April 18, 2018 DURB Meeting Summary

Issue	Action	Notes
Roll Call		Present: Dr. Swee, Dr. Zanna (ex officio), Dr. Gooen, Dr. Barberio, Dr. Gochfeld, Dr. Moore, Ms. Olson, Dr. Lind (ex officio) Unable to attend: Mr. Schafer, Dr. Moynihan, Dr. Marcus,
Public Notice		Dr. Swee read a public notice required at each meeting: In compliance with Chapter 231 of public laws of 1975, notice of this meeting was given by way of filings in the Trenton Times, Star Ledger and Atlantic City Press.
Review of Minutes	Approved	Minutes from January 10, 2017 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		• The DURB Annual Summary for SFY 2016 was published in the New Jersey Register on January 16, 2018. • The DURB Annual Summary for 2017 signed off by the Commissioners and has been sent for publication in the NJ Register. • Awaiting commissioners' signatures for direct acting antivirals (DAAs) updated protocol. Dr. Zanna informed the Board that this is in the process. • Gabapentin/Opioid utilization letters have been updated with prescribers' information and will be mailed out shortly. • Protocols for opioid-induced chronic idiopathic, IBS-related products, and injectable naltrexone (Vivitrol®) were sent to the Commissioners for signatures. • Board members re-appointment/appointment is in progress Dr. Swee inquired from Dr. Zanna if he invited the Commissioner to the DURB meeting. He said we could. Mr. Vaccaro suggested sending her a letter under the Board's letterhead.
Old Business		
(a) Morphine milligram equivalent (MME) letters		The Board reviewed a copy of the final version of MME letters sent to prescribers. Dr. Swee wondered if 20% was normal response for state surveys. Sam Emenike, PharmD, with Molina Medicaid Solutions responded that the State expected more to be returned but was concerned the prescribers may not have understood the MME concept hence a newsletter is in the works.

April 18, 2018 DURB Meeting Summary

Issue	Action	Notes
(b) Updated gabapentin-opioid letter		The Board reviewed a copy of the final version of gabapentin-opioid letter that will be mailed out to prescribers in the coming days.
(c) Updated protocol for injectable naltrexone (Vivitrol®)		The Board reviewed a copy of the final version of a protocol for injectable naltrexone (Vivitrol®) that was sent to the Commissioners for signatures. Mr. Azoia, pharmaceutical chief for the State informed the Board that there is discussion going on to expand access to all medication assisted treatments (MATs).
(d) Updated protocol for chronic constipation agents		The Board reviewed a copy of the final version of a protocol for chronic constipation products that was sent to the Commissioners for signatures.
(e) Protocols review and streamlining		The Board reviewed a list of prior authorization streamlining by fee-for-service (FFS) and the managed care organizations (MCOs) for the year 2017. Dr. Swee expressed his gratitude to the Plans for making that effort, thereby making things a lot easier for the providers.
New Business		
(A) Proposed protocol for safe and efficient use of ranolazine (Ranexa®)	Approved with suggested changes	The Board reviewed a proposed protocol for ranolazine used for the treatment of chronic angina. Dr. Swee requested input from MCO plans and the drug's manufacturer. Dr. Gochfeld suggested including EKG monitoring if the concern was prolongation of QT interval. Dr. Gooen expressed concern about the incomplete list of possible drug interactions with ranolazine in the protocol. She was reassured that the system is set up to alert the pharmacist at the point of sale. The Board recommended approval of the protocol with suggested changes. Ms. Olson explained that the onus is on the prescriber to explain to the patient the need for their medication and the implications. Dr. Gooen abstained from the approval vote.
(B) Proposed protocol for dextromethorphan/quinidine(Nuedexta®)	Approved	The Board reviewed a proposed protocol for dextromethorphan/quinidine, a product approved by the FDA for the treatment of pseudobulbar affect or PBA. Dr. Gooen again suggested adding more medications to the list of

April 18, 2018 DURB Meeting Summary

<table>
<tr><th>Issue</th><th>Action</th><th>Notes</th></tr>
<tr><td>(C) Proposed educational newsletter on morphine milligram equivalent</td><td>Approved with suggested changes</td><td>possible drug-drug interaction agents. The Board acknowledged her concern but went on to approve the protocol as is.

The Board reviewed an educational newsletter on morphine milligram equivalent (MME). They recommended approval with some changes:
- Underline or bold statement "MME table is only a guide and not a substitute for practitioner's individual judgment. ."
- Add "to be used with caution" to conversion table title</td></tr>
<tr><td>Informational Highlights/Reports</td><td></td><td></td></tr>
<tr><td>1. Fee-for-Service/MCO Prior Authorization Report</td><td>Continue to monitor.</td><td>The Board reviewed prior authorization denial report comparing all MCO plans including FFS for the 4th quarter of 2017. Dr. Swee called on Matt Samuel, PharmD, director of pharmacy with United Healthcare to explain the huge number in the "non-formulary" category. He explained that the claims in this category did not meet UHC's formulary requirement and were therefore "rejected". Dr. Moore and Dr. Swee wanted to know how this is resolved or the process in place for dispensing an alternative/equivalent medication in the formulary to the patient. Mr. Vaccaro explained that this is usually done at the point of sale when the pharmacist contacts the prescriber.
Percentage of prior authorization requests relative to total claims and denials associated with the PAs are listed below:

<table>
<tr><td>Plan</td><td>(%) PA Requests of claims</td><td>Denial (%)</td></tr>
<tr><td>FFS</td><td>0.5</td><td>17</td></tr>
<tr><td>Aetna</td><td>0.4</td><td>31</td></tr>
<tr><td>Amerigroup</td><td>1</td><td>26</td></tr>
<tr><td>Horizon</td><td>0.9</td><td>34</td></tr>
<tr><td>UHC</td><td>0.8</td><td>52</td></tr>
<tr><td>WellCare</td><td>0.8</td><td>60</td></tr>
</table>
</td></tr>
</table>

April 18, 2018 DURB Meeting Summary

Issue	Action	Notes
2. Summary of DURB Actions/Recommendations		The Board reviewed a summary of actions from previous meetings (April 2017 thru January 2018).
3. DHS/DHSS/MCO Programs Top Drugs Report		The Board reviewed February 2018 report for the top drugs, by dollar amount, claims count, service units and category for fee-for-service plan. This was compared to the report for October 2017. They also reviewed December 2017 report for MCO top drugs. At the Board's request, a new category, FFS antiviral drugs, a further breakdown of the antiviral products by disease state was added to this report.
4. Medication Information		Some medical information was presented and discussed
Follow up items: (a) Protocol for ranolazine (b) Educational newsletter on Morphine milligram equivalent (MME)		(a) The Board recommended a change (removal of "tried, failed and/or is intolerant to") from the 2nd criterion of the protocol. (b) The Board recommended that emphasis should be made that the information in the newsletter is a guide and the table should be used with caution. Dr. Swee suggested evaluating the impact of the newsletter by monitoring opioid utilization in the coming months.