



Drug Utilization Review Board Meeting Minutes July 13, 2021 Webex virtual webinar

DUR Board Members in attendance: Kevin Borchert, RP; Tim Bourke, RP; Charlie Moore, RP; Anthony Ross, MD; Phil Vuchetich, RP; Robert Wergin, MD

DUR Board Member not in attendance: Susan Howard, MD; Bruce Houghton, MD; David Randolph, RP;

DHHS attendees: Ken Saunders, RP; Leah Spencer, R.N; Spencer Moore, RP

Contracted attendees: Nikia Bennette-Carter, RP, Magellan Rx Management, Jenni Pandak, Magellan RX Management; Jamie Benson, RP, Nebraska Total Care; Shannon Nelson, RP, Healthy Blue Nebraska; Bernadette Ueda, RP, United Health Care.

Numerous Public visitors were in attendance per Webex webinar.

I. Call to Order:

The meeting was called to order by Ken Saunders on July 13, 2021 at 6:35 pm CDT. Members and attendees were welcomed. The Open-Meetings Act was made known as available on the NE Medicaid pharmacy website.

II. Conflict of Interest

No conflicts of interest were declared.

III. Agenda approval

The July 13, 2021 meeting agenda was accepted as presented. Motion by Borchert and seconded by Vuchetich. Unanimous vote in the affirmative.

IV. Meeting Minutes May 11, 2021

Vuchetich and Borchert reviewed and presented various grammatical, spelling, or other edits for the Minutes from May 11, 2021 DUR meeting. Motion by Ross and second by Wergin approve the edited minutes. The minutes were voted upon and passed as edited by the DUR Board members.

V. Finalization of the Recommendations for change of the DUR Board Policy

A discussion concerning the definition of a quorum, voting on items with and without a quorum and updating the DUR Board Policy was spearheaded by Vuchetich and Borchert at the May 11, 2021 Meeting. Ken Saunders finalized the editing of the DUR Board Policy Statement and brought to DUR Board members for approval. Motion by Borchert to approve as edited. It was seconded by Wergin. Vote by DUR Board members to accept as edited was unanimous. This final version will be placed on the DUR Board website for Public view.

VI. Retrospective DUR

DUR Board Members reviewed and commented on the completed Hepatitis C medication criteria and the Hepatitis C Prior Authorization forms. Items reviewed and approved. Items will be placed on the DUR Board website.

Spencer Moore went over the Data packet that was provided to the DUR Board members.

- MME limits Data
- Other states MME limits
- Percentage of patients utilizing opioids prior to and after Medicaid expansion
- Neighboring states stimulant utilization numbers
- Insulin ± Sulfonylurea ± Glucagon
- Diagnosis Matching

MME data reviewed pertaining to MME limit, prescribers, and number of prescriptions per month from a MME limit of 250 in June 2019 to a final tapering of MME limit of 90 in December 2020. MME data discussion of how Nebraska ranks with the neighboring states also occurred. The opioid data was expanded to include pre-Medicaid expansion and post-Medicaid expansion. Considering the numbers of new patients to Nebraska Medicaid due to the expansion, the opioid utilization was proportional in respect to total members versus percentage of total members pre-Medicaid expansion and post-Medicaid expansion that have prescriptions for opioids.

Utilization of Stimulants was reviewed. Moore stated that three neighboring states provided Stimulant claims numbers for CY 2020. The numbers looked proportional to the size of the state. Saunders asked Borchert about utilizing the PDMP to get a more accurate number of prescriptions, providers, etc. Borchert said that CyncHealth, (Nebraska's PDMP) is looking at expanding the capabilities of the PDMP program. This would be one of the areas that is being considered for PDMP expansion. More to follow.

The review of the Insulin ± Sulfonylurea ± Glucagon use history was presented by Moore. Of the total number of claimants, only 10.6% had a paid claim for glucagon within 12 months or less of filling insulin ± sulfonylurea. The physicians were polled and they were split as far what they prescribe. They primarily write for injectable glucagon or oral glucose gel.

Moore's final topic was the Diagnosis Matching review project. Summary of the discussion: DHHS can perform limited linking on diagnosis to Rx but are completely dependent on matching to a professional claim. There are significant quality issues that affect the final accuracy of the results. If medical records or extra resources beyond our current capabilities become available, then more accurate and capable analysis could be completed.

VII. Future Meeting Dates

The next DUR Board meeting will be Tuesday September 14, 2021. Saunders reminded everyone that he will let everyone know whether the September meeting will be virtual or in person. Please refer to the DUR Board website for the WEBEX meeting information, the Agenda and the DRAFT Minutes from the July 13, 2021 meeting. Either way, the DUR Board meeting will begin at 6:30 PM CDT. Saunders will send out individual email packets for the DUR Board members' review.

VIII. Concerns & Comments

There were no concerns or comments by any of the DUR Board members, DHHS Staff, or MCO's. Evelyn McKnight called in as a Public Member attendee to discuss the F2 to F0 change in Hepatitis treatment and with concern over Nebraska Medicaid's sobriety-mandate and wondering about a so-called "Hepatitis Bias". She discussed the 99 cases of Hepatitis C seen in and around the Fremont area. The DUR Board acknowledged her comments and the members thanked her for her testimony.

IX. Adjournment

A motion was made by Wergin to adjourn the meeting. A second was made by Burke. The vote was unanimously approved. The meeting was adjourned at 7:46 PM.