Alaska Medical Assistance DUR Committee Meeting Minutes

Friday, April 21st, 2023

Meeting was held telephonically due to COVID-19. 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	
Keri McCutcheon, RPh	
Robert Carlson, MD	
Valarie Bixler, PharmD	Members Absent
Casey Gokey, MD	

Call to order at 1:00 PM.

Matt Parrott asked for all members of the public to identify themselves.

Review of minutes from January 2023

Matt Parrott reviewed the minutes from January 2023, and there were no comments for change.

Review of Agenda

Matt Parrott reviewed the agenda for the committee members.

Overview of Medicaid Prescription and Cost Trends

Matt Parrott presented cost trends for year over year cost spend. Cost increased but most other items remained static.

Top 25 reports were shown to the committee. Ozempic is noted that there has been an increase in number of claims. Net Net expenditures are listed and noted that hemophilia treatments account for many of the top net net medications.

Prospective Drug Utilization Review/Clinical Topic Areas

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

The list of new items proposed for the interim PA list was presented to the committee, along with 3 quantity limits for mupirocin, lidocaine/prilocaine cream, and lidocaine ointment.
The committee did not have any issues with the proposed list and quantity limits.

New Prior Authorizations, Quantity Limits, Edits

Briumvi criteria was presented to the committee.
Charles Ryan moved to approve.
Keri McCutcheon seconded.
No committee opposition.

Hemgenix criteria was presented to the committee. Cost and 1 treatment per lifetime were highlighted for the committee. It was highlighted that we want to ensure that the right patients are receiving the medication. Quality of life benefit and long-term cost benefits were also discussed. The committee asked about patients shopping for states that cover the medication, and the state noted that every state will be required to cover the medication.
Keri McCutcheon moved to approve.
Charles Ryan seconded.
No committee opposition.

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

Ztalmy criteria was presented to the committee.
Keri McCutcheon moved to approve.
Charles Ryan seconded.
No committee opposition.

Existing buprenorphine criteria was presented to the committee. The state recommends streamlining approval if the dose is less than or equal to 16 mg per day. Criteria will be active for 17 to 24 mg with a maximum of 24 mg. The purpose is to make the medication available to the patients that need it. The care management program was discussed for the committee.
Casey Gokey moved to approve the proposed alterations.
Charles Ryan seconded.
No committee opposition.

Opioid tables were reviewed with the committee. There were not a lot of changes in the opioid tables. The downward trends are consistent with past reports. Naloxone use was highlighted, and the suggestion was made to the committee to prompt the pharmacist to evaluate the need for naloxone for the patient if the patient had

a total milligram morphine equivalent of greater than 90 mg. The committee did not have any opposition towards implementing such an edit.
The table looking at initial days of supply was highlighted for patients receiving more than 7 days of medications on an initial fill. The state introduced the idea of implementing an edit to not allow opioid naïve patients to receive more than 7 days of medication on their initial prescription. The committee did not have any questions regarding this edit.

FDA Label Changes/FAERS Reports

New Safety communication regarding opioid pain medicines to provide additional guidance for safe use was presented to the committee. The goal for the label change is to reduce excessive or unnecessary prescribing.

Current FAERS reports were shown and highlighted for the committee.

Miscellaneous DUR Items

Psychotropic Use in Children

Psychotropic use in children was displayed for the committee to see. OCS Patients make up a small percentage of the psychotropic use. When OCS patients are identified in this group, they are forwarded on for further review.

Diabetic Patients with Chronic Kidney Disease

There was a change in the recommendation for patients that have diabetes to not require ACE-I or ARB medication regardless of hypertensive status. However, ACE-I and ARB medication use is recommended in diabetic patients with Chronic Kidney disease. The proportion of those patients were shown in different breakdowns for the committee's review. SGLT2 medications were highlighted with other hypertensives were discussed with the committee and breakdown of pharmacy demographics were shown to the committee.

Opioid Naïve Patients First Rx Days of Supply

Greater than 7 days versus 7 days or less for new opioid prescriptions and modeling was demonstrated to the committee. Overall, it is demonstrated that there are few initial prescriptions that are greater than 7 days of supply. The categories were then highlighted by pharmacy type, and by drug.

Makena Withdrawal by FDA

Makena withdrawal by the FDA has been announced and will have very little impact on our members.

End of Public Meeting

Adjournment 1:55 p.m.

Next meeting date September 15th, 2023.