

By: Zerwas

H.B. No. 2030

A BILL TO BE ENTITLED

AN ACT

relating to the Medicaid Drug Utilization Review Program and prescription drug use under the Medicaid program.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subchapter B, Chapter 531, Government Code, is amended by adding Sections 531.0691, 531.0692, and 531.0693 to read as follows:

Sec. 531.0691. MEDICAID DRUG UTILIZATION REVIEW PROGRAM: DRUG USE REVIEWS AND ANNUAL REPORT. (a) In this section:

(1) "Medicaid Drug Utilization Review Program" means the program operated by the vendor drug program to improve the quality of pharmaceutical care under the Medicaid program.

(2) "Prospective drug use review" means the review of a patient's drug therapy and prescription drug order or medication order before dispensing or distributing a drug to the patient.

(3) "Retrospective drug use review" means the review of prescription drug claims data to identify patterns of prescribing.

(b) The commission shall provide for an increase in the number and types of retrospective drug use reviews performed each year under the Medicaid Drug Utilization Review Program, in comparison to the number and types of reviews performed in the state fiscal year ending August 31, 2009.

(c) In determining the number and types of drug use reviews

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 spending;

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

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

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
18 PATTERNS. (a) The commission shall monitor and analyze
19 prescription drug use and expenditure patterns in the Medicaid
20 program. The commission shall identify the therapeutic
21 prescription drug classes and individual prescription drugs that
22 are most often prescribed to patients or that represent the
23 greatest expenditures. The analysis must consider the number of
24 claims, the total cost of paid claims, and the average cost per paid
25 claim after any prescription drug rebates.

26 (b) The commission shall post the data determined by the
27 commission under Subsection (a) on the commission's website and

1 update the information on a quarterly basis.

2 SECTION 2. If before implementing any provision of this Act
3 a state agency determines that a waiver or authorization from a
4 federal agency is necessary for implementation of that provision,
5 the agency affected by the provision shall request the waiver or
6 authorization and may delay implementing that provision until the
7 waiver or authorization is granted.

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