NEW YORK STATE | Department of Health | Medicaid NYRx

NYRx, the Medicaid Pharmacy Program

Drug Utilization Review Program

Drug Utilization Review Program

- The Drug Utilization Review Program (DUR) helps to ensure that prescriptions for outpatient drugs are appropriate, medically necessary, and not likely to result in adverse medical consequences.
- This program uses professional medical protocols, computer technology, and claims processing data to inform clinical requirements regarding the prescribing and dispensing of prescriptions.
- Criteria requirements may include:
  - Confirmation of diagnosis
  - Frequency/Quantity/Duration (F/Q/D) limits
  - Step Therapy (ST) parameters

Drug Utilization Review Board

Federal legislation that requires states to implement DUR programs also requires states to establish DUR boards (DURBs) whose function is to play a major role in each state's DUR program. Pursuant to state law, the DURB was created to establish and implement medical standards and criteria for Medicaid's DUR programs. The New York State Medicaid DURB is comprised of health care professionals appointed by the Commissioner of Health and includes physicians and pharmacists that actively practice in New York.

Drug Utilization Review Board

Responsibilities of the DURB include:

- The establishment and implementation of medical standards and criteria for the retrospective and prospective DUR program.
- The development, selection, application, and assessment of educational interventions for physicians, pharmacists and recipients that improve care.
- The collaboration with managed care organizations to address drug utilization concerns and to implement consistent management strategies across fee-for-service and managed care.
- The review of therapeutic classes subject to the Preferred Drug Program.

How Does the DUR Program Differ From PDP?

The **DUR** program applies coverage criteria to select drugs or drug classes covered by NYRx.

The **PDP** program identifies drugs in select drug classes as preferred or non-preferred. Non-preferred drugs require prior authorization unless otherwise indicated. Drugs or drug classes in the PDP may also be subject to the DUR program.

Drug Utilization Review Criteria

Diagnosis requirements, Frequency/Quantity/Duration (F/Q/D) parameters, and Step Therapy (ST) parameters are implemented to ensure clinically appropriate and cost-effective use of these drugs and drug classes.

Anti-Retroviral (ARV) Interventions

Drug / Class Name	Step Therapy (ST) Parameters	Frequency / Quantity / Duration (F/Q/D) Parameters	Additional / Alternate Parameter(s)
Anti-Retroviral (ARV) Interventions		**QUANTITY LIMITS:** • Limit ARV active ingredient duplication • Limit ARV utilization to a maximum of five products concurrently - excluding boosting with ritonavir (dose limit 600 mg or less) or cobicistat • Limit Protease Inhibitor utilization to a maximum of two products concurrently • Limit Integrase inhibitor utilization to a maximum of one product concurrently • Limit non-nucleoside reverse transcriptase inhibitor utilization to a maximum of 1 product concurrently • Limit ARV booster utilization to 1 product concurrently • Limit co-formulated and co-packaged complete ARV regimens listed in Appendix A to a maximum of 1 product concurrently with no additional ARVs.	• Require confirmation of FDA-approved or compendia-supported use • Point-of-service edit for antiretroviral / antiretroviral combinations to be avoided: https://newyork.fhsc.com/downloads/providers/NYRx_PDP_reference_Antiretroviral_Antiretroviral_Drug2Drug_Interactions.pdf

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Thank You!
NYRx Education & Outreach