KERN HEALTH SYSTEMS

PROVIDER bulletin

September 20, 2017

Dear Provider:

CMS released final rule changes which require managed care plans to operate a DUR program that complies with Section 1927(g) of the Social Security Act (SSA) and Title 42, CFR part 456, subpart K. The DUR program educates physicians and pharmacists to better identify patterns, and reduce the frequency of fraud, abuse, gross overuse, and inappropriate or medically unnecessary care, both among physicians, pharmacists, and patients, and fraud or abuse associated with specific drugs or groups of drugs. The Final Rule also requires the plans to provide prospective and retrospective DUR process.

As part of the education process, Kern Family Health Care is modifying part of the current prospective DUR edits. Currently soft edits are provided at the point of dispensing indicating possible therapeutic drug duplications. Pharmacists are to assess the appropriateness of these combinations and then collaborate with the provider for the appropriate next steps. Letters have been sent to both provider and pharmacy in the past when these combinations were seen to repeat month after month. These edits will be changed to a hard edit. Medical justification will need to be provided to allow the duplicate therapies to continue to be covered.

Examples of these duplications would be, but not limited to the following pairings:

Inhaled corticosteroid	ICS/LABA
ACE inhibitor	ARB
Two long acting insulins	
Two short acting insulins	
Two short acting opioids	
Two NSAIDS	
Two ACEs	
Two benzodiazepines	
Two SGLT-2 inhibitors	
Two gaba-derivatives	
SSRI	SNRI
DDP-4	GLP-1

Sincerely,

Bruce Wearda, R.Ph.
Director of Pharmacy