

**Drug Utilization Review (DUR) Meeting Minutes  
December 11th, 2006**

**Members Present:** Albert Samuelson, John Savageau, Patricia Churchill, Cheryl Huber, Leann Ness, Norman Byers, Carlotta McCleary, Carrie Sorenson, and Bob Treitline.

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

**HID Staff Present:** Candace Rieth

**Members Absent:** Scott Setzepfandt, Greg Pfister and Todd Twogood

Chairman, J. Savageau, called the meeting to order at 1:03pm. He asked for a motion to approve the minutes from the November 13<sup>th</sup>, 2006 meeting. N. Byers 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 that there was no updated budget information, at this time.

**Review of Oxycontin**

Since Oxycontin became available generically, the number of patients, tablets and scripts each has decreased. Recent court rulings will remove the generic product from the market. The Department would like to implement a prior authorization status for Oxycontin to ensure appropriate utilization and avoid questionable brand utilization increases. B. Joyce stated that one function of the DUR Board is to address abuse potential within Medicaid. At this time, the other sustained release opioids do not exhibit inappropriate utilization. C. Huber suggested that a pain contract not be required for a prior authorization of Oxycontin. J. Savageau suggested that cancer pain be included as criteria for coverage of Oxycontin. A. Samuelson believes that a prior authorization on Oxycontin will be a deterrent of the product to the street market. A. Samuelson also asked the State to review Methadone data. There was no public comment. At the November DUR meeting, a motion and second was made to place Oxycontin on prior authorization. This motion was amended to include cancer diagnoses as criteria and to remove the pain contract request. A voice vote was taken with no audible dissent. Motion passed.

**Review of Oracea and Solodyn**

C. Rieth reviewed Oracea and Solodyn. These are two new extended release formulations of tetracyclines that were approved by the FDA in May 2006. At this time, there is no evidence that Oracea and Solodyn are superior to their generic counterparts for treating acne or rosacea. There was no public comment. A motion and second was made at the November meeting to prior authorize Oracea and Solodyn. A voice vote was taken with no audible dissent. Motion passed.

**Review of Exubera**

B. Joyce reviewed Exubera. Exubera is an inhaled short acting recombinant regular insulin product indicated for the treatment of diabetes mellitus in adults. At the November meeting, the Board made no recommendation for prior authorization of Exubera. B. Joyce had one paid claim and profile to share with the Board. The profile exhibited inappropriate utilization of Exubera. The Department will watch Exubera utilization and bring the information to the Board if inappropriate utilization continues.

### **Yearly Review of Prior Authorization and Zanaflex capsules**

B. Joyce reviewed the PA response data with the Board. From January 1, 2006 through November 30, 2006, 1,966 prior authorizations were processed. Of these, 1,858 were responded to in less than 8 hours. This is 94.51% of the claims, with 5.49% (108) with a response rate of greater than 8 hours. C. Rieth reviewed Zanaflex capsule 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. The Board reviewed the information and no action was taken. There will be no changes to the Zanaflex capsule prior authorization.

### **Tablet Splitting Initiative**

C. Rieth reviewed tablet splitting data that shows a significant savings if a tablet splitting initiative were implemented. Currently, the State provides a monetary incentive to pharmacies that split tablets. B. Treitline suggested that the Department send letters to physicians and pharmacies asking for assistance with tablet splitting. B. Joyce stated that letters have been sent in the past with no significant changes. C. Huber asked if a patient incentive could be offered. B. Joyce said that he would discuss this with CMS and see if removing the copay on these prescriptions would be allowed. C. Rieth stated that in South Dakota, the state began a tablet splitting initiative with the statin class of medications and that the Department is reimbursing pharmacies for tablet splitters. B. Joyce said that a pharmacy incentive has been tried, that letters have been mailed and he asked that the Board give more suggestions regarding tablet splitting.

### **Criteria Recommendations**

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. B. Treitline moved to approve the new criteria and C. Huber seconded the motion. The motion was approved by voice vote with no audible dissent

The next DUR board meeting will be March 12th, 2007. C. Huber made a motion to adjourn the meeting and A. Samuelson seconded. Chair J. Savageau adjourned the meeting at 2:00 pm.