

## **Drug Utilization Review (DUR) Meeting Minutes**

### **September 7, 2016**

**Members Present:** Wendy Brown, Peter Woodrow, Andrea Honeyman, , James Carlson, Gaylord Kavlie, Michael Quast, Laura Schield, Zach Marty, Russ Sobotta, Leneika Roehrich

**Members Absent:** Tanya Schmidt, Jeffrey Hostetter, Carlotta McCleary, Michael Booth, Katie Kram

**Medicaid Pharmacy Department:** Brendan Joyce, Alexi Murphy, Gary Betting

W. Brown called the meeting to order at 1:00 p.m. Chair W. Brown asked for a motion to approve the minutes of the June meeting. Z. Marty moved that the minutes be approved, and P. Woodrow seconded the motion. Chair W. Brown called for a voice vote to approve the minutes. The motion passed with no audible dissent.

#### **Budget update**

B. Joyce gave an overview of the rebates received in 2016. Many changes have been made to maximize cost savings to the state. One way that this has been accomplished is by adding specific messaging to the claims system directing the pharmacies to the most cost-effective NDCs.

#### **Second reviews**

A motion and second was made at the June meeting to place kits, DPP-4 inhibitors, immunoglobulins, bowel preparation agents, topical agents for plaque psoriasis, platelet aggregation inhibitors and antihyperuricemics on prior authorization. The topics were brought up for a second review. There was no public comment. The motion to place kits, DPP-4 inhibitors, immunoglobulins, bowel preparation agents, topical agents for plaque psoriasis, platelet aggregation inhibitors and antihyperuricemics on prior authorization passed with no audible dissent.

#### **Prior authorization updates**

B. Joyce gave an update on products that have been removed from prior authorization as well as new products that have been added to prior authorization. This information will be sent to prescribers/providers in the next newsletter.

#### **Cosmetic agents update**

Currently, ND Medicaid is covering rosacea for patients 18 and under. Acne is covered for patients 12 – 35 years of age. There were no comments or changes suggested. A. Murphy asked for guidance regarding Humira's indication for hidradenitis suppurativa. The board recommended continuing coverage of Humira for this indication.

#### **Sanford Update**

Danny Weiss, representing Sanford Health Plan, spoke regarding ND Medicaid Expansion. In 2015, there were 18,536 average members per month with 98.8% of members utilizing benefits. The generic fill rate was 85.7%. The top 25 drugs represent 50% of total plan cost and 7 of the top 25 drugs are specialty drugs. Of the prior authorizations reviewed from July 1, 2015 – June 30, 2016, almost 70% were approved.

#### **Namenda ER review**

B. Joyce reviewed Namenda XR with the Board. There was no public comment. L. Schield made a motion to place Namenda XR on prior authorization. The motion was seconded by L. Roehrich. This topic will be reviewed at the next meeting.

**Dihydroergotamine DHE review**

B. Joyce reviewed dihydroergotamine with the Board. A motion was made by M. Quast to place dihydroergotamine on prior authorization. The motion was seconded by A. Honeyman. There was no public comment. This topic will be reviewed at the next meeting.

**Tetracycline review**

B. Joyce reviewed tetracyclines with the Board. A motion was made by L. Schield to place tetracyclines on prior authorization. The motion was seconded by Z. Marty. There was no public comment. This topic will be reviewed at the next meeting.

**Spiriva Respimat review**

B. Joyce reviewed Spiriva Respimat with the Board. A motion was made by L. Schield to place Spiriva Respimat on prior authorization. P. Woodrow seconded the motion. Aaron Feyos, representing Boehringer Ingelheim, spoke regarding Spiriva. This topic will be reviewed at the next meeting.

**Ophthalmic anti-inflammatory agents review**

B. Joyce reviewed ophthalmic anti-inflammatory agents with the Board. A motion was made by Z. Marty to place ophthalmic anti-inflammatory agents on prior authorization. L. Roehrich seconded the motion. This topic will be reviewed at the next meeting.

**Erythropoiesis-stimulating agents review**

B. Joyce reviewed erythropoiesis-stimulating agents with the Board. There was no public comment. M. Quast made a motion to place erythropoiesis-stimulating agents on prior authorization. A. Honeyman seconded the motion. This topic will be reviewed at the next meeting.

**First fill narcotics review**

B. Joyce reviewed opioid utilization. The graphs demonstrated that the quantity/day has consistently decreased since implementation of the opioid edits voted on by the DUR Board. Also, methadone utilization has decreased from 18 patients in 2015 to only 1 person, currently. Based on CDC guidelines, the state would like to implement a first fill edit to ensure that the lowest effective dose of immediate-release opioids is prescribed as well as a quantity no greater than needed for the expected duration of pain. The DUR Board recommended a first fill edit of 14 days.

B. Joyce also reviewed PQA measures that will be coming soon. Some examples include: morphine equivalent dosing, use of benzodiazepines and opioids concurrently, opioids obtained from multiple prescribers/pharmacies, and use of high dose opioids in patients with cancer.

**Zika virus update**

B. Joyce gave an update on the Zika virus. ND Medicaid will not pay for bug spray.

**Criteria recommendations**

The recommended RDUR criteria enclosed in the packet were developed from product information provided by the manufacturers and are usually consistent with new indications, new drugs added, new warnings, etc. These proposed criteria will be added to the current set of criteria and will be used in future DUR cycles. P. Woodrow moved to approve the new criteria, and L. Schield seconded the motion. Chair W. Brown called for a voice vote. The motion passed with no audible dissent.

The next DUR Board meeting will be held December 7, 2016 in Bismarck. L. Schield made a motion to adjourn the meeting. P. Woodrow seconded. The motion passed with no audible dissent. W. Brown adjourned the meeting.

**Closed session for profile review**

Chair W. Brown called the closed session for profile review to order at 2:50. The board reviewed a patient profile with gabapentin, a benzodiazepine, a muscle relaxer, an opioid, and tramadol. The board discussed appropriate therapy and synergistic effect of benzodiazepines and opioids. After discussion, W. Brown adjourned the meeting at 3:10.