

Tuesday, January 28th, 2025
9:00 a.m.
Louisiana Independent Pharmacies Association
543 Spanish Town Road
Baton Rouge, LA 70802

Name	Committee Attendance	Attendance
M.J. Terrebonne	Pharmacist (House Committee on Health & Welfare)	Present
Kim Wixson	Louisiana Pharmacists Association	Present
Randal Johnson	Louisiana Independent Pharmacies Association	Present
Dr. Stewart Gordon	Physician (House Committee on Health & Welfare)	Present
Melwyn Wendt	Louisiana Department of Health	Present
Jeff Gaudé	National Association of Chain Drug Stores	Absent
Pam Reed	LA Alliance of Retail Pharmacies	Present
Dr. Jamie Edwards	Physician (Senate Committee on Health & Welfare)	Absent
Dana Antoon	Louisiana Board of Pharmacy	Absent
Lishunda Franklin	Louisiana Board of Pharmacy	Present
Ashley Acosta Chanove	Pharmacist (Senate Committee on Health & Welfare)	Present

Zoom		LIPA Staff, Kyle_Bellingrath, Joshua Wyatt, iPhone Andy, Denise HBI, Nick Lebas, Hai, Jeanine Plante, Renesha Yarbrough, Rachel Broussard, Steph Brancroft, Matt Hill, Luke Slindee, Kolynda Parker, Leslie Pittman, Brooke Gunter, Samantha Hai, Mark Triplett, Scott D. Simmons, Allan Hansan, Matthew Bullard, Karen, C. Joseph Cloud, Morgan, Kim Sullivan, Vanessa Smith, Rosalind Borders, greg poret, Julie F. Zeno, Joseph "Nick" Helnana, Denise HBI, Josiah Howell
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- **Call to Order**
 - The meeting was called to order at 9:10 a.m.
- **Introductions and Quorum Determination**
 - A quorum was confirmed and Dr. Lishunda Franklin was welcomed as the new member.
- **Review and approval of the October 24th meeting minutes**
 - Dr. Stewart Gordon and Randal Johnson approved the October meeting minutes.
- **Cost of Dispensing Survey Update and Review of Draft Copy**
 - Allan Hansen and Matt Hill from Myers & Stauffer shared a presentation on methodology findings from the most recent cost of dispensing survey. Myers & Stauffer is contracted with LDH to perform the survey. The purpose of the survey is to ascertain the average cost of dispensing medication. The survey was intended to help LDH evaluate all expenses. The survey tool is designed to locate actual historical costs. Thirty-five pharmacies were randomly selected for a supplemental review. Nine hundred nineteen pharmacies completed the survey.
 - LDH: We conduct cost of dispensing surveys every three years
 - Randal Johnson: A significant number of mail orders pharmacies increased.
 - M.J. Terrebonne: How did you determine closed door?
 - Matt Hill: This is something we made for the survey.

- Randal Johnson: The independent pharmacies have to find a pharmacist and pharmacy staff while serving the Medicaid population.
- M.J. Terrebonne: If there were any adjustments, what would it look like?
- Allan Hansen: We did not propose or make any adjustments. We could consider looking at proportionally weighted contributions from chains and independents. We did not make any such adjustments in the numbers.
- Randal Johnson: When we started looking at the area volume, how did you consider any of the changes with additional pharmacies in the area of pharmacy or staffing?
- Allan Hansen: Our approach is to use historical data. For most pharmacies, it was the 2023 calendar year.
- Randal: Is there any correlation with the difficulties of finding staff or additional timework
- Allan Hansen: That is taken into consideration in how they pay for labor
- Ashley Acosta Chanove: Regarding single dispensing fee. Is there a difference between defining the "local" and "independents"?
- Randal Johnson: The definition of "local" pharmacy is when the pharmacy is based in Louisiana and has less than 10 pharmacies under its local umbrella.
- M.J. Terrebonne: If the pharmacist chose "independent" on the survey, what did you do?
- Allan Hansen: We put an identifier in the data.
- Lishunda Franklin: Will you go back and reconcile on your end?
- Allan Hansen: Yes.
- M.J. Terrebonne: What is the department's intentions with this report?
- LDH: This report is currently being reviewed. The report was given to the Secretary. We are waiting to see if LIPA or the council has comments.
- Randal Johnson: Could you elaborate on what you included in specialty pharmacy?
- Allan Hansen: We did not have a strict definition to work on.
- Randal: I would like to suggest the council provide a letter for the Secretary. I would like to make a motion for the council to prepare a letter to the Secretary with comments regarding the report. Dr. Stewart Gordon seconded the motion.
- **Table 2.5 components of the cost of dispensing per prescription which were inflated February 2022 Survey to fee of \$11.81**
 - The report was shared and reviewed on the iPad
- **LDH Reports**
 - **Final Findings of Reimbursement of Chains and Independents and NADAC**
 - The report was reviewed on the iPad.

