Alaska Medical Assistance DUR Committee Meeting Minutes

Friday, November 20, 2020

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

Drug Utilization Review Committee Attendees

Members Present	Non Members Present
Erin Narus, PharmD (DHSS)	Umang Patel, PharmD (Magellan)
Charles Semling, PharmD (DHSS)	Ryan Ruggles, PharmD, MSHI (Magellan)
Jenna Hiestand, MD	
Charles Ryan, MD	
Robert Carlson, MD	
Barb Piromalli, DO	Members Absent
Keri McCutcheon, RPh	Dr. Heath McAnally, MD
Jonathon Harrison, PharmD	

Review of Agenda

Dr. Semling went over the Agenda to the committee members.

Review of minutes from September 2020

- Dr. Semling mentioned some date fixes made after distribution to the committee but before this presentation.
- Minutes approved. A motion was made to approved the minutes by Jenna Hiestand. Second by Barb Piromalli.

Overview of Medicaid Prescription and Cost Trends

Charles Semling reviewed Prescription and Cost Trends. Total Amt Paid increased by about 1 million claims. PMPM increased 10% since last year at this time. Likely due to 68 day fills, including Hepatitis C treatments.

Dr. Semling commented that the PMPM/PUPM trend line is flat with it trending down in July. This was due to the increase in refill tolerance. The PMPM/PUPM also seems to have a 2 month cycle likely due to the emergency COVID regulation. Expecting to have this continue for the duration of the emergency regulation.

Dr. Semling went over the top 10 therapeutic classes by volume and cost. There was almost no change from previous meeting.

The "Miscellaneous" Category was broken down as recommended from the committee in the September meeting. It was noted that it includes Cystic Fibrosis and Opiate Partial Agonists, and a total of 45 classes. It was offered to remove the Miscellaneous class, but the committee members did not seem to have strong feelings either way. Dr. Ryan asked about drug classifications and how they work. Dr. Patel assisted in answering this question. They are assigned at initial indication, and they are only counted in one class. Dr. Patel then went through the classes in detail. There was also discussion about which organization sets each classification for the drugs. It was confirmed that FDB is the entity that sets those criteria. Dr. Narus asked if we could categorize using PDL class. It was confirmed that we could explore that.

Dr. Semling mentioned breaking out the claims for Opiate Partial Antagonists to have an idea of where they sit in representation of the top drug classes.

Looking at cost, Dr. Semling mentioned that Humira actually takes 3 of the top 10 spots. He commented on Hepatitis C treatment spend is no longer top spend, and that the treatments have been successful. Medication Assisted Addiction Treatment also takes several of the top 25 spots.

Suspend List was explained and reviewed by the committee. Dr. Semling pointed out that most of the drugs are on the list were oncology, and "me too" drugs. Motion to approve was made by Dr. Piromalli. Seconded by Dr. Ryan. The list was approved without contest.

Prospective Drug Utilization Review/Clinical Topic Areas

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

Suspend List was explained and reviewed by the committee. Dr. Semling pointed out that most of the drugs are on the list were oncology, and "me too" drugs. Motion to approve was made by Dr. Piromalli. Seconded by Dr. Ryan. The list was approved without contest.

New Prior Authorizations, Quantity Limits, Edits

Dr. Semling reviewed new medication criteria for the following prior authorizations:

Reyvow: Committee had discussion about the quantity limit for the 100 mg tablets. Dr. Ryan pointed out the difference in cost of two 50 mg tablets. The committee decided to change the quantity limit for the 100mg

tablets to 8 per 30 days. Dr. Piromalli moved to approve with the changes. Keri McCutcheon, RPh seconded. There was no contest to the motion.

Palforzia: Dr. Ryan asked if the medication would need to be maintained indefinitely. Dr. Semling confirmed that this was his understanding of the drug. Dr. Carlson pointed out that the point of the medication was to protect against small amounts of unintended exposure, not to allow the user to purposefully eat peanuts. Dr. Ryan asked about repeating of the approval criteria for the IgE test. Dr. Semling said that there was no reason that they would need to do that. Dr. Semling confirmed that the drug would need to be started between 4 and 17 years of age per the package insert. The patient would be allowed to continue after they turn 18. Dr. Carlson moved to approve the criteria. Keri McCutcheon, RPh second. No opposition to approve the criteria from the committee.

Dr. Ryan asked a general question about prior authorizations. Are they absolute, or can a prescriber give a compelling case to approve outside of the criteria? Dr. Semling confirmed that a provider can appeal and make a case for use outside of approved criteria.

Apokyn Kynmobi: Dr. Hiestand inquired about the contraindication for 5-HT3 antagonists. Dr. Carlson informed the committee of previous uses of apomorphine to induce emesis. Dr. Semling informed the committee that hypotension and loss of consciousness has been reported with the combination. Dr. Ryan Moved to approve as written, seconded by Dr. Hiestand. There was no contest from the committee.

Dojolvi: Dr. Hiestand asked for clarification on Enzyme activity assay. Dr. Ryan moved to approve with the change to specify the assay. Dr. Hiestand second. No committee member expressed being opposed to the approval.

