

Tuesday, February 25th, 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	Zoom
Randal Johnson	Louisiana Independent Pharmacies Association	Present
Dr. Stewart Gordon	Physician (House Committee on Health & Welfare)	Present
Sue Fontenot	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	Present
Lishunda Franklin	Louisiana Board of Pharmacy	Present

Ashley Acosta Chanove	Pharmacist (Senate Committee on Health & Welfare)	Absent
Zoom		LIPA Staff, Matthew Bullard, Diane Milano, Steph Bancroft, Jennie Stelly, Ranesha Yarbrough, Leslie Pittman, Robert Rock, Sarah Perkins, Kyle_Bellingrath Pharm, C. Joseph Cloud, TKC, Jeanine Plante, Catie Chaucer-Aetna, Robert Rock, Tiffany Marshall, Vanessa Smith ABH, Kim Wixson. Kim's pink ipad, johnj, greg poret,

- **Call to Order**
 - The meeting was called to order at 9:11 a.m.
- **Introductions and Quorum Determination**
 - A quorum was confirmed
- **Review and approval of the January 28th meeting minutes**
 - Randal Johnson and Dana Antoon approved the January 28 meeting minutes.
- **Review of Draft Letter regarding Cost of Dispensing Survey**
 - Randal Johnson asked the department if they have any input they might want to add.
 - LDH: We have not discussed the letter. We are waiting for the letter to arrive.
 - Dr. Stewart Gordon made a motion to approve the letter. Pam Reed seconded the motion to approve and send the letter.
- **TPL Issues**
 - LDH: We are working with HMS, which is the TPL vendor. We are having ongoing meetings. In our system through HMS, it shows the TPL has been removed. This is a long delay and we are trying to get this resolved.
 - Randal Johnson: Does Prime have any contractual obligations
 - LDH: They have to process claims appropriately and timely
 - Ranesha Yarbrough: HMS updates the TPL on their side then it goes to Gainwell. If the patient cannot get their drugs, they can call our call center and immediately receive an override for one week.
 - Dana Antoon: Could we extend the time?

- LDH: This would be up to the MCOs. The MCOs would have to unanimously approve.
- M.J. Terrebonne: We will continue to monitor.
- **LDH Reports**
 - ***Status of implementation of NADAC and Contract Amendments***
 - LDH: We are waiting on Prime to give us a timeline for NADAC. We should receive the timeline this week.
 - ***Contractual obligations of the single PBM***
 - Randal Johnson: It was stated we would be able to have some data regarding the success of the program
 - LDH: We receive all the reporting that is in the contract.
 - Randal: Are all the reports available? Is the report from Milliman available?
 - LDH: This was not a report, Milliman informed us on a call
 - Dr. Stewart Gordon: Has the contract produced the cost savings? How is the contract performing?
 - Randal Johnson: Are there any reports regarding contract performance? What are the contractual obligations we hope to meet? In October 2023, we were told there would be two million dollars in savings.
 - LDH: This was evened out and the end of the first year. They met the contractual requirements. The savings was based on the admin.
 - Randal Johnson: We are going back to the 3-axis provider report the department provided in January of 2024.
 - LDH: Most recent reports are comparing second quarter of 2023 and second quarter of 2024. We have more gene therapy and specialty drugs. We had multiple million dollar claims over the last few years.
 - M.J. Terrebonne: When I look at the report we got at the last meeting for specialty drugs, it shows a total paid \$704 million dollars. This is for seven months. You must be spending over a billion dollars in specialty. This is only for 141,000 claims.
 - Randal Johnson: Is there a substantial rebate on the specialty drugs
 - LDH: When they hit the market, they will get the minimum federal rebate. We get the CPI-U penalty. That depends on the market and how they raise the price.
 - Randal Johnson: Do you have a comparison regarding the rebate on the specialty class of drugs
 - LDH: We receive quarterly rebate reports from our rebate vendor. Prime's specialty list is not what Magellan considers a specialty list.
 - Randal Johnson: The report indicates the specialty drugs over seven months; we would assume that is about 55 percent, if the specialty drug

for non-local pharmacies is about 700 million dollars. If we look at the SIN report, we had a full year of data before the change to the single PDL.

