

Minnesota Department of Human Services DUR Board Meeting

February 26, 2025

Members Present

Samuel Houmes, PharmD., Daniel Jude, PharmD., Allan Osiemo, PharmD., and Ann Philbrick, PharmD.

DHS Staff Present

Mary Beth Reinke, PharmD., DUR Coordinator.

Other Attendants

Chloe Grooms, PharmD., Prime Therapeutic

Public Comments: There were no public comments.

Old business:

There was no old business.

New business:

The Minnesota Medicaid Fee-for-Service (FFS) Pharmacy Modernization contract includes both Prospective (ProDUR) and Retrospective Drug Utilization Review (RetroDUR). The implementation phase of the Prime Therapeutics contract has been completed. This is the first meeting post implementation. Chloe Grooms was introduced as the Prime contact manager.

Both ProDUR utilization edits and RetroDUR criteria will be brought to quarterly DUR Board meetings. Prime has more ProDUR edit capability than the State previously had. This may shift what is addressed retrospectively. The RetroDUR format will continue to be quarterly interventions selected by the DUR Board with criteria and letter content being reviewed by the DUR Board.

The Centers for Medicare and Medicaid Services (CMS) required "SUPPORT Act and the Psychotropic Drugs in Youth" interventions will continue to occur every six months.

Support Act ProDUR:

- 1. Concurrent use of opioid and benzodiazepine. Criteria includes a 90 day look back in claims history for a benzodiazepine and opioid with three or more days of overlap. Message is "opioid-benzodiazepine conflict found". There were 1,270 occurrences.
- 2. Concurrent use of opioid and antipsychotic drug. Criteria includes all antipsychotics regardless of their mechanism of action. Criteria includes a 90 day look back in claims history for an antipsychotic and opioid with three or more days of overlap. Message is "opioid-antipsychotic conflict found". There were 1,084 occurrences.
- 3. Duplicative long-acting opioids. Criteria includes a 30 day look back in claims for at least one different long-acting opioid, identified by specific ingredient, alone or in combination. Message is Duplicate long-acting narcotic is found. There were 617 occurrences.

The DUR Board approved each of the three POS (point-of-service) informational Pro-DUR edits.

Support Act RetroDUR:

- 1. Duplicate short acting opioids (version 1). There were 539 occurrences. Criteria is two or more short acting opioids in the last 90 days which overlap of at least day based on
 - the days supply. Exclusion is any patient with a diagnosis of malignant neoplasms or sickle cell in the last 180 days.
 - Duplicate short acting opioids (version 2). Criteria is two or more short acting opioids in the last 90 days which overlap of at least day based on the days supply.
- 2. Opioid without naloxone. There were 1,588 occurrences. Criteria is six or more claims for an opioid in the last 180 days and no claims for naloxone with a diagnosis of opioid overuse and/or a diagnosis of substance abuse disorder within the last 365 days. A list of FFS Medicaid covered naloxone products without no prior authorization was included.
- 3. Narcotic analgesics and narcotic withdrawal therapy agents or opioid use disorder. There were 1,328 occurrences. Criteria is an opioid claim with a days supply greater than 7 days in the last 90 days and a claim for drug used for MAT in the last 730 days or a diagnosis of opioid use disorder in the last 730 days.
- 4. Maximum daily morphine milligram equivalent (MME). There were 1,247 occurrences. Criteria is claims for at least a 30-day supply for 2 or more different opioids in the last 90 days that cumulatively exceeds more than 90 morphine milligram equivalents (M.M.E.)

Letters include the links to the CDC Clinical Practice Guideline for Prescribing Opioids for Pain – United States 2022 offers strategies for pain management and the Minnesota Prescription Drug Monitoring website as a resource to determine prescribers and opioids per patient.

The DUR Board approved all four RetroDUR criteria for the SUPPORT Act RetroDUR intervention. For the first mailing Criteria 1, version 2 will be used. For the second mailing and ongoing, Criteria 1, version 1 will be used.

The next meeting is May 7th. The meeting was adjourned.