

January 11, 2017 DURB Meeting Summary

Issue	Action	Notes
Roll Call		<p><u>Present:</u> Dr. Swee, Dr. Zanna (ex officio), Dr. Goen, Dr. Marcus, Dr. Gochfeld, Dr. Barberio, Dr. Lind (ex officio).</p> <p><u>Unable to attend:</u> Mr. Schafer, Dr. Moynihan, Dr. Moore, Ms. Olson,</p>
Public Notice		Dr. Swee read a public notice which was sent out and filed with the Secretary of State. This announcement is required by the State at the beginning of each year's session of the DURB meeting.
Review of Minutes	Approved	Minutes from October 19, 2016 meeting was reviewed and approved. The approved meeting summary will also be posted on the DURB website at: http://nj.gov/humanservices/dmahs/boards/durb/meeting/index.html
Secretary's Report		<ul style="list-style-type: none"> • Still awaiting approval for DURB Annual Summary for SFY 2015. • The DURB Annual Summary for SFY 2016 will be sent to the Commissioners when the 2015 summary is approved and received back at the State. • The State's dental consultants, Dr. Bonnie Stanley and Dr. Kurc reviewed the report on dentists with \geq 30 days of opioid prescriptions. Although they admitted they may not be aware of all the circumstances in order to render an affirmative conclusion, their findings tended to agree with our preliminary conclusion - some of the prescriptions were unnecessary or excessive. • Effort is being made for board members re-appointment to be reviewed at the next senate session. • Protocols review and streamlining by the MCOs and FFS as requested by the Board is ongoing. A report will be provided at the next meeting. • Further review of naloxone identified in physician-administered drugs report revealed that these were administered in hospital environments. A rerun of the report excluding these sites did not produce any naloxone claims.
Old Business		
(a) Amerigroup's response to Miralax® in step therapy for OIC	Review response from Plans at the next meeting.	The Board reviewed Amerigroup's response to provide a rationale for requiring failure or intolerance of Miralax® prior to approving another product for opioid induced constipation (OIC). Ms. Yuen with Amerigroup informed the Board that they will further review the information provided

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(b) Smoking Cessation Therapy Update (Dr. Jill Williams)		<p>by Dr. Marcus and respond appropriately. Mr. Adelman with WellCare informed the Board that his team will follow up with a written response.</p> <p>See section on Protocol Review - Smoking Cessation</p>
New Business		
<p>(A) Proposed educational newsletter: "Using Naloxone to Prevent Drug Overdose Deaths"</p> <p>(B) Protocol Review 1. Smoking Cessation Products</p>		<p>The Board reviewed a proposed educational newsletter on the use of naloxone and suggested that it required a few more additions like where to obtain training for providers and family members; warning about naloxone's role after or during an overdose incident; possible app for the victim's location, etc. The newsletter will be revised with these recommendations and brought back for approval at the next meeting.</p> <p>Dr. Jill Williams, Professor of Psychiatry and Director, Division of Addiction Psychiatry at Robert Wood Johnson Medical School addressed the Board about the problems with obtaining smoking cessation products for patients from NJ payers especially the managed Medicaid plans. She distributed a handout (appended to this summary) which included screen shots of the Plans approval requirements from their respective websites. Some concerns voiced by her and Dr. Steinberg, an associate professor, also at RWJ medical</p>

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<p>2. Addiction Treatment Drugs</p>		<p>school:</p> <ul style="list-style-type: none"> - Variable coverage by the Plans - Multiple restrictions on covered products - Requirements for patients to be in counseling (if diagnosis is tobacco dependence) - Lifetime limits - Requirement for stepped care, etc. <p>Sam Currie, pharmacy director with Horizon responded that Horizon does not require prior authorization for most of the products. He also pointed out that the screen shot represented outdated information. He promised to have the website "cleaned up". He also explained that although Chantix® was a non-formulary product, it would be approved for patients not adequately managed by NRTs. Mike Verma, pharmacy director for United Healthcare informed Dr. Williams that the screen shot she had was from Optimum formulary which is different from New Jersey Medicaid's which has quantity limits but no prior authorization for NRTs.</p> <p>Dr. Lind offered to host a subcommittee comprising members of the State, the Plans and Dr. Williams to clear up some of the policy problems and differences in this subject. Dr. Gochfeld volunteered to be on this subcommittee.</p> <p>Dr. Swee suggested that a subcommittee will also be needed to evaluate the protocols for addiction treatment drugs. Dr. Marcus volunteered to be on this group. The Board decided to start with the NRTs. Dr. Swee invited Ed Vaccaro to be a member of the subcommittee.</p>

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Informational Highlights/Reports																							
1. Fee-for-Service/MCO Prior Authorization Report	Continue to monitor.	<p>The Board reviewed prior authorization denial report comparing all MCO plans including FFS for the 3rd quarter of 2016.</p> <p>Percentage of prior authorization requests relative to total claims and denials associated with the PAs are listed below:</p> <table border="1" style="margin-left: 20px;"> <thead> <tr> <th>Plan</th> <th>(%) PA Requests of claims</th> <th>Denial (%)</th> </tr> </thead> <tbody> <tr> <td>FFS</td> <td>0.6</td> <td>18</td> </tr> <tr> <td>Aetna</td> <td>0.5</td> <td>39</td> </tr> <tr> <td>Amerigroup</td> <td>1</td> <td>14.7</td> </tr> <tr> <td>Horizon</td> <td>1</td> <td>48.7</td> </tr> <tr> <td>UHC</td> <td>0.8</td> <td>47.5</td> </tr> <tr> <td>WellCare</td> <td>1</td> <td>43.8</td> </tr> </tbody> </table>	Plan	(%) PA Requests of claims	Denial (%)	FFS	0.6	18	Aetna	0.5	39	Amerigroup	1	14.7	Horizon	1	48.7	UHC	0.8	47.5	WellCare	1	43.8
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2. Summary of DURB Actions/Recommendations		<p>The Board reviewed a summary of actions from previous meetings (January 2016 thru October 2016).</p> <p>Dr. Swee requested a report/analysis of the Top Drugs at every meeting. This apparently was not provided at this meeting but will be in future meetings.</p>																					
3. DHS and DHSS Programs Top Drugs Report		<p>The Board reviewed November 2016 report for the top drugs, by dollar amount, claims count, and service units. Ed Vaccaro suggested expanding the Top Drugs report to include the MCO programs. Currently, this report is only for the fee-for-service program.</p>																					

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4. Medication Information		<p>The following medical information were also included and discussed:</p> <ul style="list-style-type: none"> (a) FDA Approves Bonjesta for Pregnancy-Related Nausea and Vomiting. (b) Could Common Heartburn Drugs Up Stroke Risk? (c) Direct-Acting Antivirals for Hep C might Worsen Liver Cancer (d) FDA Announces Stern New Warning Labels for Testosterone Treatments
<p>Follow up items:</p> <p>(a) Miralax® review by Amerigroup/WellCare</p> <p>(b) Review of smoking cessation policies by all plans</p> <p>(c) Add MCO data to Top Drugs Report</p>		<ul style="list-style-type: none"> (a) Amerigroup/WellCare will review Miralax® information provided by Dr. Marcus and present their plan's decision/response to the Board at the next meeting. (b) Dr. Swee requested that all plans review their smoking cessation protocols/policies and present a report at the next meeting. <ul style="list-style-type: none"> - Horizon will update NRTs information on the plan's website - Dr. Lind will host a subcommittee on smoking cessation. The subcommittee will be made up of state staff, MCO representatives and Dr. Williams. (c) The Board requested the addition of MCOs' data to the quarterly top drugs report.