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The Bulletin of Medicaid Drug Utilization Review in Iowa

#### **DUR Commission Members**

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#### **Naloxone**

In an effort to save lives, access to naloxone nationwide has increased in hopes to prevent opioid overdose deaths. In lowa, residents can obtain naloxone in several ways as detailed below. Additionally, lowa Medicaid requires prior authorization for members with a cumulative morphine milligram equivalent (MME) ≥ 90 MME per day. One of the conditions for approval requires documentation of receipt of an opioid reversal agent, as seen in pharmacy claims or documentation from the lowa PMP of dispensation, within the prior 24 months of the High Dose Opioid PA request. Current PA criteria can be found on the <u>lowa Medicaid PDL website</u>.

## Naloxone Statewide Protocol <a href="https://pharmacy.iowa.gov/misc/statewide-protocols">https://pharmacy.iowa.gov/misc/statewide-protocols</a> Authority

 Pursuant to Iowa Code section 155A.46, a pharmacist may order and dispense naloxone pursuant to a protocol developed by the Iowa Board of Pharmacy ("board") in consultation with the Department of Public Health to individuals aged 18 years and older, only in accordance with this protocol.

#### Order to Dispense

 Upon satisfactory assessment that the person to receive naloxone is an eligible recipient pursuant to this statewide protocol, and upon completion of training regarding recognizing and responding to suspected opioid-related overdose, the pharmacist may dispense one or more naloxone products or kits identified herein. The pharmacist shall utilize an assessment form provided by the board. The pharmacist shall determine the appropriate naloxone product or kit to be dispensed.

#### Records and Reporting

• Each pharmacy shall maintain the original record of each assessment, regardless of the eligibility determination following assessment, and dispensing of naloxone to each eligible recipient. Naloxone dispensing shall be reported to the lowa Prescription Monitoring Program pursuant to rule 657—37.2(124). As soon as reasonably possible, the pharmacist shall notify the recipient's primary health care provider of the naloxone product dispensed to the recipient. If the recipient does not have a primary health care provider, the pharmacist shall provide the recipient with a written record of the naloxone product dispensed and shall advise the recipient to consult a physician.

# Naloxone Statewide Standing Order <a href="https://pharmacy.iowa.gov/naloxone-standing-order">https://pharmacy.iowa.gov/naloxone-standing-order</a> Authority

• This standing order is issued pursuant to Iowa Code sections 147A.18 and 135.190 which permit the possession and administration of opioid antagonist medications by certain eligible recipients and allow the distribution of such medications by pharmacists pursuant to standing order or collaborative agreement. A pharmacist shall engage in naloxone dispensing pursuant to this standing order only when the pharmacist has complied with the rules of the Iowa Board of Pharmacy ("board").

#### Order to Dispense

• Upon satisfactory assessment that the person to receive naloxone is an eligible recipient pursuant to this standing order, and upon completion of training regarding recognizing and responding to suspected opioid-related overdose, the pharmacist may dispense no more than five (5) naloxone kits identified herein to any single eligible recipient at one time, unless the pharmacist has made the determination that a greater quantity is reasonable and justified. The pharmacist shall utilize an assessment form provided by the Iowa Board of Pharmacy. The pharmacist shall determine the appropriate naloxone product to be dispensed. If the eligible recipient is a minor, a parent or guardian shall provide consent.

#### Reporting

 A copy of the assessment form shall be submitted to the medical director that has authorized this standing order, via facsimile within seven (7) days of dispensing naloxone. When eligibility has been denied, a copy of the assessment form shall be submitted to the medical director that has authorized this standing order, via facsimile within seven (7) days of the denial.

#### Records

 Each pharmacy shall maintain the original record of each assessment, regardless of the eligibility determination following assessment, and dispensing of naloxone to each eligible recipient.

#### Tele-Naloxone https://www.naloxoneiowa.org/telenaloxone

- A partnership between the Iowa Department of Public Health and University of Iowa Health Care.
- With this program you will simply visit with a pharmacist by tele-medicine, directly from your smart phone or laptop, and get FREE naloxone delivered to your door. Patient insurance is not billed for visit or naloxone.

