

Drug Utilization Review (DUR) Meeting Minutes October 1st, 2007

Members Present: Albert Samuelson, Patricia Churchill, Cheryl Huber, Norman Byers, Carrie Sorenson, Todd Twogood, Greg Pfister, Scott Setzepfandt, Bob Treitline, Kim Krohn, Jeffrey Hostetter, Leann Ness and Carlotta McCleary.

Medicaid Pharmacy Department: Brendan Joyce, Gary Betting

HID Staff Present: Candace Rieth

Members Absent: John Savageau

Chairman, C. Huber, called the meeting to order at 1:00pm. New members were introduced to the Board. C. Huber asked for a motion to approve the minutes from the August 20th meeting. S. Setzepfandt asked for a change to the wording of the minutes. The minutes state that Board members have received letters from Pfizer and S. Setzepfandt said that it should read Board members have received letters from physicians. N. Byers moved that the minutes be approved with modifications and K. Krohn seconded the motion. Chair, C. Huber, called for a voice vote to approve the minutes, which passed with no audible dissent.

Budget Update

B. Joyce made available a spreadsheet showing the top 21 drug classes based on amount reimbursed. Antipsychotics, Anticonvulsants, Antidepressants and ADHD make up 42.97% of the total drug spend for North Dakota Medicaid.

High Cost Medications

House Bill 1459 directs the Department to review expensive medical procedures for prior authorizations. The Department would also like to extend this review to medications. This would allow reconciliation of data to determine incorrect billings. B. Joyce provided more information to the Board on this topic including claims with a minimum billed amount of three thousand dollars, strength of medications, quantities dispensed and days' supply. After reviewing the list, G. Pfister made a motion to allow an edit on agents costing more than three thousand dollars excluding all products listed in the High Cost Drug Claims table. B. Treitline seconded the motion. The chair called for a voice vote and the motion passed with no audible dissent.

Yearly Review of Prior Authorization

Once a year, the Board reviews products that were placed on prior authorization. This allows the Board a chance to review the prior authorization forms and criteria. DAW-1 products were reviewed. B. Joyce provided the Board with a list of all DAW-1 claims that were billed in June, 2007. No action will be taken regarding the DAW-1 form or criteria.

Criteria Recommendations

The recommended RDUR criteria enclosed in the packet were 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 DUR cycles. P. Churchill moved to approve the new criteria and N. Byers seconded the motion. C. Huber called for a voice vote and the motion passed with no audible dissent.

Legislative Update

House Bill 1422 restricts placing the following classes of medications on Prior Authorization. These include AIDS, Cancer, Anti-psychotics, Anti-depressants, ADHD and Mood-Stabilizers. Over the next year, the DUR Board will be responsible for reviewing these classes and making recommendations to the Department regarding the plan of action the Board would take, if any. The DUR Board recommendations will be reported, periodically, to the Legislative Council.

Oral Antineoplastic Review

At the June meeting, A. Samuelson suggested getting a consult from one of the Oncology physicians currently prescribing to North Dakota Medicaid patients. B. Joyce had no luck asking for guidance regarding this class of medications. At this time, there is no new information to review and B. Joyce asked Board members for suggestions of oncologists that would be willing to help the Board in this capacity. K. Krohn suggested an oncologist in Minot and she will ask for his guidance.

ADHD Review

At the August meeting, the DUR Board suggested a prior authorization on Vyvanse and also suggested broadening prior authorization guidelines for other agents in this class by incorporating step therapy. There was public comment by Rose Mullen, representing Eli Lilly. She reviewed Strattera related prescribing information with the Board. There was public comment by Susan Helgeland, representing Mental Health America of North Dakota. She spoke against restricting ADHD medications for ND Medicaid recipients. B. Joyce stated that post-rebate, Strattera and Daytrana are much more expensive than the other agents in this class. The Department suggests a prior authorization on Daytrana and Strattera. J. Hostetter asked for specific information regarding rebates. B. Joyce stated that he was unable to reveal that information. J. Hostetter said that it is very hard to give an opinion if not all of the information is presented. S. Setzpfandt was asked to explain to the Board the process involved with sharing rebate information. S. Setzpfandt said that it would be very difficult to reveal this information without legal involvement and closed door sessions. G. Pfister made a motion to modify the current proposed form, ADHD PA Form, to read ADHD Stimulant PA form and to remove Strattera. T. Twogood seconded the motion. Regarding the legislative review process for exempted classes, A. Samuelson made a motion to allow the DUR Board to manage and review ADHD. N. Byers seconded the motion. Chair, C. Huber, called for a voice vote. Individual votes were counted with 1 opposed, 2 abstaining and 9 yes votes. Motion passed.

Antidepressant Review

The Antidepressant review is based on the 2007 legislative session requesting information on classes of medications that currently are exempt from prior authorization. B. Joyce reviewed utilization data of the Antidepressant meds including a market share report. Based on post-rebate information, Cymbalta, Effexor XR, Lexapro, Paxil CR and Prozac weekly are the most costly medications in this class. There was public comment by Rose Mullen, representing Eli Lilly. She reviewed Cymbalta prescribing information with the Board. B. Joyce asked the Board if they would like the ability to review and manage antidepressants. B. Joyce stated that the Board could authorize a lifetime PA for these medications and review previous history to look for failure of other medications in the class, making the prior authorization process simpler for providers. C. Huber suggested that the form be reworked and called an SSRI PA form. B. Joyce said that he would have the form reworked and this information would be brought to the next DUR meeting.

Conflict of Interest

Ryan Bernstein, Legal Counsel to Governor John Hoeven of North Dakota has asked that the DUR Board adopt a conflict of interest policy that would require members to disclose financial relationships with drug companies and recuse themselves from voting, in some cases. After much discussion, it was decided that B. Joyce will draft a conflict of interest form and bring it to the December meeting for Board review.

The next DUR board meeting will be December 3rd, 2007. B. Joyce reviewed future agenda items. These include Antidepressants, ADHD agents, Antineoplastic agents and Antipsychotics. G. Pfister made a motion to adjourn the meeting and K. Krohn seconded. Chair C. Huber adjourned the meeting at 3:50 pm.