MISSISSIPPI DIVISION OF MEDICAID DRUG UTILIZATION REVIEW (DUR) BOARD MINUTES OF THE JUNE 10, 2021 MEETING

DUR Board Roster:	Sep	Dec	Mar	Jun
State Fiscal Year 2021	2020	2020	2021	2021
(July 1, 2020 – June 30, 2021)				
Lauren Bloodworth, PharmD	~	~	✓	✓
(Chair)				
Terrence Brown, PharmD	NA	NA	✓	
Patrick Bynum, MD	NA	NA	√	✓
Rhonda Dunaway, RPh	\checkmark	\checkmark	√	✓
Tanya Fitts, MD	\checkmark	\checkmark	~	
Philip Merideth	NA	NA	√	✓
Ray Montalvo, MD	\checkmark	\checkmark		✓
Holly Moore, PharmD	\checkmark		√	
Janet Ricks, DO	✓		√	
Cheryl Sudduth, RPh	✓	✓		
				\checkmark
James Taylor, PharmD	✓	\checkmark	\checkmark	
Alan Torrey, MD		~		\checkmark
TOTAL PRESENT**	9	7	9	7

** Total Present may not be reflected by individual members marked as present above due to members who either resigned or whose terms expired being removed from the list.

Also Present:

Division of Medicaid (DOM) Staff:

Terri Kirby, RPh, CPM, Pharmacy Director; Dennis Smith, RPh, DUR Coordinator; Gail McCorkle, RPh, Clinical Pharmacist; Chris Yount, MA, PMP, Staff Officer – Pharmacy;

University of Mississippi School of Pharmacy - MS-DUR Staff:

Eric Pittman, PharmD, MS-DUR Project Director; Kaustuv Bhattacharya, Research Assistant Professor; Yiran Rong, DUR Analyst;

Conduent Staff:

Leslie Leon, PharmD, Clinical Pharmacist, Mississippi Medicaid Project; Lew Anne Snow, RN, BSN, Pharmacy Services Sr. Analyst, Mississippi Medicaid Project;

Change Healthcare Staff:

Paige Clayton, PharmD, On-Site Clinical Pharmacist; Shannon Hardwick, RPh, CPC Pharmacist; Sarah Boydstun, PharmD, PA Pharmacist;

Coordinated Care Organization (CCO) Staff:

Heather Odem, PharmD, Director of Pharmacy - Mississippi, UnitedHealthcare Community & State; Jenni Grantham, PharmD, Director of Pharmacy, Magnolia Health; Mike Todaro, PharmD, Vice President Pharmacy Operations, Magnolia Health; Trina Stewart, PharmD, Pharmacy Manager, Molina Healthcare;

Visitors:

Kimberly Clark, Viiv Healthcare; Jill Gran, Otsuka; Justin Simmons, Abbvie; Jim Chapman, Abbvie; Nole Mangine, Abbvie; Jenna Ferrara, Abbvie; Julie Young, Abbvie; Natasha Dowd, Alkermes; Tracey Smalley, Amgen; Shauna Williams, Bayer; Robert Greely, Biogen; David Large, Biohaven; Brian Berhow, Sunovion; Andrew Delgado, BMS; Jeff Knappen, Spark Therapeutics; Martin McNulty, Pfizer; Cathy Prine-Eagle, Merck; Wendy Williams, Supernaus; Tony Bucalo, EMD Serono; Brount Young, Global Blood Therapeautics; Michelle Shirley, Indivior; Mike Peoples, Lilly; Steve Isaki, Lundbeck; John Schillo, Lundbeck; Paula Whatly, Novo Nordisk; April Gault, Takeda; Carley Riehle, Takeda; Steve Patterson, Zealand Pharma; Shawn Headley; Hope Ladner; Russell Smith;

Call to Order:

Dr. Pittman called the meeting to order at 1:01pm and welcomed everyone to the meeting via Zoom.

OLD BUSINESS:

Dr. Bloodworth moved to approve the minutes from the March 2021 DUR Board Meeting, seconded by Ms. Sudduth, and unanimously approved by the DUR Board.

