Alaska Medical Assistance DUR Committee Meeting Minutes

Friday, November 18th, 2022

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

Drug Utilization Review Committee Attendees

Members Present	Non-Members Present
Charles Semling, PharmD (DHSS)	Ryan Ruggles, PharmD, MSHI (Magellan)
Charles Ryan, MD	Matt Parrott, PharmD
Keri McCutcheon, RPh	
Matthew Begay-Bruno, PharmD	
Robert Carlson, MD	
	Members Absent

Call to order at 1:08 PM.

Review of minutes from September 2022

The committee reviewed the meeting minutes from the previous meeting. Charles Ryan Moved to approve. No opposition.

Review of Agenda

Charles Semling went over the agenda for the committee members.

Overview of Medicaid Prescription and Cost Trends

Trend snapshot was shown to the committee. Year over year was up significantly per paid claim. Trend chart demonstrates 60 and 90 day fills causing increases and decreases.

Top 25 reports were shown to the committee both by volume and spend. Ozempic was discussed and the potential for some of those claims to be used for weight loss. Charles Semling asked the committee to share their thoughts on covering some of the newer weight loss agents. The committee commented on the efficacy of the newer agents being better, and suggested looking at respected outside organizations that demonstrate which agents are utilized in those expert organizations. Backorders my impact what information we have access to due to patient access issues. Major shift in ranking for both Hemlibra and Advate.

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.

Charles Ryan moved to approve the drug list.

No committee opposition.

January's meeting will include a list of drugs for removal from the suspend list.

New Prior Authorizations, Quantity Limits, Edits

Leqvio criteria was presented to the committee. It was stated that the criteria looked reasonable. It was suggested to alter denial criteria to word it more clearly, and Charles Semling agreed.

Robert Carlson moved to approve.

Charles Ryan seconded.

No committee opposition.

Tepezza criteria was presented to the committee.

Charles Ryan moved to approve.

Matthew Begay-Bruno seconded.

No committee opposition.

Empaveli criteria was presented to the committee.

Charles Ryan moved to approve.

No committee opposition.

Spravato criteria was presented to the committee. It was noted that the criteria seemed appropriate, but also it was commented that there are some standalone providers offering ketamine for patients with far less stringent criteria.

Keri McCutcheon moved to approve.

No committee opposition.

Voxzogo criteria was presented to the committee.

Keri McCutcheon moved to approve.

No committee opposition.

Growth Hormone criteria was reviewed. Skytrofa is a new product and has been added to tables.

Matthew Begay-Bruno moved to approve.

No committee opposition.

Firdapse and Ruzurgi criteria update was presented to the committee.

Charles Ryan moved to approve.

No committee opposition.

Celebrex criteria was presented to the committee for the purposes of recommending retiring. Keri McCutcheon moved to approve.

No committee opposition.

Opioid Reports

Opioid tables and trends were reviewed with the committee. Looking at Table 2 it was noted that most categories were still reducing. University of Washington pain contract is being re-procured to provide consultation with specialist for healthcare providers in the state for patients that are using opioids. An anonymous chart review will also occur for patients with these specialists. The committee inquired about which patients have cancer and what percent of each category. Magellan will take that question back and research ways to gather that information for future meetings. The top prescriber list was shared with the committee. Top pharmacies were discussed, and it was noted that chains typically have higher MME values.

Opioid MME per days of supply over time since 2016 was shown to the committee. It was commented on how MME has decreased over time and when the CDC had advised to put in edits. It was discussed bringing back even years prior to the CDC recommendations and what edits may have been in effect in those years. Differences included no MME check and just therapeutic duplication checks.

Opioid ICD10 and Stimulant ICD10 graphs were displayed. It was commented that the trend is still positive for the opioid ICD10, sitting around 70%

FDA Label Changes/FAERS Reports

FDA alerts patients, caregivers, and health care providers of cross-compatibility issue with autoinjector devices that re optional for use with glatiramer acetate injection.

FAERS reports were shown. GLP-1 intestinal obstructions were noted specifically as an item of interest. Zolgensma was called out specifically due to it being associated with fatality.

Miscellaneous Drug Utilization Review Items

Antipsychotic use for children in custody of the office of Children's Services compared to use in patients not in custody. Patients were matched to the OCS patients. Antipsychotic use was higher for patients in OCS custody. Member age was also an influencer for patients receiving antipsychotics. The state does have contracted reviewers with Seattle Children's for psychotropic drugs to review individual cases. While realizing that this population may require the medications, the state is promoting appropriate use in children through these behind-the-scenes programs.

End of Public Meeting

Adjournment 2:37 p.m.

Next meeting date January 20th, 2023.