

**Minutes of the December 4, 2015  
Pharmacy & Therapeutics (P&T) Committee Meeting  
South Dakota Department of Social Services, Division of Medical Services**

**Members present**

Bill Ladwig; Michelle Baack; Richard Holm; Dana Darger; James Engelbrecht; Lenny Petrik; Kelley Oehlke, Tim Soundy

**DSS staff present**

Mike Jockheck, RPh

**Administrative business**

The P&T meeting was called to order by D. Darger at 1:00 p.m. The minutes of the September meeting were presented. B. Ladwig made a motion to approve. M. Baack seconded the motion. The motion was approved unanimously.

**Prior authorization update and statistics**

The committee reviewed the prior authorization (PA) activity for October 2015. There were a total of 3,085 PAs processed in the month of August, with 98.66% of those requests responded to in less than eight hours. There were 2,460 requests (79%) received electronically and 667 requests (21%) received by fax.

**Analysis of the top 15 therapeutic classes**

The committee reviewed the top 15 therapeutic classes by total cost of claims from 07/1/2015 – 09/30/2015. The top five classes were antipsychotics, respiratory and CNS stimulants, amphetamines, insulins, and anticonvulsants, misc. The top 15 therapeutic classes make up 37.60% of total claims. The committee also reviewed the top 50 drugs based on total claims cost and number of claims. The top 50 drugs by claims cost make up 17.77% of total claims. The committee asked for a review of patients taking hydrocodone. The committee also requested an update on Hepatitis C.

**Review of drug spend**

The committee reviewed a table showing SD Medicaid drug spend from 2012 – October 2015. The average cost per script rose from \$64.45 in 2012 to \$81.35 in 2015. The average recipient script cost rose from \$172.76 in 2012 to \$223.35 in 2015.

**Patent expirations**

The committee reviewed a list of medications with an upcoming anticipated availability of a first-time generic.

**Orkambi second review**

The committee reviewed the prior authorization form provided for Orkambi. There was no public comment. The committee requested that a bullet point be added to the form for 'specialist involved in therapy.' M. Baack made a motion to approve the form as amended. B. Ladwig seconded the motion. The motion was approved unanimously.

### **Chronic constipation medications second review**

The committee reviewed the prior authorization form provided for chronic constipation medications. There was no public comment. J. Engelbrecht made a motion to approve the form. R. Holm seconded the motion. The motion was approved unanimously.

### **Viberzi second review**

The committee reviewed the prior authorization form provided for Viberzi. There was no public comment. M. Baack made a motion to approve the form. K. Oehlke seconded the motion. The motion was approved unanimously.

### **PCSK9 inhibitors second review**

The committee reviewed the prior authorization form provided for PCSK9 inhibitors. M. Lewis, representing Amgen spoke regarding Repatha. The committee requested that 'and' be added to the diagnosis wording for it to read 'diagnosis of HeFH, HoFH, and clinical atherosclerotic cardiovascular disease.' The committee requested examples of how other states are managing this class be brought back to the next meeting. Also, report on any prior authorizations that are requested in January, February, and March.

### **Antipsychotic data**

C. Rieth gave an overview of antipsychotic prior authorizations from July 2015. Charts were provided showing total claims cost, total patients, and total rxs.

### **PPI data**

C. Rieth gave an overview of proton pump inhibitor data from October 29, 2014 through October 28, 2015. There were 5,324 recipients receiving PPI therapy during this time. The committee requested that the prior authorization form for PPIs be reviewed at the next meeting.

### **Enbrel/Humira data**

C. Rieth gave an overview of Enbrel and Humira utilization from October 29, 2014 through October 28, 2015. The committee requested that the state provide net pricing of these agents at the next meeting.

### **Lyrica data**

C. Rieth gave an overview of Lyrica utilization from October 29, 2014 through October 28, 2015. J. Engelbrecht made a motion to place Lyrica on prior authorization. L. Petrik seconded the motion. There was no public comment. A prior authorization form will be brought back to the next meeting for committee review.

### **Hydrocodone utilization**

C. Rieth gave an overview of hydrocodone/APAP utilization from January 2014 through June 2015. Total patients, total claims cost, and total number of rxs were provided. The committee asked that additional information be provided at the next meeting including: top 10% of utilizers, top prescribers/providers, and quantities dispensed.

**Otrexup review**

The committee reviewed Otrexup clinical information. There was no public comment. B. Ladwig made a motion to place Otrexup on prior authorization. R. Holm seconded. The motion passed unanimously. A form will be brought to the next meeting for review.

**Durlaza review**

The committee reviewed Durlaza clinical information. There was no public comment. B. Ladwig made a motion to place Durlaza on prior authorization. R. Holm seconded the motion. The motion passed unanimously. A form will be brought to the next meeting for review.

The next meeting is scheduled for April 1, 2016. M. Baack made a motion to adjourn the P&T Committee meeting. R. Holm seconded the motion. The motion passed unanimously and the meeting was adjourned.