospective DUR

A. Old Business- none

B. New Business: Lithium Prescriptions and Blood Level Data Review

Masek reviews DUR project data on members with a Lithium RX and lithium blood level.

Results show that an average of 72.8% of members had a lithium level within 6 months of the first Lithium dispensed date. 72% of those members filled 6 or more Lithium RX.

Moore states concern as to whether member lithium levels are being routinely drawn.

He suggests looking for blood levels at one year and 18 months of the dispensed date.

Meyfeldt suggests that we should look at prescriber specialty to see if there are trends as to who is or is not prescribing lithium levels.

VII. Prospective DUR

A. Old Business- none

B. New Business- Hereditary Angioedema Agent Review (HAE)

Dianne Garside reviewed the current prior authorization criteria for HAEs. The recommended change is to remove the requirement of trial and failure/contraindication to Danazol. The recommendation was unanimously approved. Representatives from Biocryst deferred testimony.

VIII. Future Meeting Date

The next meeting is scheduled for Tuesday, May 7, 2024.

IX. Concerns & Comments

Board:

Charlie Moore states that as a provider in January 2024, he has noted difficulties with member changes across MCOs with first of the year enrollment.

He also states that reimbursement from the MCOs has changed and that payment to pharmacy providers is to be per a digital card. Jamie Benson from NTC counters that she had read that letter and it is specific to medical benefit for DME, not pharmacy benefit. NTC provider relations will contact Moore to discuss this concern and provide information. NTC will also reach out to NPA.

Meyfeldt acknowledges that she has noted an uptick in cancellations for appointments.

Randolph states that he has seen members confused on their membership as of the first of the year.

The NMES lines and electronic system can be used to verify member eligibility.

DUR Director and State representatives: None

Magellan representatives: None

Managed Care Organization (MCO) representatives: None

Public attendees: None

X. Adjournment

The motion to adjourn the meeting was unanimously approved. Schweitzer Masek adjourned the meeting at 7:35 p.m.