

Kansas Medicaid DUR Board Kelley Melton, Pharm.D Senior Pharmacy Program Manager DHCF Senate Public Health and Welfare February 16, 2015

Drug Utilization Review (DUR)

- OBRA '90 legislation required State Medicaid programs to establish 'Drug Use Review' programs
- Tasked State Medicaid programs with ensuring that prescriptions are:
 - Appropriate
 - Medically necessary
 - Not likely to result in adverse medical results



OBRA '90 DUR Components

- Program shall be designed to educate physicians and pharmacists:
 - to identify and reduce the frequency of patterns of fraud, abuse, gross overuse, or inappropriate or medically unnecessary care
 - to identify and reduce potential and actual severe adverse reactions to drugs



OBRA '90 DUR Components

- Potential components of drug education/review:
 - Therapeutic appropriateness
 - Overutilization and underutilization
 - Appropriate use of generic products
 - Therapeutic duplication
 - Drug-disease contraindications
 - Drug-drug interactions
 - Incorrect drug dosage
 - Duration of drug treatment
 - Drug-allergy interactions
 - Clinical abuse/misuse



DUR Activities

- ProDUR
 - Prior to drug dispensing
 - Review of potential therapy problems
 - Compendia and literature as source for standards
 - Prior Authorization (PA) Criteria as approved by DUR Board

- RetroDUR
 - After drug dispensing
 - Review of claims data for issues in drug regimens/prescribing practices
 - Must provide active and ongoing educational outreach programs
 - Academic detailing



DUR Board

- OBRA '90 also mandated that states establish DUR Boards
- Board tasked with developing ProDUR standards, guiding RetroDUR, and advising state Medicaid programs on clinical issues
- Requires that board be at least 1/3 (but no more than 51%) physicians and at least 1/3 pharmacists



In Kansas...

- DUR Board comprised of 4 physicians, 4 pharmacists, and a mid-level practitioner
- Quarterly meetings on 2nd Wednesday of January, April, July, & October
- Sub-Contract through HP with Health Information Design, Inc. (HID) for RetroDUR and meeting management
- Emergency meetings can be called



Kansas DUR Statutes

- K.A.R. 39-7,118 defines role of DUR Board in Kansas
- K.A.R. 39-7,119 outlines board membership requirements
 - Current composition rules outline specific details for each board position, and lists the parties responsible for nominating practitioners for each position
 - i.e. pharmacist who performs services for an adult care home, as nominated by the board of pharmacy

and Environment

KanCare DUR

- MCOs are required to work through the state's DUR Board for PA criteria approvals/revisions
- Prior to each DUR meeting, state and MCOs collaborate to develop criteria that is amenable to all parties
 - PA criteria is then consistent for the patients covered by fee-for-service or any of the 3 MCOs
- MCOs individually responsible for RetroDUR, but report to the state's DUR Board annually

PA Criteria Sample

APPROVED Prior Authorization Criteria

Initial Approval: July 8, 2009 Revised Date: October 9, 2013

CRITERIA FOR PRIOR AUTHORIZATION

Central Nervous System Depressant

PROVIDER GROUP Pharmacy

MANUAL GUIDELINES The following drug requires prior authorization:

Sodium Oxybate (Xyrem®)

CRITERIA FOR XYREM Must meet all of the following:

- · Patient must have one of the following diagnoses:
 - o Cataplexy in narcolepsy
 - o Excessive daytime sleepiness in narcolepsy
- Patient must be enrolled in the Xyrem Success Program
- Prescriber must be enrolled in the Xyrem Success Program
- Patient must not be taking a sedative hypnotic agent concurrently
- · Patient must not have an existing diagnosis of succinic semialdehyde dehydrogenase deficiency
- · Patient must be 18 years of age or older

RENEWAL CRITERIA FOR XYREM Must meet the following:

Patient must not be taking a sedative hypnotic agent concurrently

LENGTH OF APPROVAL 3 months



Questions







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