

Nebraska Medicaid DUR Board Meeting  
Tuesday, May 1, 2018  
*DRAFT pending approval at July Meeting*

**DUR Board Members in Attendance:**

Kevin Borchert, RP  
Lynn Carlson, RP  
Eric Gall, RP  
Bruce Houghton, MD  
Norman Kelley, MD  
Nichole Lux, UNMC PharmD Candidate  
Roger Mattson, RP  
Charlie Moore, RP  
Marcia Muetting, RP  
Dave Randolph, RP  
Phil Vuchetich, RP  
Bob Wergin, MD

**DUR Board Members not in Attendance:**

Shana Castillo, RP  
Madeline Leiter, CU PharmD Candidate  
Susan Howard, MD  
Kirk Muffly, MD

**Guests in Attendance:**

Jill Bot, RP, Magellan Medicaid Administration  
Jessica Czechowski, RP, Magellan Medicaid Administration  
Jenny Minchow, RP, Nebraska Medicaid & LTC Services  
Kevin Peterson, RP, Nebraska Total Care  
Bernadette Ueda, RP, United Health Care  
Jeanne Cavanaugh, United Health Care  
Anita Brown, UNMC PharmD Candidate  
Shannon Nelson, RP, WellCare of Nebraska

**Public Members in Attendance:**

Kim Witte, Avexis  
Berenk Koops, Merck  
Rick Kegler, Otsuka  
Nancy Bell, Pfizer

**I. Opening and Introductions**

The meeting was called to order at 6:40 p.m. by DUR Director, Marcia Muetting. The Director noted that a copy of the Open Meeting Laws and the meeting materials were available. Public attendees were asked to complete the sign-in sheet if they wished to be listed in the minutes as attending. Board members, guests, and public attendees introduced themselves.

**II. Declaration of Any Conflict of Interest Changes**

No changes were declared.

**III. Review of Agenda**

A motion was made by Phil Vuchetich, with a second from Bob Wergin, to approve the agenda as presented. Vote as follows: Borchert-yes, Carlson-yes, Gall -yes, Houghton-yes, Kelley-yes, Mattson-yes, Moore-yes, Randolph-yes, Vuchetich-yes, and Wergin-yes. Motion carried.

#### **IV. Review of Minutes from March Meeting**

A motion was made by Charlie Moore, with a second from Phil Vuchetich, to approve the minutes as presented. Vote as follows: Borchert-abstain, Carlson-yes, Gall -yes, Houghton-abstain, Kelley-yes, Mattson-abstain, Moore-yes, Randolph-yes, Vuchetich-yes, and Wergin-yes. Motion carried.

#### **V. Update on Recommendations from March Meeting**

No discussion.

#### **VI. Retrospective DUR**

##### **A. Current Profile Review**

##### **1. Restricted Services (Lock-Ins)**

Marcia Mueting reported that in FFS the criteria for restricted services is utilizers of 6 or more prescribers and 3 or more pharmacies in a month. One patient met the criteria in March, however, upon review no concerns were noted. No patients met the criteria in April.

Shannon Nelson shared that for WellCare of Nebraska (WC) 57 patients were reviewed in March. Additional criteria were applied to the review, including 6 or more visits to 3 or more emergency rooms, which resulted in a sooner identification of early pregnancy. There were 18 patients referred to Case Management, and 4 patients were placed in Restricted Services. Two patients were referred to the Medical Director for review with PCP for safety reasons. In April, 21 patients were reviewed, 5 were referred to Restricted Services, one patient was removed from Restricted Services upon biennial review. 15 patients were referred to Case Management and 4 patients had interventions with the PCP by the Medical Director.

Bernadette Ueda of United Health Care (UHC) reported that in March, 130 patients were in Restricted Services and Case Management. Two patients are in Restricted Services for emergency room treatment, 8 are restricted to a single pharmacy and 15 patients are restricted to a single pharmacy, prescriber and emergency room. Restricted services reviews are based on 9 different targeted therapies.

