By: ZerwasH.B. No. 2030Substitute the following for H.B. No. 2030:Example 1By: McReynoldsC.S.H.B. No. 2030

A BILL TO BE ENTITLED

1 AN ACT 2 relating to the Medicaid Drug Utilization Review Program and prescription drug use under the Medicaid program. 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 4 SECTION 1. Subchapter B, Chapter 531, Government Code, is 5 amended by adding Sections 531.0691, 531.0692, and 531.0693 to read 6 7 as follows: Sec. 531.0691. MEDICAID DRUG UTILIZATION REVIEW PROGRAM: 8 DRUG USE REVIEWS AND ANNUAL REPORT. (a) In this section: 9 (1) "Medicaid Drug Utilization Review Program" means 10 the program operated by the vendor drug program to improve the 11 quality of pharmaceutical care under the Medicaid program. 12 13 (2) "Prospective drug use review" means the review of 14 a patient's drug therapy and prescription drug order or medication order before dispensing or distributing a drug to the patient. 15 16 (3) "Retrospective drug use review" means the review of prescription drug claims data to identify patterns of 17 prescribing. 18 (b) The commission shall provide for an increase in the 19 number and types of retrospective drug use reviews performed each 20 year under the Medicaid Drug Utilization Review Program, in 21 comparison to the number and types of reviews performed in the state 22 23 fiscal year ending August 31, 2009. 24 (c) In determining the number and types of drug use reviews

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1	to be performed, the commission shall:
2	(1) allow for the repeat of retrospective drug use
3	reviews that address ongoing drug therapy problems and that, in
4	previous years, improved client outcomes and reduced Medicaid
5	<pre>spending;</pre>
6	(2) consider implementing disease-specific
7	retrospective drug use reviews that address ongoing drug therapy
8	problems in this state and that reduced Medicaid prescription drug
9	use expenditures in other states; and
10	(3) regularly examine Medicaid prescription drug
11	claims data to identify occurrences of potential drug therapy
12	problems that may be addressed by repeating successful
13	retrospective drug use reviews performed in this state and other
14	states.
15	(d) In addition to any other information required by federal
16	law, the commission shall include the following information in the
17	annual report regarding the Medicaid Drug Utilization Review
18	Program:
19	(1) a detailed description of the program's
20	activities; and
21	(2) estimates of cost savings anticipated to result
22	from the program's performance of prospective and retrospective
23	drug use reviews.
24	(e) The cost-saving estimates for prospective drug use
25	reviews under Subsection (d) must include savings attributed to
26	drug use reviews performed through the vendor drug program's
27	electronic claims processing system and clinical edits screened

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1 <u>through the prior authorization system implemented under Section</u> 2 531.073.

3 (f) The commission shall post the annual report regarding
4 the Medicaid Drug Utilization Review Program on the commission's
5 website.

6 <u>Sec. 531.0692. MEDICAID DRUG UTILIZATION REVIEW BOARD:</u> 7 <u>CONFLICTS OF INTEREST. (a) A member of the board of the Medicaid</u> 8 <u>Drug Utilization Review Program may not have a contractual</u> 9 <u>relationship, ownership interest, or other conflict of interest</u> 10 <u>with a pharmaceutical manufacturer or labeler or with an entity</u> 11 <u>engaged by the commission to assist in the administration of the</u> 12 <u>Medicaid Drug Utilization Review Program.</u>

13 (b) The executive commissioner may implement this section 14 by adopting rules that identify prohibited relationships and 15 conflicts or requiring the board to develop a conflict-of-interest 16 policy that applies to the board.

17 Sec. 531.0693. PRESCRIPTION DRUG USE AND EXPENDITURE (a) The commission shall monitor and analyze PATTERNS. 18 19 prescription drug use and expenditure patterns in the Medicaid The commission shall identify the therapeutic 20 program. prescription drug classes and individual prescription drugs that 21 22 are most often prescribed to patients or that represent the greatest <u>expenditures</u>. 23

(b) The commission shall post the data determined by the
 commission under Subsection (a) on the commission's website and
 update the information on a quarterly basis.

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SECTION 2. If before implementing any provision of this Act

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1 a state agency determines that a waiver or authorization from a 2 federal agency is necessary for implementation of that provision, 3 the agency affected by the provision shall request the waiver or 4 authorization and may delay implementing that provision until the 5 waiver or authorization is granted.

6 SECTION 3. This Act takes effect September 1, 2009.