Alaska Medical Assistance DUR Committee Meeting Minutes

Friday, January 19, 2024

Meeting was held telephonically 1:00 PM.

Drug Utilization Review Committee Attendees

Members Present	Non-Members Present
Charles Semling, PharmD (DOH)	Umang Patel, PharmD (Magellan)
Matt Parrott, PharmD (DOH)	Ryan Ruggles, PharmD, MSHI (Magellan)
Charles Ryan, MD	Claudia Phillips, MD
Keri McCutcheon, RPh	
Valarie Bixler, PharmD	
Robert Carlson, MD	Members Absent
	Casey Gokey, MD

Call to order at 1:00 PM.

Matt Parrott took a roll call of the members.

Review of minutes from September 2023

Matt Parrott reviewed the minutes from November 17th, 2023, and there were no comments for change.
Charles Ryan moved to approve the minutes.
Valerie Bixler seconded.
No committee opposition.

The agenda was reviewed with the committee.

Overview of Medicaid Prescription and Cost Trends

Program trend report was shown to the committee. It was noted that year over year there was a 11.5% drop in claims count. This drives a minor drop I total spend. Single source products are driving the average cost per claim increase. Additionally general inflation is also contributing. Per member per month trend has remained constant.

Top 10 categories were described for the committee. The categories largely stay the same, and the makeup of the miscellaneous category was mentioned due to the high-cost items that are lumped into the category.

Top 25 reports were shown to the committee. Ozempic has moved further up the list, along with albuterol. Generally speaking, these lists have not changed substantially. In the net expenditures slide, it was noted that Cosentyx and Monjouro had made large increases from being under the 200 rank to make it into the top 25.

National Trend numbers were illustrated and discussed for the committee. It was noted that the numbers were pulled from fee-for-service programs. This demonstrates that largely we are similar to other states. Cytokine and CAM antagonists have driven increase.

What agents drove an increase in net spend in 2022 was presented. It looks like it is being driven by cytokine and CAM antagonists, however, the hepatitis C agents have decreased cost, and it quickly driving down spend due to patients having received treatment and fewer patients being infected. Agents driving down cost included Mavyret and Vraylar. Lastly, cost breakdown of net cost to the state was demonstrated to the committee over time.

Prospective Drug Utilization Review/Clinical Topic Areas

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

New items proposed for the interim PA list was presented to the committee.
It was noted that some items look like old drugs but are new formulations where existing formulations can be used in the place of these new items.
Keri McCutcheon moved to approve the addition of the drug list.
Charles Ryan seconded.
No committee opposition.

Oral Oncology Agents to remove from the suspend list were presented to the committee.
The state described that these items would be removed from the list, and they could be provided without prior authorization. There was a question regarding how the processing would occur and the state described that this relaxes the requirements for these medications.
Keri McCutcheon moved to approve the removal from the list.
Charles Ryan seconded.

New Prior Authorizations, Quantity Limits, Edits

Qutenza criteria was presented to the committee.
The committee was interested in if there had been misuse. The state did state that they had seen above FDA approved use. Through guidelines and practice this is not recognized as not a first line option.
Robert Calrson moved to approve.
Charles Ryan seconded.
No committee opposition.

Zilbrysq criteria was presented to the committee.
Charles Ryan moved to approve.
Robert Carlson seconded.
No committee opposition.

Zurzuvae criteria was presented to the committee. The committee wanted to know if there had been any use, and it was noted that so far that there has been no use to the state's knowledge.

The committee commented on the target of the treatment is not a new concept.
Keri McCutcheon moved to approve.
Charles Ryan seconded.
No committee opposition.

Updated Nucala criteria was presented to the committee with an added section for Nasal Polyps.
Charles Ryan moved to approve.
Robert Carlson seconded.
No committee opposition.

Updated simplified PCSK-9 inhibitor criteria was presented to the committee.
Charles Ryan moved to approve.
Keri McCutcheon seconded.
No committee opposition.

Updated S1P modulators criteria was presented to the committee. The alteration only pertains to the addition of etrasimod.
Charles Ryan moved to approve.
Keri McCutcheon seconded.
No committee opposition.

Opioid tables were reviewed with the committee. There are not a lot of changes from previous meetings. The state expressed that the review of these tables is part of Alaska's strategy to make a positive difference in opioid use where appropriate. It was noted that there were changes across the entire report due to CMS updates, and one of the biggest drivers is a difference in the calculation of methadone morphine milligram equivalent. One note that Matt Parrott wanted to make was that overall trends look good, but shortages of opioids still exist, so it does look like there may be patients visiting multiple pharmacies, but this is a supply chain issue not an attempted diversion issue. The breakdown of short acting or long-acting utilization demonstrated that short acting agents were more preferred in our patient population. The chart with patients with the highest morphine milligram equivalent was reviewed with the committee. It was pointed out that the highest levels that had previously had 700 and more were driven down at least in part by the calculation change in the methadone dose. The general result in the opioid categories is a positive trend over time.

Stimulant ICD10 diagnosis codes have continued to be very near 100% so we have omitted this slide.

FDA Label Changes/FAERS Reports

FDA warns of rare but serious drug reaction to the antiseizure medicines levetiracetam and clobazam report was reviewed with committee.

FAERS Reports were reviewed with the committee. It was noted that the FDA communication was also listed on the FAERS report. It was noted that the GLP-1 class is being reviewed for risk of aspiration.

Miscellaneous Items

Medication assisted therapy GEO dashboard was shared with the committee. The pharmacy tab and the prescriber tab were both shared with the committee. There were no questions.

Matt Parrott then presented changes for the clinical criteria for medication assisted therapy that the state would like to implement. The recommendation is to retire the current clinical criteria. The 24 mg limit would still remain in place. The committee was in favor of removing the clinical criteria.
Charles Ryan moved to accept updating the guidelines as proposed.
Keri McCutcheon seconded.

Psychotropic monitoring was reviewed with the committee. This review is part of the CMS core measures. The reason behind the review was described to the committee and it was mentioned that it can provide secondary review. The review's purpose is not used to say that the patients are being treated inappropriately and they are not used to halt patient care. It was pointed out that these patient groups have looked similar, and the patient population of OCS patients are very small comparatively.

End of Public Meeting

Adjournment 2:58 p.m.

Next meeting date April 19th, 2024.