POLICY AND PROCEDURE

DEPARTMENT: Pharmacy	**DOCUMENT NAME:** Drug Utilization Review
PAGE: 1 of 5	**REPLACES DOCUMENT:** GA.PHAR.02
APPROVED DATE:	**RETIRED:**
EFFECTIVE DATE: 4/07	**REVIEWED/REVISED** 1/2018, 3/2018
PRODUCT TYPE: All	**REFERENCE NUMBER:** GA.PHAR.13

SCOPE:
Centene Corporate Pharmacy Department, Centene Corporate Pharmacy and Therapeutics Committee, Peach State Health Plan Pharmacy Department, Peach State Health Plan Pharmacy and Therapeutics Committee, and Pharmacy Benefit Manager.

PURPOSE:
To define the process of Peach State Health Plan (Peach State) Drug Utilization Review (DUR).

POLICY:
The standard prospective and retrospective Drug Utilization Review (DUR) programs are delegated to the designated pharmacy benefit manager (PBM), Pharmacy Benefit Manager, utilizing the standards, criteria, protocols and procedures established by the mutual agreement of Centene Corporate Pharmacy and Therapeutics Committee, Peach State Pharmacy Department and Pharmacy Benefit Manager, and in accordance with applicable state and federal requirements and NCQA standards. The DUR program is submitted for review and approval to the Centene Corporate and Peach State Pharmacy and Therapeutics Committees annually. The DUR program is designed to alert prescribers and/or dispensing pharmacists by identifying overuse, underuse, inappropriate or medically unnecessary care, and to address safety concerns associated with specific drugs, including the potential for drug interactions. The DUR program also functions to identify opportunities to improve the quality of care for patients including adherence to prescribed therapy and improvements in the medication regimen consistent with the patient's diagnoses or conditions. The results of any retrospective DUR programs may also be used to initiate additional claims review and analysis at Peach State. In addition, follow-up studies may be performed to assess the impact and outcomes of retrospective DUR interventions.

PROCEDURE:
Selection of DUR Projects: DUR projects are initiated from review of current clinical literature and monthly trends in utilization that may prompt the need analysis and the potential need for an intervention. The DUR projects are carefully chosen to maintain a high level quality of care for members by intervening with prescribers and dispensing pharmacists to reduce potential inappropriate prescribing patterns or promote improved drug therapy based on recognized standards of care. Data generated from prescriber responses is used

to modify and improve the DUR projects as well as report outcome data to determine the effectiveness of the projects.

PROCESS: Plan pharmacists are notified by Pharmacy Benefit Manager, either monthly or quarterly (dependent on the clinical intent of the DUR initiative), of members identified as meeting the requirements for a potential DUR intervention. If deemed appropriate, communications are initiated to providers by phone, fax or via intervention letters. Faxes and intervention letters may include patient prescription profiles for prescribers to review along with outcome checklists to monitor practitioner response. In most cases a brief but definitive provider communication is sent, notifying prescribers of potential concerns or suggestions for improved therapy, while offering providers further detail upon request. Phone communications and faxed or mailed prescriber responses are documented in TruCare.

Prospective DUR Guidelines: Prospective Drug Utilization Review functions are provided at the point of sale (POS) and include real-time messaging that can affect dispensing. The Pharmacy Benefit Manager PBM system uses a compiled database provided by Medispan to generate electronic alerts to dispensing pharmacies via standard POS messaging when potential drug conflicts exist. In most cases, Pharmacy Benefit Manager uses a passive notification that is meant to augment the dispensing pharmacy's internal DUR dispensing application and to avoid interruption or delays in drug therapy.