- LDH: This came from Myers & Stauffer. We were looking at the claims. The Secretary has agreed to go forward with the change. This is not an easy switch. This is not an immediate and quick fix.
- Randal Johnson: Around one year ago, you shared a report from 3M Axis. Where have you seen this normalized?
- LDH: Milliman has confirmed Prime did end up hitting their contractual guarantee targets. This should no longer be an issue.
- Randal Johnson: Will it be NADAC or MAC? Do you plan to change it to a lesser than methodology?
- LDH: On the fee for service side, we do not use a MAC. Under the NADAC model, the chains would get a dispensing fee. Right now, they are getting nothing.
- **Findings for reimbursement of Mail order and Specialty Pharmacy at NADAC**
- Currently there are no mail order pharmacies in Prime's network as defined by NCPDP.
- **Specialty Drug Expenditures**
- M.J. Terrebonne: There is a report that is listed, titled specialty drug claims.
- LDH: Prime posted the specialty drug list
- **SIN Report**
- The SIN report was reviewed on the iPad. The last one is for state fiscal year 2024.
- **Medicaid PDL Update- Trending Reports**
 - The report was reviewed on the iPad
 - LDH: The report of uptick in generic utilization going in a positive direction.
- **Magellan Single PBM Update**
 - **Contract Changes**
 - LDH: If we change reimbursement methodology, then we have to make contract changes with Prime and the network pharmacies.
 - **Audits- Number of Chains versus independents**
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 - Stephanie Bancroft: More local pharmacies were audited than chain pharmacies based on an algorithm. These are proprietary to the audit. I would have to take this back and see what they are able to share.
 - Randal Johnson: How are they paid?
 - Stephanie Bancroft: I would have to gather this information and provide it to this group.
 - Randal Johnson: We are looking at the Prime therapeutics audit. If you only have 46 locals to look at, you should have this information.

- **Prescription Limits**

- Dr. Stewart Gordon: I would like some feedback from the pharmacists. Five of the six MCOs believe we need to propose a cap on prescriptions, per month. I would like some feedback from the pharmacists dispensing drugs every day.
- Kim Wixson: The only thing this ever achieved was a delay in care. It never saved any money. Only added time and frustration. Proposes an undue burden.
- Ashley Acosta Chanove: Anybody knows this headache. If you were audited and did not have any documentation, you were fined.
- Dr. Stewart Gordon: Biosimilars are a big deal in cancer world. There was a recent issue with outpatient physician administered drug reimbursement, and now there is only a fix for Mary Bird Perkins. Any thoughts from Medicaid as to why this occurred?
- LDH: This is not going through the outpatient pharmacy programs. This is a fee schedule the Secretary only agreed to for Mary Bird Perkins. We did a cost analysis across the board.
- Dr. Stewart Gordon: Regarding 340 B, when a 340 B pharmacy is dispensing medicine to a Medicaid recipient; can this be taxed?
- Randal Johnson: This is not taxable under state law. With these quantity limits or changes that are being proposed, there are certain requirements that need to be made.
- LDH: The new policy stated claims would initially deny for multivitamins that cost \$150 or more, excluding prenatal vitamins. This is a filter to make sure this is okay.
- Randal Johnson: How was the notice given to the providers?
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- Randal Johnson: Where is this published? What is the requirement the state is going to follow on how to complete notices to the patient or the public? Are you doing this through administrative procedures process?
- LDH: We have a process for this. This was a new external source with some things coming up for cost containment.
- Ruth: I will look five or six places for notices. Sometimes you have letters on the pharmacy website. It would be helpful if we have some sort of protocol. Information is located in multiple places.
- Leslie: Going forward, we can draft a notice, which will be sent out to our providers. The notice will be incorporated into the provider manual.
- Randal Johnson: Can you offer us any consistency? What is the official method the department will communicate with the public and providers?
- LDH: If we do a contract change or manual change, Pharmacy has the Pharmacy facts. There is not one notice mechanism. If it is a rule, it goes

in the Louisiana register. There is not a one-stop shop for a provider to check.

- Randal Johnson: Where can we find the notice for Enbrace HR on your website?
- LDH: This is new. Prime is in the process of working on this notice. This is currently in the process.
- Randal Johnson: We are a month and a half in, after you implemented the change. We are in support of cost control. We are still six months into where we were, asking what is the official way you will provide notice.
- LDH: Pharmacists will still be able to process the claim if they call to get an override.

- **Pharmacy Facts, Policy Memos, Prime Therapeutics Notices**

- M.J. Terrebonne: LDH has the pharmacy facts. Louisiana Medicaid has numerous updates on their website. LAMCOPBM pharmacy.com has a website, and they have numerous updates as well as a provider manual. We have Legacy Medicaid and Prime Therapeutics. There should be notices on these two entities. For the most part, they mirror each other. You could send a notice to the providers.
- LDH: This is something issued by the department. If we are going to change the policy manual, it has to go through a detailed review process. Pharmacy Facts was something to try to get the word out quickly to pharmacy providers. Gabby is working on updating the LDH pharmacy provider manual. LA Medicaid and Prime therapeutics are the two primary websites.

- **Call for Public Testimony**

- Scott Simmons: Speaking in term of long-term care, when we fill medication, we are told it is not five days but four days. Technically, this shortens the supply for clients twelve days a year.
- Renesha Yarbrough: We have the percentage for early refills set by LDH, which is 85 percent for non-controls. Technically, if we go with the five days we are not meeting the 85 percent because 85 percent of 30 days is 25.5 days, and we allow the refill at day 26. If you want to put in a change request, we could have this changed in 28 days.
- LDH: LDH will look into Scott's issue. We should have an update at the next meeting.

- **Other Business**

- N/A

- **Future Meeting Dates**

- The next meeting will be held on Tuesday, February 25th

- **Adjournment**

- Kim Wixson and Ashley Acosta Chanove made the motion to adjourn the meeting. The meeting was adjourned at 12:05 p.m.