The quarterly meeting of the ODM DUR Board was called to order at 12:14 PM EST in room C621 A&B, 50 West Town Street, Columbus, Ohio. Robert Kubasak, R.Ph., presided. The following Board members were present:

- Michael Farrell, M.D.
- Robert Kubasak, R.Ph., Chair
- Donald Sullivan, R.Ph.
- Lenard Presutti, D.O.
- Michael Dietz, D.O.
- A. Mehran Mostafavifar, M.D.
- David Brookover, R.Ph.

Also present from ODM were Tracey Archibald, Pharm. D., DUR Administrator, Michelle Barger, Pharm.D., and Donald Wharton, M.D., Assistant Medical Director. Change Healthcare attendees included Benjamin Link, Pharm.D., Jill RK Griffith, Pharm.D., and Gail Master, R.Ph. Approximately 23 observers were present, most representing pharmaceutical manufacturers.

Roll Call, Reading, Correction, and Approval of previous Minutes

The September 26, 2017, DUR Board Meeting minutes were approved.

Introduction of new Board members

T. Archibald introduced new Board members Michael Dietz, D.O. and A. Mehran Mostafavifar, M.D.

DUR Committee Report

G. Master presented data on three RetroDUR interventions; HIV adherence, duplicate proton pump inhibitor (PPI) use, and high dose PPI use. Prescriber letters and surveys for the three interventions were presented. Discussion ensued and the Board approved the letters and surveys with changes. D. Sullivan and Dr. Farrell requested that PPI doses be tapered and that prescribers be provided information on how best to do so. D. Sullivan requested that a different reference be included in the letter. B. Link reviewed the proportion of days methodology that was utilized to determine adherence on HIV. R. Kubasak expressed concern that HIV patients share medications. G. Master presented an update on the Coordinated Services Program.

Health Plan Policy

T. Archibald announced the departure of Margaret Scott on October 27, 2017. She informed the Board that she would be the DUR administrator and Michelle Barger would be the P&T administrator going forward. She reminded the Board that implementation of the single Preferred Drug List (PDL) has been delayed until July 1, 2018, however clinical meetings are still being held weekly to discuss transition of care and clinical criteria. Clinic criteria will be presented to the Board at future meetings.

T. Archibald announced that electronic Prior Authorization (PA) through the National Council for Prescription Drug Programs (NCPDP) standard will begin on January 1, 2018, and all PAs should be determined within 24 hours.

She informed the Board that beginning January 1, 2018, Medicaid recipients will be enrolled in a Managed Care Plan (MCP) for their first month of coverage rather than starting eligibility in the Fee for Service program. MCPs
must process the eligibility file within 24 hours of receiving the file. Members will have an opportunity to choose their own plan but that initially may be enrolled based on a sophisticated algorithm. She also mentioned that the behavioral health redesign details are available on the Ohio Medicaid Website.

T. Archibald mentioned that in the previous board meeting a discussion was held around compounds. She informed the board that certain powders will be removed from coverage, and that PA on compounds over $100 will be implemented, but has not been finalized yet.

T. Archibald noted that there is still an opening for a pharmacist on the Board and that she has received the application from D. Sullivan’s referral.

Unfinished Business

There was no unfinished business.

New Business

P&T Recommendations

T. Archibald provided an update on the P&T recommendations that were made at the meeting on October 4, 2017. The final PDL for January 1, 2018 is posted on the Ohio Medicaid web. The P&T Committee recommended that the fibrosis score be lifted on Hepatitis C medications. ODM did not accept this recommendation. The P&T Committee also recommended that all buprenorphine products be preferred and for PA to be removed. ODM did not accept this recommendation but will allow a 7-day window without PA. Drugs recommended to be placed on the preferred list that were not accepted by ODM include Triumeq, Breo Ellipta, and Trulicity, however for Trulicity the member will have to fail only one preferred medication instead of two.

Opioid Reporting

Opioid reporting by all MCO plans began on October 1, 2017. PA volume has increased due to opioid edits, but no complaints have been received from prescribers. Dr. Mostafavifar has heard concerns from orthopedic surgeons regarding the 7-day supply limit. Edits on opioids have been lifted for Long Term Care. Dr. Wharton is studying the changes.

Announcements

New officers were elected, D. Sullivan for Chair and A. Mostafavifar for Co-Chair. The dates for the next meetings are Tuesday, February 6th and Tuesday, May 15th, 2018.

Adjournment

R. Kubasak adjourned the meeting at 12:58 P.M.