Drug Utilization Review (DUR) Meeting Minutes

December 6, 2017

Members Present: Wendy Brown, Tanya Schmidt, Laura Schield, Michael Quast, Zach Marty, LeNeika Roehrich, Andrea Honeyman, Carlotta McCleary, Peter Woodrow, Michael Booth

Members Absent: Gaylord Kavlie, Katie Kram, Jeffrey Hostetter, Russ Sobotta

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

Old Business

Chair W. Brown called the meeting to order at 1:04 p.m. Chair W. Brown asked for a motion to approve the minutes of the September meeting. T. Schmidt moved that the minutes be approved and A. Honeyman seconded the motion. Chair W. Brown called for a voice vote to approve the minutes. The motion passed with no audible dissent.

Announcements

A. Murphy informed the board of new functionalities in the MMIS claims system that allow for a diagnosis field to be used during claims processing, as well as the ability for the system to automatically scan for concurrent medications. The board was informed that these new functionalities have since been utilized to create edits to check for diagnoses and/or concurrent medications for a select few medication classes such as stimulants and SGLT-2 inhibitors. The board was further informed that additional edits will be implemented in the future for medications on the Preferred Drug List that only require concurrent therapy and/or FDA approved diagnoses. A. Murphy also informed the board that a class review of topical corticosteroids would be presented at the next DUR board meeting to later designate prior authorization criteria for this class of medications.

Review Top 15 Therapeutic Categories/Top 25 Drugs

B. Joyce presented the quarterly review of the top 15 therapeutic classes by total cost of claims, top 25 drugs based on number of claims, and top 25 drugs based on claims cost for the 3rd quarter of 2017.

PDL Update

A. Murphy shared with the Board all of changes made to the Preferred Drug List since the most recent 2017 version of the Preferred Drug List was posted. A total of twenty-one medications were added to the list of PDL medications requiring prior authorization and Moviprep will no longer require prior authorization. Kymriah, Parsabiv, Renflexis, and Xiaflex were added to the Medical Billing Only list of medications.

Annual Review of Prior Authorization Forms and Criteria

The Board reviewed all forms and criteria utilized for all medications that are currently placed on prior authorization. L. Schield spoke to difficulties with navigating the website used to house the forms, criteria, and Preferred Drug List. T. DeRuiter and A. Murphy agreed to provide consolidated,

searchable criteria and review potential ways the website can be restructured to simplify navigation. No changes were recommended during the review of the forms and criteria.

New Business

Discussion on Opioid and Benzodiazepine Abuse and Overdose Diagnoses

A. Murphy and B. Joyce presented statistics on opioid, benzo, heroin, and other psychotropic drug overdoses in the North Dakota Medicaid population during 2017. A. Murphy and B. Joyce presented recommended claims processing edits that could be put into place to try to reduce overdoses of benzodiazepines and opioids in the North Dakota Medicaid population, as well as a step-wise approach in which the edits could be implemented. The board agreed that the presented edits would be beneficial.

Emflaza

B. Joyce briefly discussed Emflaza with the board for the purpose of removing it from the PA criteria for medications >$3,000 to have its own separate criteria. A motion was made by P. Woodrow to manage the medication separately through prior authorization. The motion was seconded by L. Schield.

Skelaxin

T. DeRuiter and B. Joyce reviewed Skelaxin with the Board. A motion was made by M. Booth to manage the medication through prior authorization. The motion was seconded by P. Woodrow. This topic will be reviewed at the next meeting

Eucrisa

T. DeRuiter and B. Joyce reviewed Eucrisa with the Board. A motion was made by M. Quast to manage the medication through prior authorization. The motion was seconded by L. Roehrich. This topic will be reviewed at the next meeting

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, and new warnings. These proposed criteria will be added to the current set of criteria and will be used in future DUR cycles. L. Roehrich moved to approve the new criteria and T. Schmidt seconded the motion. The motion passed with no audible dissent. The next DUR Board meeting will be held March 7, 2018 at the Capitol in the Brynhild Haugland room in Bismarck. W. Brown adjourned the meeting.