- LDH: I do not have this with me. You have the SIN report. If they are in the federal rebate program and they are approved through the clinical criteria, they should have access to the drug. CMS was working on a value-based arrangement on the sickle cell gene therapy. CMS was trying to negotiate some of the more super expensive drugs.
- Randal Johnson: If we look at the last SIN report we have for FY24 it showed total expenditures, including the medical side. IF we have 2.6 million in the total expenditure and we are looking at specialty, I think we are running into this budget cycle.
- Dana Antoon: Even with GLP-1s, this had to change the budget
- Dr. Stewart Gordon: Is there any criteria for GLP-1s?
- Randal Johnson: There needs to be uniformity between specialty definitions. About ten years ago, we had a piece of legislation that encouraged board of pharmacy to define specialty drugs. Cost is not included in the cost of specialty drug. We were certainly concerned with some of the definitions used.
- LDH: We have that language in the MCO contract.
- Randal Johnson: Prime has a list of 45 pages of specially drugs. Has there been any analysis of how many of them have NADAC?
- LDH: Most of them do not. Most of the specialty drugs are priced at wholesale acquisition cost.
- Randal Johnson: Three percent for this kind of expenditure is a significant amount.
- LDH: If you would like to submit questions for Meyers & Stauffer, we can do this.
- Randal Johnson: What reports are the department using? Maybe we need to modernize.
- Dana Antoon: We would like to see the total cost for specialty drugs and the total number of prescriptions.
- LDH: We utilize other reports. Tell us what you are looking for and we can see if we have this or if we have to create a new report. You need to write down what you want and send us what you want.
- Dana Antoon: Could we work together so we can create the report we are looking for?
- Dr. Stewart Gordon: I would like to see data and trends.
- LDH: When Senator Mills created this legislation, this was for pharmacist to have a forum so we can work together and solve problems. I think the budget is a big deal but budget is not something a pharmacist can change. The budget is for the finance people to decide. We do not have a

strict brand heavy PDL anymore. I think we are trying to work with the council. We are open to ideas and working together.

- Randal Johnson: We have had some substantial successes. You had the opportunity to significantly reduce the cost of the program.
- LDH: Once we get the timeline established and go to NADAC for Prime, this will include specialty drugs, except the limited distribution drugs.

- **Magellan**

- ***Audits***
- M.J. Terrebonne: At the last meeting, we discussed audits. Stephanie Bancroft shared the information and she would check on what could be shared.
- Stephanie Bancroft: I can send this to Sue, so she can review and distribute.
- M.J. Terrebonne: At the last meeting, you told us you would share more information on how audits are determined.
- Stephanie Bancroft: Audit claims are filled no more than one year prior.
- Randal Johnson: If we ask about something at meeting one, it would be great if we could get them in the interim this would be helpful

- **LDH Reports on LTC Issues**

- M.J. Terrebonne: At the last meeting, Scott Simon shared some concerns. Are there any updates from the department?
- LDH: Boils down to two different issues. Since the MCOs have one PBM, they all have to agree. The MCOs did not agree to adjust the early refill days. This information was emailed to Scott and Randall. I do not think anything is decided on the use of SCC-18.
- Randal Johnson: I would certainly ask the department to go back and look at this.

Pharmacy Notifications-LDH, Magellan

- M.J. Terrebonne: On your iPad, there is a blue folder with pharmacy notifications.
- LDH: Mel and I met with Ruth Kennedy after the last meeting and made some changes to the LDH website. We added the Prime link where you can reach Prime through our website. However, this will be short-term because the department is revamping all websites.

- **Call for Public Testimony**

- N/A

- **Other Business**

- Randal Johnson: Having a website where you could complete drug lookup would be helpful. If you look at the drug lookup, it does have the package size. I do not know where we can report. It costs the pharmacist time. Is Prime looking at package size?
- LDH: Go to lamedicaid.com. We send this information weekly for Prime to load.
- Kim Wixson: In the past, when I email you directly, I find this is the best way to get a problem solved. Is there an email we can put out as opposed to giving everybody your email?
- LDH: Please email PharmacyMedicaid@la.gov
- Leslie Pittman: Please email lasinglepbmpharmacies@primetherapeutics.com
- **Future Meeting Dates**
 - The next meeting will be held on Thursday, March 27; Tuesday, April 22; and Thursday, May 22.
- **Adjournment**
 - The meeting was adjourned at 11:19 a.m. Dr. S. G and Randal