Resource Utilization Review:

Dr. Pittman presented the resource utilization report for March 2021. Enrollment numbers continued to climb. The number of beneficiaries with pharmacy benefits was up 14.1% compared to March 2020. While enrollment numbers increased, the number of prescription fills decreased 4.8% compared to March 2020. The total dollars paid for prescriptions was slightly increased compared to that paid in March 2020. One other item of note was the substantial increase in paid claims for the administration of COVID-19 vaccines that occurred during the first quarter of 2021.

Feedback and Discussion from Board:

Dr. Pittman informed the Board that the work of DUR around HPV vaccination rates has generated exposure among other organizations around MS involved in improving vaccination rates. The MS HPV Roundtable along with the American Cancer Society is sponsoring 2 upcoming webinars targeting pharmacists' involvement in HPV vaccinations.

NEW BUSINESS:

Update on MS-DUR Educational Interventions:

Dr. Pittman provided an overview of all DUR mailings and educational notices that occurred March 2021 – May 2021.

Special Analysis Projects:

Review of the Current State of Migraine Treatment among Medicaid Beneficiaries

MS-DUR presented 3 reports centered on migraine treatment among Medicaid beneficiaries. Each report focused on different aspects of migraine treatment. The landscape of migraine treatment has been rapidly changing since calcitonin gene-related peptide inhibitor therapies entered the market in 2018. With the changes occurring in this space, MS-DUR felt it was appropriate to conduct an in-depth examination of prescribing patterns.

<u>Report 1: Overall trends in the utilization of medications for the treatment of migraine</u> Total spending on migraine-related medications showed a consistent increase since 2018. This increase was primarily attributed to the utilization of calcitonin gene-related peptide (CGRP) inhibitor products. There were no formal recommendations as a result of this report.

Report 2: Calcitonin gene-related peptide inhibitor utilization trends and outcomes assessment This report aimed to establish if CGRP inhibitor medications were being utilized within the Mississippi Division of Medicaid in a cost-effective manner and to determine if current utilization strategies, including prior authorization, were being optimized to encourage appropriate CGRP inhibitor utilization among this population. The report showed that of the beneficiaries that received CGRP inhibitor therapy, the majority received injectable products as compared to the oral products. Approximately 5% had claims for the concurrent use of oral and injectable CGRP inhibitor products. Outcomes associated with CGRP inhibitor use were assessed through claims data and included healthcare resource utilization and opioid use. Outcomes were stratified by those that were classified as 'early discontinuers' or 'continuers' of CGRP inhibitor therapy. Results were mixed when comparing outcomes pre- and post-CGRP inhibitor initiation. It was noted that outcomes assessed through claims data may not present a true picture of clinical effectiveness. The following recommendations were discussed:

1. Medicaid should consider reassessing their UPDL and prior authorization requirements to ensure the most appropriate utilization of CGRP inhibitors occurs. Items for consideration:

 UPDL requirement prohibiting concurrent use of oral CGRP inhibitor agents with another CGRP inhibitor agent.
MS-DUR recommended defining parameters for concurrent use such as a minimum length of trial of a preventive CGRP inhibitor agent prior to adding a second agent, dose maximization of preventive agent prior to adding a second agent, trial of a different preventive agent prior adding a second agent, or verification of adherence to preventive agent prior to adding a second agent.

- Manual PA requirements for reauthorization.
 - MS-DUR recommended defining parameters for reauthorization criteria. Current language in the manual PA document is vague and may benefit from the incorporation of measurable thresholds. These thresholds should be based on evidence in literature and would help identify those patients in which continued CGRP inhibitor therapy is most beneficial.

Following discussion, Ms. Dunaway made a motion, seconded by Dr. Bloodworth, and unanimously approved by the Board to accept the recommendations presented.

