

PA Health & Wellness Pharmacy and Therapeutics Committee Meeting Minutes 300 Corporate Center Drive, Suite 600, Camp Hill, PA 17011

Wednesday, October 12, 2022 - 12:00 PM - 1:30 PM

Present: Meghan McNelly, PharmD, Dr. Venkateswara Davuluri, Michelle Bennett, RPh, Dr. Christopher Hughes, Dr. Carla Huitt, Dr. Kolin Good

Absent: Jill Schaeffer, RN, Dr. Mahmood Usman, Dr. Keith Brown

Non-VotingAmy Nowacki (Pharmacy), Jason Skaria (Pharmacy Manager), Shalyn Kline (Pharmacy), Pamela Suhan (QI Coordinator),Members:Jacci Rowe (Compliance), Heather Clarke (Director of Case Management).

Call to Order: The PA Health & Wellness Pharmacy and Therapeutics Committee meeting called to order at 12:02 PM.

Adjourned: The PA Health & Wellness Pharmacy and Therapeutics Committee meeting was adjourned at 12:14 PM.

Next Meeting: Wednesday, January 11, 2023 – 12:00 PM

Submitted By: Shalyn Kline (PHW Pharmacy)

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	Shalyn Kline, PharmD	Date:
Committee Chair:		01/11/2023

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Agenda Item	Discussion/Recommendation	Action	Next Steps	Owner
I. Introduction & Call to Order	Meghan McNelly called the PA Health & Wellness Pharmacy & Therapeutics Committee meeting to order at 12:02 PM.	Meeting Called to Order		Meghan McNelly
A. Introductions	No new introductions			Meghan McNelly
B. Announcements	 Departure of Pharmacist team member announced. Meghan asked for a recommendation for replacement from the team. Meghan reminded all that 75% attendance is required for all voting members to remain as active committee members. Every month, a report is sent to the state. The state provides feedback, and the necessary follow-up is completed. 	Recommendati on for new pharmacist team member requested from team.		Meghan McNelly
C. Explanation of the Review and Approval Process	i. Voting and vote totals ii. Tie breaker iii. Pennsylvania's Review and Approval Process	No action required or taken.		Meghan McNelly
D. Charter Review	The committee charter was reviewed with the committee members.	No action required or taken.		Meghan McNelly
II. Approval of Meeting Minutes	A vote was taken for the approval of the minutes from Q3_2022. No objections were made.	Adoption of Q3_2022 Meeting Minutes recorded as approved		Shalyn Kline

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Jo old business	No action required or	Meghan McNelly
	taken.	
There are no outstanding clinical policies awaiting approval.	No action required or taken.	Shalyn Kline
According to the CHC contract, a compliance rate of 95 percent is xpected. The compliance rate is currently being audited internally. The Pennsylvania Department of Human Services is conducting an udit of prior authorization determination data.		Shalyn Kline
A vote was taken for the approval of the Narcolepsy provider ducation. No objections were made.	The provider education was Committee approved.	Shalyn Kline
This is informational only and addresses recalls, new drugs, etc. No rote necessary.	Informational	Shalyn Kline
Review on Combined Summary Table for summary revisions, new oblicies created, and policies being replaced/retired for all lines of ousiness.	The policy revisions were Committee approved.	Shalyn Kline
Shalyn stated that there were 4 determinations upheld and 11 overturned. Eleven of the sixteen determinations were for opioids. One determination was withdrawn in pre-grievance.		Shalyn Kline
Discussion: Shalyn advised they are working with the prior authorization team to sipass not applicable criteria on the State's guideline on long term are members, since their care is managed daily.		
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F. Drug Utilization Review	Shalyn presented the drug utilization review, noted the numbers are for June-August. Last month will be reported during the next P&T.		Shalyn Klin
	FWA – There were 43 Participants reviewed with 90 Morphine Milligram Equivalent (MME) or more. No issues were found. No Participants were identified with three or more practices/hospitals prescribing opioids.		
	Inappropriate prescribing -24 Participants were identified potentially using inappropriate antipsychotic medications. A fax is to be sent to providers for awareness.		
	Disease management –54 participants were identified for SABA overuse. Both populations will have a fax sent to providers for awareness.		
G. PBM Oversight	In Q3, there were 1,650 requests audited. July error rate was 4.68%, August was 2.25% and September was 2.38%.		Jason Skari Meghan McNelly
	Corrective Action Plan put in place in Quarter 2 by PA DHS. Internal audit of all Prior Authorizations required by PHW pharmacists including PDL application, correct policy use, correct member/provider letter template, and decision timeline.		
	Meghan stated that there is an ongoing 100% review of all Prior Authorizations by both Centene Pharmacy Services and internal PHW pharmacist, per the Corrective Action Plan. The continual trend down in rate for errors found month over month.		
K. Open Forum	Meghan advised the P&T team is still seeking a participant member/family member for attendance.	PHW will continue to seek out	Meghan McNelly

act of 1986 (42 U.S.C.S. §1137 (b)).

			pa health & wellness.
		participant for	
		membership	
Adjournment	The meeting was adjourned at 12:14 pm	Meeting	Meghan
		adjourned	McNelly

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