Kevin Peterson of Nebraska Total Care (NTC) explained that in February, 5 patients were removed from Restricted Services, 2 were referred to Case Management and one patient was added to Restricted Services. In March, 16 patients were evaluated for Restricted Services and 2 patients were removed from Restricted Services, 2 were added. In April, 35 patients were reviewed, 13 were referred to Case Management, 7 were removed from Restricted Services and 4 were added.

##### **2. Use of 4 or More Psychotropics in Children**

Jill Bot reported that 2 patients in Fee-For-Service met the criteria and 2 letters were sent to prescribers. No responses have been received.

Bernadette Ueda reported that for UHC, 325 patients of 6,506 met the criteria, utilizing 206 unique prescribers. Letters to the prescribers are in process of review.

Kevin Peterson explained that for NTC, 47 patients met the criteria utilizing 33 providers. Numbers are likely low because this is being monitored by the PUMR Team monthly. To date, 13 responses were received. Two prescribers plan to discontinue one or more medications. NTC will re-send letters to non-responders. The PUMR Team will follow up with responders noting that the information was useful, but do not plan to make changes.

Shannon Nelson noted that for WC, 99 patients met the criteria. 75 of those patients were on 4 meds, 20 were on 5 meds, 3 were on 6 or more meds and 1 patient was on 8 meds. Letters to the prescribers are in process.

##### **B. Recommendations for Future Profile Reviews**

The Director asked the MCOs to bring information on reviews that they have done recently and share their results. WC had performed reviews regarding patients taking anticoagulants and having a bleeding event that required treatment. Claims between April 4 and July 12, 2017 were reviewed for patients who received greater than a 60-day

supply. 8% of these patients had a GI bleed and 2 % had a CNS bleed. Letters were sent to 75 prescribers. No responses were received, as the letter was educational. The criteria were developed by WC's national DUR Board. WC also performed a review of patients taking both gabapentin and pregabalin. 909 patients had an overlap of at least 101 days in a national study. 18 patients in Nebraska met the criteria. An edit messaging the pharmacy has been added.

UHC reported a comprehensive retroDUR program, with recent improvements including more real-time data to address issues quickly with six categories: drug-drug interactions, drug-disease interactions, overutilization, drug-age precautions, therapeutic duplication, and narcotic utilization. In the first quarter of 2018, there was outreach to 2,402 unique providers.

NTC uses the corporate DUR team criteria for additional projects. They sent 72 letters to prescribers of patients using 121 or more MME; excluding those on hospice or have a diagnosis of cancer or sickle cell disease. There was a 41% response rate, with 11% of responders noting that the patient was not theirs. They have reached out to patients that have overutilized the emergency room. Another project examined non-adherence in patients taking long-acting injectable antipsychotics. Patients were contacted if there was a gap in medication use of 10 days or more. 21 patients were identified in March who also had an emergency room visit within 15 days of being non-adherent.

**VII. Prospective DUR**

**A. Old Business**

**1. MME Daily Limit**

This limit is under review by DHHS. The Board discussed the limits recommended by the DUR Board in January and the upcoming limits in Medicare Part D. There was support for parody of these limits with Nebraska Medicaid.

**2. 7-Day Limit in Opioid Naïve Patients**

DHHS is in planning stages for implementation of this limit. The Board discussed whether there is a solid reason to restrict to multiple 7-day initial limits. Jessica Czechowski shared information from the implementation of Colorado's limits.

**VIII. Special Requests from the Department**

Jenny Minchow noted that the Department may have the DUR Board review the Hepatitis C PA Criteria at the July meeting.

**IX. Future Meeting Dates**

July 10, 2018  
September 11, 2018  
November 6, 2018  
January 8, 2019  
March 12, 2019  
May 14, 2019  
July 9, 2019  
September 10, 2019  
November 12, 2019

**X. Concerns and Comments from**

Board: None  
Director: None  
State Representatives: None  
MCO Representatives: None  
Public Attendees: None

**XI. Adjournment**

A motion to adjourn at 8:16 p.m. was made by Phil Vuchetich with a second from Bruce Houghton. Vote as follows: Borchert-yes, Carlson-yes, Gall-yes, Houghton-yes, Kelley-yes, Mattson-yes, Moore-yes, Randolph-yes, Vuchetich-yes, and Wergin-yes. Motion carried.