Alaska Medical Assistance DUR Committee Meeting Minutes

Friday, September 15th, 2023

Meeting was held via Zoom.

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	
Valarie Bixler, PharmD	Members Absent
Casey Gokey, MD	Robert Carlson, MD

Call to order at 1:00 PM.

Matt Parrott took a roll call.

Review of minutes from April 2023

Matt Parrott reviewed the minutes from April 2023, and there were no comments for change.
Charles Ryan moved to accept the minutes.
Keri McCutcheon seconded.

Review of Agenda

Matt Parrott went over the agenda for the committee members.

The committee was asked for any questions or comments. There were none.

Overview of Medicaid Prescription and Cost Trends

Total Spend for year over year was compared and it was noted that total spend is less than the previous year. Total claims count was also down about 10 percent. Single source products were driving the increased cost. The spend for per utilizer per month over the previous year remained steady. The end of the public health emergency may have started to flatten this line.

Top 10 categories were shown by claims count and cost. It was mentioned that the miscellaneous was not very helpful and that was broken down for the committee.

Top 25 products by total claims report was shown to the committee. It was noted that the list is stable. Then this was broken down by pharmacy reimbursement. Consistency of the top products was noted.

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.
Keri McCutcheon moved to approve the addition of the drug list.
Casey Gokey seconded.
No committee opposition.

New Prior Authorizations, Quantity Limits, Edits

Roctavian criteria was presented to the committee. The committee asked about the cost effectiveness of this medication, and Matt Parrott referenced an ICER report, and it seems that so far with data the durability looks promising, but the data is not quite there yet to show cost effectiveness. The committee also asked about Alaska had patients that would be eligible, and it was stated that Alaska does have eligible patients. It was also commented that many patients and providers in this population are hesitant to try new therapies. Matt Parrott pointed out that the state really did not have a choice and ultimately had to pay for the product since it meets the definition of a covered outpatient drug.
Keri McCutcheon moved to approve.
Casey Gokey seconded.
No committee opposition.

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

Tezspire criteria was presented to the committee. The committee inquired about how we would determine previous non-adherence. It was noted that an inquire with the prescriber and claims history would be used to determine adherence patterns for the patient. Also, patients already on this product would be grandfathered in and will not have to meet this criteria.
Keri McCutcheon moved to approve.
Charles Ryan seconded.
No committee opposition.

Zolgensma criteria was presented to the committee. Matt Parrott also noted that ICER had looked at the cost effectiveness of this product, and noted that it is difficult to study, but the information looks good at this point in time.
Keri McCutcheon moved to approve.
Charles Ryan seconded.
No committee opposition.

A review and update of the Vesicular Monoamine Transporter 2 Inhibitors criteria was presented to the committee. Austedo XR was added to the criteria, and it's quantity limit was adjusted due to the dosing schedule. Ingrezza also had an added diagnosis due to a new FDA approval.
Charles Ryan moved to approve.
Casey Gokey seconded.
No committee opposition.

Opioid tables were reviewed with the committee. The positive direction over the year was highlighted for the committee. It was noted that due to opioid shortages, the report may look as though the number of pharmacies per member rises. While this may be true, it will not be due to problematic behavior it will be that members have to go to multiple pharmacies to fill legitimate prescriptions. Top 20 Prescribed Opioid Medications was shared, and it was noted that the list does not really shift over time. The Top 20 Members with highest Average Daily MME was shown with PHI removed. It was noted how much it has changed over the years. New Starts Days of Supply breakdown was shown, and it was noted that in the next meeting or two last meetings actions will be more visible.

Opioid ICD10 compliance reports were shown to the committee. It is noted that ICD10 compliance has continued to rise and is now nearing 80 percent.

FDA Label Changes/FAERS Reports

FDA Drug Safety Communication: FDA updating warnings to improve safe use of prescription stimulants used to treat ADHD and other conditions. There was not a new concern. This was a response to concerns over serious risks with misuse, abuse, addiction, and sharing these drugs, and it was utilized to bring this back to the attention of providers and a way to bring this back to standardize the blackbox warning.

FAERS report was noted that hypoglycemia was noted for a complication with opioids. Hearing impairment evaluation was noted with Tepezza.

Miscellaneous DUR Items

Insulin Pen Guidance

Previously approved days of supply guidance that the committee has approved for insulin pens has been problematic to implement. The new guidance tells pharmacies that they should bill for the proper days of supply, get a rejection, then run for the maximum allowed days of supply. The committee wanted to ensure pharmacies would be notified of the guidance.
Keri McCutcheon Moved to approve.
Casey Gokey seconded.

RSV Prevention Discussion

A review of the RSV bulletin published on September 11, 2023, was reviewed for the committee. The discussion centered around options for patients moving forward.

It was noted that nirsevimab will not be covered due to it being available through the Vaccines for Children Program and palivizumab will be covered in the event the patient cannot use nirsevimab or it is not available. Charles Semling noted that the nirsevimab is a one dose and more convenient for the patient.

Psychotropic Use in Children

CMS core measures for children with psychotropics and antipsychotics was reviewed with the committee. COVID flexibilities ending are driving a reduction in patient cases. It was noted that many cases were one off situations, and only the most common elements were shown.

It was shown that the OCS patients make up a small amount of patients in this patient pool. It was also mentioned that the end of the public health emergency has brought these cases to the attention of the state more frequently and has decreased the number of these cases.

End of Public Meeting

Adjournment 2:03 p.m.

Next meeting date November 17th, 2023.