Drug Utilization Review (DUR) Meeting Minutes
May 1st, 2006

Members Present: Albert Samuelson, Greg Pfister, John Savageau, Patricia Churchill, Cheryl Huber, Leann Ness, Norman Byers, Scott Setzepfandt, Gary Betting, Bob Treitline, Todd Twogood

Medicaid Pharmacy Department: Brendan Joyce

HID Staff Present: Candace Rieth

Members Absent: Carrie Sorenson

Chair J. Savageau called the meeting to order at 1:03pm. Brendan Joyce introduced the new Board member, Dr. Todd Twogood. J. Savageau asked for a motion to approve the minutes from the February 13th, 2006 meeting. G. Pfister moved that the minutes be approved and B. Treitline seconded the motion. The chair called for a voice vote to approve the minutes, which passed with no audible dissent.

Budget Update:
B. Joyce reported on pre- and post- Part D data. Expenditures in September 2005 were approximately 4.6 million dollars with approximately 22,600 recipients receiving approximately 93,000 prescriptions. With the inception of Part D, March 2006 had expenditures of approximately 2.4 million dollars with approximately 18,062 recipients receiving approximately 47,600 prescriptions.

Review Sedative/Hypnotic Agents
C. Rieth reviewed the Sedative/Hypnotic class of medications. The board approved to place all Sedative/Hypnotic agents, except for Ambien, on prior authorization at the February meeting. This is the 2nd review. The suggested criteria for PA would require a failure of Ambien (Zolpidem) before other single source Sedative/Hypnotics would be covered. There was public comment by Tim Butler, Account and Leadership Development Director for Sepracor. He spoke against the board implementing a prior authorization of Sedative/Hypnotics. Gary Dawson, representing Takeda, reviewed Rozerem related information with the board. Since a motion was made and seconded at the February meeting, a voice vote was taken with one audible dissent, C. Huber. Motion passed.

Review of Growth Hormone and Related Products
C. Rieth reviewed growth hormone and related products. The board made a motion and second in February to place growth hormone products and IGF-1 products on prior authorization, allowing the Department to review each claim for clinical appropriateness. There was no public comment on Growth Hormone and related products. T. Twogood suggested that short stature alone not be covered criteria. T. Twogood made a motion to amend the current growth hormone criteria and remove the statement 'infants born small for gestational age (SGA) who have not caught up in height'. A. Samuelson seconded the motion. A voice vote was taken with no audible dissent. Since a motion was made and seconded at the February meeting to place IGF-1 products on prior authorization, a voice vote was taken with no audible dissent.

Yearly review of Prior Authorization
Legislation requires a yearly review of the status of prior authorization. C. Rieth reviewed 2 classes, ACE-Is and ARBs. Cost avoidance numbers, market share reports, and prior authorization forms and criteria were reviewed. Cost avoidance with the Prior Authorization Program through January 2006 was approximately 3.3 million dollars. C. Huber suggested that the algorithm and PA form on the ACE-I's be edited so that the list of drugs that do not require Prior Authorization match.

SROA Physician Survey:
At the November DUR meeting, the board voted to send SROA letters and surveys to physicians prescribing these opioids on what appeared to be a prn basis. C. Rieth gave the board an update on the mailing. The first week of January, 192 letters were mailed and as of April 30th, 140 surveys were returned. These surveys were reviewed and specific information will be provided in the executive session.

Review of Recommended Criteria:
B. Joyce advised the board that the enclosed recommended RDUR criteria are developed from product information provided by the manufacturers and usually are consistent with new indications, new drugs added, new warnings, etc. These criteria will be added to the current set of criteria, and will be used in future RDUR cycles. C. Huber moved to approve the new criteria and G. Pfister seconded the motion. The motion was approved by voice vote with no audible dissent

The next DUR board meeting will be August 7th, 2006. Chair, J. Savageau asked the Board for suggested agenda items. Topics that were mentioned included Boniva injectable, Lamisil/Penlac, Nasal Steroids and Skeletal Muscle Relaxants. These topics will be reviewed for inclusion in the August agenda. C. Huber made a motion to adjourn the meeting in to executive session to discuss patient specific health information. P. Churchill seconded. Chair J. Savageau adjourned the meeting in to executive session at 2:20 pm.

Executive Session:
Board members reviewed actual physician responses to the SROA's and discussed the responses. Board members informed the Department representative that this process should be repeated because based on some responses, their prescribing patterns will change.