<u>Report 3: Utilization of preventive therapy for migraine among Medicaid beneficiaries</u> Results from this report confirmed national trends for the underdiagnosis and undertreatment of migraine. Among Medicaid beneficiaries, only 52% of those determined as eligible for preventive migraine treatment had a diagnosis for migraine in claims data pointing to underdiagnosis. Related to undertreatment, only 52.4% of those determined eligible to receive preventive therapy actually had claims for preventive therapy during the study period. While it was shown that certain sociodemographic factors (age, CCI index score, distance traveled to provider, and pharmacy plan) significantly impacted beneficiary use of preventive treatment, overall social determinants of health factors did not appear to have a significant impact on the odds of beneficiaries receiving preventive migraine treatment. The following recommendation was discussed:

1. DOM may consider strategies to improve the rates of preventive migraine diagnosis and treatment among Medicaid beneficiaries, especially targeting those in the FFS program

Following a discussion, Dr. Bloodworth made a motion, seconded by Dr. Montalvo, and unanimously approved by the Board to accept the recommendation presented.

FDA Drug Safety Updates:

Dr. Pittman presented FDA drug safety communications for March 2021 – May 2021.

Pharmacy Program Update:

Ms. Kirby provided a brief pharmacy program update informing everyone that the upcoming September 2021 DUR Board Meeting and the October 2021 P&T Board Meetings are both tentatively scheduled to be held in-person in the Woolfolk Building in Jackson, MS.

Mr. Yount informed guests that beginning with the next DUR Board Meeting, guests would be required to register in advance to attend. The process for registration will be similar to that utilized for P&T meetings

Miscellaneous: *Remaining 2021 Meeting Dates/Times* September 16, 2021 December 9, 2021 *Meeting time will remain at 1 pm.

Next Meeting Information:

Dr. Pittman announced that the next meeting of the DUR Board will take place on September 16, 2021 at 1pm in-person at the Woolfolk Building.

Dr. Bloodworth motioned to adjourn the meeting at 2:34 pm, seconded by Dr. Montalvo, and unanimously approved by the Board.

Submitted,

Eric Pittman, PharmD Evidence-Based DUR Initiative, MS-DUR **Meeting Location**: Meetings will be held virtually until further notice. Please visit Medicaid.ms.gov and click on the Pharmacy Information link for further information.

Contact Information: Office of Pharmacy:

Chris Yount, 601-359-5253: <u>Christopher.yount@medicaid.ms.gov</u>, or Jessica Tyson, 601-359-5253; <u>Jessica.Tyson@medicaid.ms.gov</u>

Notice details:

State Agency: MS Division of Medicaid

Public Body: Drug Utilization Board (DUR) Meeting

Subject: Quarterly Meeting

Date and Time: March 4, 2021; June 10, 2021; September 16, 2021; and December 9, 2021 at 1PM

Description: The Mississippi Division of Medicaid's Drug Utilization Review (DUR) Board is a quality assurance body which seeks to assure appropriate drug therapy to include optimal beneficiary outcomes and appropriate education for physicians, pharmacists, and the beneficiary. The Drug Utilization Review (DUR) Board is composed of twelve participating physicians and pharmacists who are active MS Medicaid providers and in good standing with their representative organizations.

The Board reviews utilization of drug therapy and evaluates the long-term success of the treatments.

The Drug Utilization Review (DUR) Board meets quarterly.



Mississippi Public Meeting Notices

PUBLIC MEETING NOTICES



NOTICE DETAILS

NOTICE DETAILS

State Agency: Division of Medicaid

Public Body: Division of Medicaid

Title: Drug Utilization Review Board Meeting

Subject: Drug Utilization Review Board Meeting

Date and Time: 6/10/2021 1:00:00 PM

Description:

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The Drug Utilization Review Board reviews utilization of drug therapy and evaluates the long term success of the treatments.

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MEETING LOCATION

501 N. West Street Jackson MS 39201

Map this CONTACT INFORMATION

Chris Yount 6013596336 christopher yount@medicaid.ms.gov DOWNLOAD ATTACHMENTS

DFA Meeting notification DUR 2021.docx Added 1/14/2021

SUBSCRIPTION OPTIONS

Subscription options will send you alerts regarding future notices posted by this public body.

RSS