

## June 2007 DURB Meeting Summary

Issue	Attachment*	Action	Notes
<b>Roll Call</b>			Present: Dr. Swee, Dr. Gooen, Dr. Woodward, Dr. Marcus, Ms, Rodriquez, Mr. Schafer, Dr. Moynihan, Dr. Barberio, Dr. Moore, Dr. Condoluci, Dr. Lichtbroun, Dr. Gochfeld  Absent: Dr. Cavaliere, Ms. Olson
<b>Review of Minutes</b>	Pages 3-5; Tab 1	Approved	Minutes from the April 2007 meeting were approved.
<b>Secretary's Report</b>	Page 7; Tab 2		All recommendations from the January 2007 meeting have been implemented as of May 30, 2007. Recommendations from the April 2007 meeting pertaining to the buprenorphine/naloxone and modafinil protocols have been implemented. The Board recommended a pilot program for coverage of over-the-counter (OTC) ketotifen ophthalmic drops, which will be implemented mid-July 2007.
<b>Business</b>			
A. Hepatitis C Virus (HCV) Therapy Protocol	Pages 9-11; Tab 3	Approved	The protocol was approved by the Board with an amendment to include FDA approved medications utilized for the treatment of HCV.
B. Erythropoiesis Stimulating Agents (ESA) Protocol	Pages 13-20; Tab 4	Approved	The protocol for ESA therapy was approved by the Board with the addition of verifying iron supplementation on the beneficiaries' profiles.
<b>Informational Highlights</b>			
Disease Management Update			The Board was provided information concerning disease management being conducted by the State via CNS and APS. The programs that are a part of disease management include utilization of medications pertaining to the following therapeutic areas: behavioral health, asthma, chronic obstructive pulmonary disease, diabetes, and congestive heart failure. Further information will be provided to the Board during future meetings to ensure complete understanding of the project.
Report on Methadone Dosing	Pages 21-22; Tab 5		Unisys-medical exceptions processing (MEP) unit via drug utilization review uncovered some physicians are prescribing large starting doses

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			of methadone compared to other physicians. The report was presented to the Board for their comments or recommendations on how to proceed with dealing with these outliers. The Board would like the State to present additional information to make recommendations, which will be provided during the October 2007 meeting.
New Reports/Updates	Pages 23-24; Tab 6		The State recently updated the drug interaction table with new information from March 2007 regarding tizanidine. This included preventing the concomitant use of tizanidine with fluvoxamine, fluoroquinolones, and other potent CYP1A2 inhibitors. In lieu of the recent FDA safety alert on rosiglitazone, the State will continue to update the Board with any new findings to adjust and update the DURB tables accordingly.
Unisys Reports	Pages 35-36; Tab 7		The State reported to the Board the number of actual denials Unisys-MEP was issuing. The true number of denials can only be determined using claims requiring prior authorizations (PA). In turn these claims requiring PA, depending on clinical criteria are either approved or denied.
Top 200 Drugs	Pages 37-40; Tab 8		The top 200 drugs were presented based on therapeutic class which is designated by first data bank (FDB). The State will provide more information of the specific drugs falling into categories that are of interest to the Board.
<b>Action Items</b>			
1. Modafinil Usage  2. Unisys Report  3. Top 200 Drugs			<p>1. Present to the Board a report that will further verify the high uses of modafinil for antipsychotic related fatigue. Per Board discussion in the upcoming DURB meetings propose an initiative to educate prescribers regarding modafinil utilization.</p> <p>2. Provide the Board a report of the number of claims: new and refills per beneficiary.</p> <p>3. The State will provide information regarding the categories for the Top 200 drugs especially regarding the different medications that fall</p>

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4. Methadone Doses			<p>into each category. The categories and what medications fall into them are strictly determined by FDB.</p> <p>4. Further information will be provided to the Board regarding methadone doses prescribed by certain prescribers of interest to the State. Information such as number of patients, claims, profiles, specialty of prescriber, diagnosis, formulation of methadone used, and ranges instead of averages will be provided in the upcoming DURB meetings.</p>
5. Disease State Management Project			<p>5. A currently available newsletter pertaining to disease state management will be accessible via the internet at <a href="http://www.njmmis.com">www.njmmis.com</a>. The State will also provide the list of quality indicators for adults and children that are utilized in this project to determine obscure medical practices.</p>
6. Serotonin Syndrome 7. HMO Reporting			<p>6. State to continue to try to obtain data from claims regarding ADRs. 7. State to prepare quarterly report on denials.</p>