Alaska Medical Assistance DUR Committee Meeting Minutes

Friday, March 18th, 2022

Meeting was held telephonically due to COVID-19. 1:00 PM

Drug Utilization Review Committee Attendees

Members Present	Non-Members Present
Erin Narus, PharmD (DHSS)	Umang Patel, PharmD (Magellan)
Charles Semling, PharmD (DHSS)	Ryan Ruggles, PharmD, MSHI (Magellan)
Charles Ryan, MD	
Barb Piromalli, DO	
Jonathon Harrison, PharmD	
Keri McCutcheon, RPh	Members Absent
Matthew Begay-Bruno, PharmD	Robert Carlson, MD

Call to order at 1 PM.

Charles Semling asked for all members of the public to identify themselves. Sally Dow from Genentech identified themself as present. Charles Semling gave an alternative if a party could not speak to please forward their contact information to be tagged as attendance to hcs.pharmacy@alaska.gov.

Review of minutes from January 2022

Charles Semling asked the committee if they had any changes to the minutes. Adding credentials for all members was noted.

Motion to approve by Barb Piromalli. Seconded by Keri McCutcheon. Minutes approved.

Review of Agenda

Charles Semling went over the agenda for the committee members.

Prospective Drug Utilization Review/Clinical Topic Areas

New Prescription Medications (Interim PA List – 6 month review)

Items recommended for removal from the interim suspend list was presented.

Charles Semling went through the list and the logic for why they could be removed. Nonuse, and physician administered drugs were primary reasons.

Charles Ryan moved to approve the removal of the drugs.

Keri McCutcheon seconded.

No committee opposition.

New Prior Authorizations, Quantity Limits, Edits

Ocrevus criteria was presented. The number of other trials of other agents was discussed prior to the patient receiving this therapy. Cost and utilization were discussed. The number of other Multiple Sclerosis agents were discussed.

Keri McCutcheon moved to approve.

Charles Ryan seconded.

No committee opposition.

Infliximab criteria was presented. Charles Semling asked to change f.ii. to only require contraindication to one conventional therapies. The age of the patient was brought up as the reason. Grandfathering for patients if they are already on therapy to remove these requirements for those patients. Charles Semling will be spelling out the definition of "adult" as 18 years of age or older. Increasing the quantity limit for the approved indications was mentioned. The state agreed to add the change. The committee suggested adding denial criteria to include "patient is using Anakinra or Abetacept" due to it not being recommended.

Keri McCutcheon moved to approve with edits.

Charles Ryan seconded.

No committee opposition.

Hetlioz criteria was presented. This is a re-review of current criteria. It was noted that less than 10 Medicaid members had ever had the diagnosis G47.24 and that under the current criteria there had been no previous denials to date. Alaska Medicaid has not received any clinical criteria submissions form the manufacture. Melatonin trial and blindness was removed from the criteria. The committee asked about the criteria for requiring liquid for <16 years old, and requiring capsules at 16 years of age or older, was noted that the dosing is specifically outlined in the package insert.

Keri McCutcheon moved to approve.

Charles Ryan seconded.

No committee opposition.

FDA Label Changes

FDA Label changes were shared with the committee for items that had criteria and the FDA had made a label revision for. Xywav was mentioned as an option for reviewing in the future due to label changes.

Specialized Medication Counseling/Comprehensive Medication Review and Utilization Management

Charles Semling introduced the topic of Specialized Medication Counseling. This is not yet part of a regulation, but is a primer for future discussion. The committee had positive sentiment toward the idea and was interested in frequency of reviews. The state said that they had not gotten to that level of granularity. The Alaska Medicaid describes these services as above and beyond counseling. If approved, pharmacists would need to be enrolled as a rendering provider and affiliated with a billing provider and claims must be submitted on the professional claim format (837P or CMS 1500) like other healthcare professionals. The timeline for implementation is not yet known. Inpatient billing for pharmacists is not included, as it is already included in the bundled rate.

Post meeting comments

Charles Semling asked about how the committee likes the information and asked about items that the committee would like to see.

End of Public Meeting

Adjournment 2:14 p.m.

Next meeting date April 15th, 2022.