DUR Committee

April 19th 2013 Minutes

Members Present:
Dharna Begich, Pharm.D.
Jenny Love, MD
Chuck Semling, PharmD
John Pappenheim, MD
Rader, Maggi, CNM
Greg Salard, MD (*TELEPHONIC*)
C.J. Kim, R.Ph (DHSS)
Chad Hope, Pharm.D. (DHSS)
Erin Narus, Pharm.D. (Magellan)

Members Absent:

Public attendees:
Ward Hulbert (DHSS)

- Meeting started at 1:05pm and attendance was taken.
- Review of minutes from March 15, 2013 meeting. (Approved)
- Comments from C.Kim regarding previously approved edits and quantity limits. Notifications are generally sent out 30 days or more prior to deployment through various means such as: Attached to providers Remittance Advice, Posted to Alaska Medicaid Website under 'Notices', and email notifications using GovDelivery. C.Kim will follow up with members by email regarding websites and signing up with GovDelivery.
- Review agenda for additions, no changes or additions

ProDUR

- Proposed Quantity Limits for Ryzolt Extended-Release
  - C.Kim presented background information and claims history of Ryzolt. Discussed the potential side effects of tramadol such as increase risk of seizure and serotonin syndrome. Referenced a DEA informative posting regarding tramadol that twelve states have made tramadol a schedule IV drug under state law. Ryzolt has been discontinued by the manufacturer as of June 1, 2012 but a generic version still exists. The proposed quantity limits are in-line with other current extended-release tramadol formulations.
    - UNANIMOUSLY APPROVED, Each strength 1 per day
- Proposed Prior Authorization Rybix ODT 50mg
  - C.Kim presented background information and claims history of Rybix ODT. Significant cost savings for the State to require recipient's to have a trial of regular immediate release tramadol or would require medical rationale for non trial on prior authorization form. The general consensus of the committee regarding the size of tramadol tablet was it was reasonably small in size.
  - From the manufacture insert regarding onset of action: "RYBIX ODT is an orally disintegrating tablet, but there are no studies that indicate that its onset of action is faster than tramadol tablets."
    - UNANIMOUSLY APPROVED
- Proposed Bisphosphonate – Step Edit
  - C.Kim presented background information and utilization history of Fosamax, Fosamax + D, Actonel, Boniva, Atelvia (released 2010), and Binosto (released 2012).
  - Committee discussed possible edit on duration or maximum time limit for recipient treatment. A meaningful type of edit would require additional information for the committee to evaluate and review.
  - For other diagnoses, criteria for approval would require physician to submit a prior authorization
    - UNANIMOUSLY APPROVED

- Proposed Prior Authorization Noxafil Suspension
  - C.Kim presented background information and claims history of Noxafil. Edit would apply at the point-of-sale, not as an in-patient medication.
  - Noted different indications of Noxafil and Diflucan
  - Special instructions to be given for the Call Center for Hospital Discharge/Continuation of therapy.
  - Amend proposal: Remove age criteria
    - UNANIMOUSLY APPROVED with amendments
- Proposed Quantity Limits for Urinary Tract Antispasmodics
  - C.Kim presented claims history, mechanism of actions (MOA), and new product in this class.
  - Potential side effects were discussed based on their MOA
    - UNANIMOUSLY APPROVED
- Proposed Quantity Limits for Insulin products (vials, pens, syringes, cartridges)
  - C.Kim presented claims history of various insulin products (rapid-acting, regular, intermediate-acting, long-acting, and mixtures).
  - Claims history is revealing that some recipients are only filling their insulin products once or twice ever for large quantities. Some claims filled with 30mL or greater are not being refilled at 30 day intervals – possible stockpiling or incorrectly dosage administration.
  - Proposed QL allows up to 100 units of insulin to be used on a daily basis. When a rejected claim exceeds the proposed QL, basically the pharmacist or physician would have to submit a prior authorization for prescription and directions that calculate correctly for use greater than 30mL of insulin per 30 days.
    - UNANIMOUSLY APPROVED
- Proposed Long-Acting Opioids – Step Edit
  - C.Hope/C.Kim presented background information of Long-Acting Opioids and current prior authorizations in place.
  - Committee concerned regarding allergies to morphine and/or adhesive to patches. Physician would have to submit prior authorization regarding non-trial and/or allergy profile with reaction to product.
  - Step-Edit will eliminate two prior authorizations (extended-release morphine sulfate tablets and fentanyl patches) while consolidating other Long-Acting Opioids (Hydromorphone ER, Morphine ER capsules, Methadone, Nucynta ER, Oxymorphone ER, and Oxycodone ER) into one process/step edit.
  - Special instructions will be made available to the call center for 'Grandfathering' recipients
    - UNANIMOUSLY APPROVED
- New Prescription Medications (Interim PA List) – 6 Month Review
  - C.Kim presented information and claim details for the medications on list
    - Remove from Interim PA List:
      - Zyclara 2.5% pump
      - Stribild
      - Zaltrap
      - Lucentis
    - UNANIMOUSLY APPROVED
    - Leave on Interim PA List:
      - Binosto (Step-Edit Criteria)
      - Forfivo
      - Kapvay Dose Pack
      - Myrbetriq

- UNANIMOUSLY APPROVED

Retrospective DUR

- Discuss review criteria
  - Retrospective DUR (FDA recommends reduced dose of zolpidem) – New recommendation 1/2013
  - The profiles were discussed and evaluated for intervention letters to be sent out to the providers.
    - Interventions discussed on profiles varied from polypharmacy, polyprovider, therapeutic duplication, over-utilization, high-dose, drug-drug interactions, candidates for possible "lock-ins", and unnecessary care/duration.
    - As part of the process, the information is evaluated from different perspectives; viewing as a prescriber or the other end as a pharmacist who dispenses the prescription.
- Comments/Suggestions:
  - Presented information (claims history) on previous implemented edits:
    - History Edit of Inhalers (Feb 2013)
    - Atypical antipsychotics for Children less than 5 years old (June 2012)
  - Message on intervention cover letter will remove the PDMP reminder and replace with "Keep yourself updated by visiting or subscribing to the FDA Safety Alerts"
  - New business about future PA's and some general information of how the system functions and how the prior authorizations are processed and entered in to the system
  - This a recent FDA safety alert, the committee recommended that to broaden the alert message would be to add it to the next GovDelivery.
  - C.Kim suggested to committee members to submit informational websites they use in their practice. Will add websites on intervention letters to pass on educational information to providers about new drugs, therapies, or in general to pass on useful information
- Next meeting is tentatively scheduled for September 20, 2013 and location same as before.
- Meeting adjourned 3:32pm.