

**Minnesota Department of Human Services  
Drug Utilization Review (DUR) Board Meeting**

**December 9, 2020**

**Members Present**

Ryan Fremming, PharmD., Daniel Jude, PharmD., Karen Pedersen, PharmD., Gregg Schaeppi, and Allyson Schlichte, PharmD.

**DHS Staff Present**

Mary Beth Reinke, PharmD., Dave Hoang, PharmD.

**Other Attendants**

Ariene Casey, PharmD, Kepro, Tanner Bain, Kepro.

**Public Comments:** There were no public comments.

**Approval of Minutes:** Minutes from the August 19, 2020 meeting were approved.

**New Business:**

There was an introduction of the new Retrospective Drug Utilization Review (RetroDUR) contractor, Keystone Peer Review Organization (Kepro), beginning October 1, 2020. The previous Conduent contract and the Kepro contract are the same except for additional RetroDUR interventions regarding the SUPPORT Act. Currently, Kepro has RetroDUR contracts in eight other state Medicaid programs.

The criteria approved for the two Conduent proposals, Respiratory Disease Management and Proton Pump Inhibitors at the August 19 meeting will be able to be utilized for the first two Kepro mailings. The Kepro contract is still in the implementation phase so there are no counts of occurrences available.

There are notable differences as far as the capabilities and design of Conduent's CyberFormance compared to Kepro's RxExplorer. With CyberFormance, there was the ability to select RetroDUR criteria for large, population-based mailings by a disease state OR by using the traditional OBRA'90 drug issues of increased adverse events, drug-drug interactions, underutilization, overutilization, duration of therapy, dosage, lack of appropriate indication, adherence to therapy, and drug-disease interactions OR by using a combination of selected criteria from both groupings. Kepro's RxExplorer criteria selections are limited to the OBRA'90. There is, however, a special mailing option that will allow Minnesota Medicaid to create a more focused, customized intervention.

Using Kepro's special mailing format, the focus of the remaining discussions were a thorough review of the content of the mailing packets that includes the cover letter, education material, and patient profile formatting options.

- One major difference is that Kepro can only generate letters for one DUR issue at the time. For example, the Respiratory Drug Management intervention contains seven indicators; therefore, seven different letters will be created for the mailing.

- With Kepro’s Rx-Explorer, the DUR paragraph or message associated with the single criteria is central to the cover letter itself. With Conduent, the cover letter provided an overview of all the criteria in the context of the focused population-based RetroDUR intervention.
- With CyberFormance, if a particular patient is identified as having more than one DUR issues, the multiple messages associated with the particular patient are found on the patient’s targeted drug history profile page(s).
- With CyberFormance, the included patient’s profile shows only the targeted drugs. For example, Proton Pump Inhibitors (PPI) RetroDUR mailing, only PPIs are displayed on the patient’s profile. Targeted drugs are sorted by the American Hospital Formulary Service drug classification and finally chronologically.
- With Rx-Explorer, all paid drug claims are displayed which are sorted chronologically with most recent claim first. Claims history can be chosen as three months, six months, or the past year.
- Mailing packet for Conduent was cover letter, individual patient profiles including targeted drugs and related paragraph messages, and response form when included. If prescriber had twenty patients, there would be twenty patient profiles with messages after one cover letter.

Rx-Explorer has two options when using a special mailing option.

- a. a list of patient names with their corresponding date of birth is merged into the body of the letter or
- b. an individual patient profile showing all paid drug claims sorted chronically starting with the most recent date of service.
  - i. For special mailings, the DURB (Drug Utilization Review Board) can select either three months, six months, or a one year paid pharmacy claims history.

The overall DUR Board recommendation was “the patient list containing patient name and date of birth within the letter” approach given the large amount of drug information provided in the all paid drug claims option. Feedback was that the provider would have to sift through the data to locate the targeted drugs related to the specific drug issue addressed in the letter. The patient list or patient profile option chosen can vary per intervention if desired.

Using the respective cover letter approved at the August DURB, each section of the letter was reviewed for comments and feedback. There was roll call vote for the final approval of each intervention.

#### Discussion regarding PPI cover letter and educational material.

- Opening paragraph –
  - retain as written
- Safety concerns with PPIs
  - retain as written
- Patient selection criteria
  - include details of diagnoses requirements, look-back period, days of overlap, and so on.
- Patient message will now be within the letter whereas previously the message was on the profile of targeted drugs
  - do not include the message if it is redundant compared to patient selection criteria but include and modify for a “call-to-action by provider” paragraph if needed
- Tapering
  - continue to include the existing paragraph
  - add the proposed tapering table at the end of the letter as educational information
- Use list of patients, not the patient profile option.

- Update the closing paragraph with the Kepro phone line for provider comments.
- DUR Board roll call vote was to approve as discussed.

#### Discussion regarding Respiratory Drug Management cover letter and educational material.

- About line RE: Respiratory Drug Management
  - retain as written
- Opening paragraph
  - retain as written
- Keep the guideline that refers to the condition being targeted (e.g., asthma guideline for asthma performance indicators, etc)
- Remove internet links for guidelines
- Remove sentence about coverage of devices
- Patient message would now be within the letter whereas previously the message was on the profile of targeted drugs
  - Do not include the message if it is redundant but do include and modify for a “call-to-action by provider paragraph” if needed
- Use the list of patients, not the patient profile option.
- Remove chart or table of recommendations in general from the previously approved letter
- Remove internet links from references
- Update the closing paragraph with the Kepro phone line for provider comments.

DUR Board roll call vote was to approve as discussed.

#### History of Smoking in Patients with Asthma or COPD Indicator

This particular criterion was discussed separately given the change in RetroDUR letter format. When shown with all the Respiratory Drug Management criteria, the criteria made sense. As a stand-alone message, only potential utility would providing a list of patients with a history of smoking and also with a diagnosis of asthma or COPD to the provider. Given that there are no drug claims to display and the limited utility of a list of patients that smoke based on their diagnosis claims, the DUR Board roll call vote was not to approve.

The last agenda item was providing the 2021 DURB meeting schedule.

- March 10<sup>th</sup>
- May 12<sup>th</sup>
- August 11<sup>th</sup>
- October 13<sup>th</sup>

The DUR Board meeting was adjourned.