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DUR DIGEST

The Bulletin of Medicaid Drug Utilization Review in Iowa

H.R. 6 (115th): SUPPORT for Patients and Communities Act

H.R. 6 includes Medicaid, Medicare, and public health reforms to combat the opioid crisis by advancing treatment and recovery initiatives, improving prevention, protecting communities, and bolstering efforts to combat illicit synthetic drugs like fentanyl. The act contains several provisions that affect how state Medicaid agencies structure and administer services and supports for members with opioid and other substance use disorders (SUD). Below are some of the act's key provisions affecting state Medicaid programs, specifically related to medications.

- **Prescription Drug Utilization Review Requirements (DUR) for Opioids and Children's Antipsychotics (Sec. 1004)**
  - Requires state Medicaid programs to have DUR safety edits for opioid refills and an automated claims review process to identify refills in excess of state limits, monitor concurrent prescribing of opioids and benzodiazepines or antipsychotics.
- **Required Medication-Assisted Treatment (MAT) (Sec. 1006)**
  - Requires state Medicaid programs to cover all FDA-approved MAT drugs, from 10/1/20 through 9/30/25, including methadone and licensed biological products to treat opioid use disorder.
- **Enhancing Patient Access to Non-Opioid Treatment Options (Sec. 1010)**
  - Directs HHS Secretary to issue guidance on mandatory and optional Medicaid services for non-opioid pain treatment and management.
- **Government Accountability Office (GAO) Study on MAT Drug Distribution Models (Sec. 1011)**
  - Directs GAO to report on barriers to providing SUD medications under various drug distribution models and options for Medicaid programs to remove or reduce the barriers.
- **Medicaid and CHIP Payment and Access Commission (MACPAC) Report on MAT Utilization Controls (Sec. 1014)**
  - Directs MACPAC to report on state Medicaid program polices for MAT utilization control and identify policies that limit access by limiting quantities without evaluating the potential for fraud, waste, or abuse.

FDA Drug Safety Communications

November 20, 2018 The U.S. Food and Drug Administration (FDA) is warning that when the multiple sclerosis (MS) medicine Gilenya (fingolimod) is stopped, the disease can become much worse than before the medicine was started or while it was being taken. This MS worsening is rare but can result in permanent disability. As a result, the FDA has added a new warning about this risk to the prescribing information of the Gilenya drug label and patient Medication Guide.

November 29, 2018 The FDA is warning that rare but serious cases of stroke and tears in the lining of arteries in the head and neck have occurred in patients with multiple sclerosis (MS) shortly after they received Lemtrada (alemtuzumab). These problems can lead to permanent disability and even death. As a result, the FDA has added a new warning about these risks to the prescribing information in the drug label and to the patient Medication Guide. The risk of stroke has been added to the existing Boxed Warning.

November 29, 2018 FDA is warning that signs and symptoms of a life-threatening side effect called differentiation syndrome are not being recognized in patients receiving the acute myeloid leukemia medicine Idhifa (enasidenib). The Idhifa prescribing information and patient Medication Guide already contain a warning about differentiation syndrome. However, there are cases of differentiation syndrome not being recognized and patients not receiving the necessary treatment. As a result, the FDA is alerting health care professionals and patients about the need for early recognition and aggressive management of differentiation syndrome to lessen the likelihood of serious illness and death.

December 20, 2018 An FDA review found that fluoroquinolone antibiotics can increase the occurrence of rare but serious events of ruptures or tears in the aorta. These tears, called aortic dissections, or ruptures of an aortic aneurysm can lead to dangerous bleeding or even death. They can occur with fluoroquinolones for systemic use given by mouth or through an injection. Fluoroquinolones should not be used in patients at increased risk unless there are no other treatment options available. People at increased risk include those with a history of blockages or aneurysms (abnormal bulges) of the aorta or other blood vessels, high blood pressure, certain genetic disorders that involve blood vessel changes, and the elderly. The FDA is requiring that a new warning about this risk be added to the prescribing information and patient Medication Guide for all fluoroquinolones.

High Dose Opioids

Effective March 1, 2019, PA is required for use of high dose opioids ≥ 150 morphine milligram equivalents (MME) per day. Patients undergoing active cancer treatment or end-of-life care will not be subject to PA criteria. The MME edit will gradually be decreased over time to 90 MME per day. PA requests should be submitted on the most current High Dose Opioids PA form found at: http://www.iowamedicaidpdl.com under the PA Forms link on the left hand side of the page.

Medicaid Statistics for Prescription Claims
December 2018 through February 2019 (will be updated once data is available)

	FFS	Amerigroup	United Healthcare
# Paid Claims	44,919	669,850	1,224,396
Total Dollars Paid	$2,760,948	$51,015,412	$89,820,984
# Unique Users	10,199	93,356	180,074
Average Cost/Rx	$61.47	$76.16	$73.36
Top 5 Drugs by Prescription Count	Amoxicillin	Omeprazole	Omeprazole
	Sertraline	Lisinopril	Lisinopril
	Hydrocodone/APAP	Levothyroxine	Amoxicillin
	Trazodone	Atorvastatin	Levothyroxine
	Gabapentin	Sertraline	Atorvastatin
Top 5 Drugs by Paid Amount (pre-rebate)	Vyvanse	Vyvanse	Vyvanse
	Concerta	Humira Pen	Concerta
	Tamiflu	Concerta	Latuda
	Synagis	Latuda	Humalog
	Latuda	Humalog	Humira Pen
Top 5 Therapeutic Class by Paid Amount (pre-rebate) Therapeutic class taxonomy differs among each plan	Anticonvulsants	ADHD/Anti-Narcolepsy	Insulins
	Antiretroviral Combinations	Antidiabetics	Antipsychotic, Atypical, Dopamine, Serotonin Antagonist
	Atypical Antipsychotics	Antiasthmatic and Bronchodilator Agents	Tx for ADHD/Narcolepsy
	Anti-Inflammatories, Non-NSAID	Antipsychotics/Antimanic Agents	Anti-Inflammatory Tumor Necrosis Factor Inhibitor
	Long-Acting Amphetamine Stimulants	Analgesics – Anti-Inflammatory	Anticonvulsants
Top 5 Therapeutic Class by Prescription Count Therapeutic class taxonomy differs among each plan	Antidepressants – Selected SSRIs	Antidepressants	SSRIs
	Anticonvulsants	Antiasthmatic and Bronchodilator Agents	Anticonvulsants
	Atypical Antipsychotics	Anticonvulsants	PPIs
	Beta-Lactams /Clavulanate Combos	Antihypertensives	Antihyperlipidemic – HMG CoA Reductase Inhibitors
	Narcotics – Misc.	Ulcer Drugs/ Antispasmodics/ Anticholinergics	Beta-Adrenergic Agents, Inhaled, Short-Acting