Xyrem, Xywav: There was little discussion as this was approved in the recent past, and was simply adding criteria around Xywav. Dr. Ryan moved to approve. Dr. Hiestand second.

Interleukin-5 Inhibitors, Nucala, Cinqair, Fasenra: Dr. Semling presented the one addition to the criteria. Dr. Ryan moved to approve. Dr. Piromalli second.

Reviewed New Prescription med PA: Dr. Semling went over an added point to reuse criteria for new drugs. Dr. Ryan questioned the use of "same pharmacologic mechanism". Dr. Semling assured the committee that it really would be used only for very similar drugs (SSRI Example), and illustrated time savings. Dr. Carlson expressed that leaving it a little vague is beneficial. Dr. Semling again reassured the benefit of this edit, and that the committee would still be notified, but the call center would be able to use the criteria in the mean time. Dr. Carlson pointed out that if it is an efficient and practical solution than it should be approved. Dr. Ryan agreed and made a motion to approve. Keri McCutcheon second.

Opioid Report

Dr. Semling reviewed the quarterly opioid trend report. Overall, the opioid trend continues to decrease. At the beginning of the next year in 2021, the MME edit will be decreased by 50 MME for the Max daily amount of 200 MME will occur in January.

Dr. Semling discussed some of the trends and good looking trends. As well as mentioned the new initiative to lock in patients to reduce prescriber and/or pharmacy count. Dr. Semling did point out that Walgreens is highlighted as multiple of the top 20 pharmacies. He highlighted practices from other pharmacies and

contrasted that to other pharmacies. Dr. Ryan asked if it was a simply a "Walgreens has more stores" issue. Dr. Semling pointed out that then he would expect Safeway/Carrs to be in the list as well. Dr. Narus pointed out that Safeway/Carrs has the largest number of pharmacies in the state.

Dr. Semling asked about what the look back was to be considered "new start". Dr. Ruggles was not able to determine the number of days in the meeting. (Post meeting it was determined that it is a lookback of 180 days. Dr. Hiestand asked if it could be possible that they are not new starts, but just initiating with Medicaid. It was confirmed that they could have been on therapy previously, but Medicaid would not have a way of knowing that.

Dr. Semling discussed ICD-10 compliance for opiates and Stimulants.

Safety Reports

Dr. Semling discussed some drug safety communications made by the Food and Drug Administration (FDA) for BZD boxed warnings.

Invokana and combos have removed amputation warning when properly monitored, and has new indications.

Benadryl is being miss used by teens and can lead to heart problems seizures, coma, and death. This has stemmed from social media platform Tik Tok. Dr. Hiestand confirmed that this is not truly a new issue and that many patients have done this in the past.

CDER has proposed withdrawal of approval for Makena has not continued to show positive results. It has not shown benefit. Dr. Ryan asked about current approval status for Makena. Dr. Semling stated that if they had already been approved patients can continue using it, but most new starts are being denied. The logic for this is that it is unknown what could happen if you withhold the drug after having used it. Dr. Ryan agreed that this was likely a good strategy.

FAERS Reports

FAERS Report: CGRP causing Steven Johnson's syndrome was highlighted. Plaquenil, and PPI Hypocalcemia was highlighted, along with Sublocade causing injection site necrosis.

Insulin Pens Edit

Dr. Semling presented the FDA update that insulin pens should only be dispensed in sealed cartons. This is to help reduce incorrect insulin pen use, providing instructions etc. Dr. Ruggles stated that he had this conversation with a care giver while he was practicing. Keri McCutcheon, RPh then asked if we were going to change policy to fit these recommendation. Dr. Semling stated that she "read his thoughts".

Dr. Semling presented the criteria. Then he explained that there will be more oversight on patient adherence rates, as well as some patients that are receiving a large quantities on auto refill. Dr. Hiestand voiced her concern about overdoses. Keri McCutcheon, RPh rebutted that the overdose issue is minimized based on vials versus pens. Dr. Carlson moved to approve, Dr. Ryan second.

Post meeting comments

Dr. Harrison gave his input on process and was happy to give back to the community. Dr. Semling commented that it is a good way to stay up to date, learn, and an education setting. Dr. Carlson commented on the pre-meeting materials and the benefit of using zoom on his experience on the committee. Dr. Semling Valued Dr.

Hiestand and wished her luck in the future because this was her last meeting. Dr. Ruggles notified the committee that the presentation will likely change in the next one or two meetings. Dr. Narus pointed out some COVID 19 treatments that will likely need Prior Authorization criteria. Dr. Semling noted that he would prefer to use a medical diagnosis for auto prior authorization. Dr. Ryan moved to have the state make criteria, and approve until it can be formally ratified. Keri McCutcheon asked about a site specific issue. Dr. Narus told her that she would look into it. There was brief discussion surrounding the COVID vaccine.

Dr. Ryan Moves to adjourn. The entire attendance seconded.

End of Public Meeting

Adjournment 3:30 p.m.

Next meeting date January 15th, 2021.

Documents Reviewed