PASSIVE DUR POS MESSAGING	
Drug-Related Problem	**Related Concurrent DUR Alert**
Medication Overuse Medication Underuse	
Non-compliance	– Poor adherence/Failure to receive medication – Underuse precaution
Subtherapeutic dosage	– Low dose alert – Insufficient duration alert
Adverse Drug Events (ADE)	
Drug interaction	– Drug-food interaction – Drug-alcohol interaction

In some cases (such as pregnancy contraindications below), system edits may

require the dispensing pharmacist to override the edit confirming that the issue of concern has been addressed. The prospective DUR system edits use predetermined standards which are based upon the peer-reviewed medical literature and references such as, American Hospital Formulary Service Drug Information, United States Pharmacopoeia Drug Information, Clinical Pharmacology and Facts and Comparisons.

DUR REJECTIONS	
Drug-Related Problem	**Related Concurrent DUR Alert**
Medication Overuse	
Overdose/toxicity	– Overuse precaution – Therapeutic duplication
Improper drug selection	– Drug-age precaution – Drug-pregnancy alert – Drug-gender alert
Adverse Drug Events (ADE)	
Drug interaction	– Drug-drug interaction (significant)

Pregnancy/Drugs Contraindicated in Pregnancy:
Pharmacy Benefit Manager has developed an automated drug warning alert to pharmacies when a patient's prescription history shows no use of contraception and/or hormone replacement therapy, for females ages 12 through 50 who are prescribed drugs labeled as pregnancy categories D and X. The network pharmacy is required to enter an override code to confirm that an assessment of pregnancy risk has been performed.

Retrospective DUR Guidelines: All standard retrospective DUR programs adhere to current standards of drug based screening elements for medications that have limited clinical documentation supporting combination use, carry high risk warnings for concomitant drug therapy, identify overuse, underuse or sub-therapeutic dosing of medication, suggest possible fraud and abuse potential or offer other opportunities to improve patient care.

Goals: Standard retrospective drug utilization review goals include:

- Improve prescribing practices by educating prescribers on current practice standards and guidelines and by making recommendations to improve medication therapy.

- Alert prescribers to potential problems, such as drug interactions, drug non-adherence, overutilization, multiple prescribers, and therapeutic duplication with the dual objectives to provide a high quality drug benefit and impact overall drug utilization.
- Educate and communicate to prescribers on the safety, efficacy and pharmacoeconomics of drugs placed on the Preferred Drug List (PDL) to increase the cost-effectiveness of the pharmacy benefit.
- Identify areas of abuse, misuse or fraud by prescribers or members.

Patient Specific Review:

The plan pharmacist performs an ongoing evaluation of prescription claims to review claims history for potential therapeutic issues using plan specific pharmacy claims data provided by Pharmacy Benefit Manager. The plan pharmacist reviews the monthly claims data to look for patient or drug specific claims information that may indicate inappropriate pharmacy benefit utilization or patient safety concerns. The plan pharmacist may refer members to case management nurses for member intervention.

REFERENCES: N/A

ATTACHMENTS: N/A

DEFINITIONS: N/A

REVISION LOG

REVISION:	**DATE**
Revisions completed at this time were made to address clerical errors, align with NCQA standards and language, and represent the work processes in place at both the Plan level and at Envolve Pharmacy Solutions.	07/2010
Teratogenic edit clarified. Other clerical changes made.	07/2011
Annual Review. No changes made.	03/2012
Annual Review. No changes made.	03/2013
Under Process, updated CCMS reference to TruCare in the following sentence: “Phone communications and faxed or mailed prescriber responses are documented in CCMS.”	03/2014

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Made changes to the table regarding which DUR situations would trigger a passive DUR alert versus which would cause a reject causing a call to Envolve Pharmacy Solutions.	03/2015
Updated Centene Corporate Pharmacy Department to Centene Corporate Pharmacy and Therapeutics Committee in the Policy section	03/2016
Changed US Script to Envolve Pharmacy Solutions	01/2017
Removed Envolve Pharmacy Solutions name and replaced with Pharmacy Benefit Manager.	01/2018
Annual review. No changes made.	03/2018

POLICY AND PROCEDURE APPROVAL

Pharmacy & Therapeutics Committee: Approval on file
Sr. Director, Pharmacy Operations: Approval on file
Sr. Medical Director: Approval on file

NOTE: The electronic approval is retained in Compliance 360.