### **DUR Public Comment**

lowa Medicaid Drug Utilization Review Commission meetings are open to the public. To assure public input into the DUR process, the agenda and meeting materials are posted on the DUR website, <a href="www.iadur.org">www.iadur.org</a>, prior to the meeting and public comment can be submitted in writing to <a href="mailto:info@iadur.org">info@iadur.org</a> or presented at the meeting. Anyone wishing to provide public comment must complete a Conflict-of-Interest disclosure. The complete public comment policy can be found on the DUR website.

### **DUR Activities**

Parties interested in the activities of the Iowa Medicaid DUR Commission can request to receive notification emails regarding the posting of the agenda and meeting materials on the website. To receive notification emails, please send an email with your contact information to <a href="mailto:info@iadur.org">info@iadur.org</a> with subscribe to DUR meeting notifications in the subject line.

## Medicaid Statistics for Prescription Claims March through May 2023

|                                   | FFS  | Amerigroup                                 | Iowa Total Care                            |
|-----------------------------------|--|--|--|
| # Paid Claims                     | 22,512                                     | 1,162,154                                  | 910,930                                    |
| Total \$ Paid                     | \$2,922,553                                | \$143,482,250                              | \$104,727,785                              |
| Unique Users                      | 3,752                                      | 183,844                                    | 152,588                                    |
| Avg Cost/Rx                       | \$129.82                                   | \$123.46                                   | \$114.97                                   |
| Top 5                             | Antidepressants                            | Antidepressants                            | Antidepressants                            |
| Therapeutic                       | Anticonvulsants                            | ADHD/Anti-Narcolepsy                       | Anticonvulsants                            |
| Class by<br>Prescription          | ADHD/Anti-Narcolepsy                       | Anticonvulsants                            | Antiasthmatic and<br>Bronchodilator Agents |
| Count Therapeutic class           | Antiasthmatic and<br>Bronchodilator Agents | Antiasthmatic and<br>Bronchodilator Agents | ADHD/Anti-Narcolepsy                       |
| taxonomy differs among each plan  | Antipsychotics/Antimanic Agents            | Antipsychotics/Antimanic Agents            | Antidiabetics                              |
| Top 5<br>Therapeutic              | Analgesics – Anti-<br>Inflammatory         | Antidiabetics                              | Antidiabetics                              |
| Class by Paid<br>Amount           | Antidiabetics                              | Antipsychotics/Antimanic Agents            | Antipsychotics/Antimanic Agents            |
| (pre-rebate)<br>Therapeutic class | Antipsychotics/Antimanic Agents            | Analgesics – Anti-<br>Inflammatory         | Analgesics – Anti-<br>Inflammatory         |
| taxonomy differs                  | ADHD/Anti-Narcolepsy                       | Dermatologicals                            | Dermatologicals                            |
| among each plan                   | Antiasthmatic and Bronchodilator Agents    | ADHD/Anti-Narcolepsy                       | Antiasthmatic and<br>Bronchodilator Agents |
|                                   | Clonidine                                  | Amoxicillin                                | Amoxicillin                                |
| Top 5 Drugs by                    | Sertraline                                 | Sertraline                                 | Sertraline                                 |
| Prescription                      | Trazodone                                  | Ventolin HFA                               | Ventolin HFA                               |
| Count                             | Fluoxetine                                 | Omeprazole                                 | Omeprazole                                 |
|                                   | Escitalopram                               | Trazodone                                  | Trazodone                                  |
| Ton 5 Drugo by                    | Humira Pen                                 | Humira Pen                                 | Humira Pen                                 |
| Top 5 Drugs by Paid Amount        | Evrysdi                                    | Vyvanse                                    | Trulicity                                  |
| (pre-rebate)                      | Biktarvy                                   | Vraylar                                    | Vraylar                                    |
| (pre-repate)                      | Vijoice                                    | Trulicity                                  | Vyvanse                                    |
|                                   | Invega Sustenna                            | Ozempic                                    | Ozempic                                    |