

**Ohio Department of Medicaid (ODM)
Drug Utilization Review (DUR) Board
Quarterly Meeting
February 25, 2014**

The quarterly meeting of the ODM DUR Board was called to order at 12:07 PM in Room West B and C, 31st Floor Riffe Center, 77 S. High Street, Columbus, Ohio. Thomas Gretter, MD, presided. The following Board members were present:

David Brookover, RPh, Chair
Michael Farrell, MD
Thomas Gretter, MD
Robert Kubasak, RPh
Kevin Mitchell, RPh
Donald Sullivan, RPh, PhD

Also present were Mary Applegate, M.D., ODM Medical Director; Jill Griffith, RPh, DUR Director; Pam Heaton, RPh, PhD from the University Of Cincinnati College Of Pharmacy; Mike Howcroft, RPh, Medicaid pharmacist; and Margaret Scott, RPh, DUR Administrator. Approximately 12 observers were present, most representing pharmaceutical manufacturers.

Reading, Correction & Approval of Previous Minutes:

The November 19th, 2013, DUR Board minutes were approved. (1st K. Mitchell, 2nd D. Brookover).

Unfinished Business:

Dr. Applegate provided an update on psychotropic use in children. She reviewed the state parameters outlining potentially unsafe prescribing: atypical antipsychotic use in children less than six years of age; using two or more antipsychotics for greater than six-weeks in children less than 18 years; and using four or more psychotropics at the same time in children less than 18 years. The OhioMindsMatter.org website houses care pathways, safe prescribing tools for general practitioners and pediatricians, and guidance for social workers. 30% of children in Medicaid have a mental health diagnosis. Three pilot areas under study showed 35% unsafe prescribing. The state has been working to remove bottlenecks to access the system. The participating prescribers in the pilot areas are given timely prescription claims data for the kids who exceeded the safety threshold. Dr. Applegate advocates using the pharmacist to identify quality and drive appropriate therapeutic use. The Board discussed upcoming targeted reviews of “waiver” patients for unsafe combinations of narcotic and benzodiazepines. Dr. Farrell remarked that one-fourth of Cincinnati hospital beds are psychiatric. The burden on child psychiatry is large.

M. Howcroft gave an update on antipsychotic use in long-term care. The CMS goal is a 15 percent relative reduction in the inappropriate use of atypical antipsychotics in LTC residents. Ohio antipsychotic prevalence decreased 10.7 percent (relative reduction) over two years from fourth quarter of 2011 to third quarter 2013. Early findings include higher rates of antipsychotic use associated with: higher bed size; higher proportion of long-term care residents on Medicaid; for-profit status; and lower R.N. staffing. The Board discussed addressing the patients’ behaviors rather than medicating them; best practices for dementia treatment; high touch rather than high medication care.

M. Scott presented the Governors' Cabinet Opiate Action Team (GCOAT) update. The state is working with drug courts in Mercer, Hardin, Franklin and Crawford counties. The goal is to get patients out of court and into drug addiction treatment. Case Western will evaluate the program outcomes.

Health Plan Policy:

M. Scott reviewed the conflict of interest policy and invoice submission process. Medicaid expansion went into effect 1/1/14.

DUR Committee Report:

J. Griffith announced that a DUR letter was mailed in February. The letter went to the prescribers of patients either receiving combination inhalers that duplicated concurrent single ingredient inhalers or patients receiving more than one inhaler from the same therapeutic category. A 2014 Global Initiative for Chronic Obstructive Lung Disease (GOLD) guideline educational insert was included with the mailing.

A second mailing went to the top 150 prescribers of respiratory antibiotics in 2012 and 2013. The mailing included a covered list of over-the-counter (OTC) cough and cold products. A companion mailing went to the pharmacies filling the antibiotic prescriptions for the top 150 prescribers. The pharmacist letters should have included NDC listings of the covered OTC cough and cold products received by the physicians. An error permitted the mailing of the pharmacist letters from the print shop with no inserts. The letters were re-mailed with the inserts included.

The December DUR committee reviewed the profiles of patients on concurrent insulin and sulfonylureas. The January committee meeting was cancelled. The February committee reviewed the profiles of patients on duplicative long-acting narcotic products.

Unfinished Business:

The third quarter DUR Board meeting will be held on September 16th, 2014. The fourth quarter meeting will be held on November 18th 2014.

Adjournment:

T. Gretter adjourned the meeting at 12:46 PM

Respectfully submitted:

Jill RK Griffith BS, PharmD, DUR Program Director