# Minutes of the March 31, 2017 Pharmacy & Therapeutics (P&T) Committee Meeting South Dakota Department of Social Services, Division of Medical Services

#### **Members Present**

Dana Darger, Mikal Holland, Bill Ladwig, Michelle Baack, Kelley Oehlke, Richard Holm, Lenny Petrik, James Engelbrecht, Timothy Soundy

## **DSS Staff Present**

Mike Jockheck

### **Administrative Business**

The meeting was called to order by Darger at 1:00 P.M. The minutes of the December meeting were presented. Petrik made a motion to approve, Oehlke seconded the motion. The motion was approved unanimously.

## **Prior Authorization Update (PA) and Statistics**

The committee reviewed the PA activity for January 2017. There were a total of 3,545 Pas processed in the month of January, with 97.32% of those requests responded to in less than eight hours. There were 2,782 requests (78%) received electronically and 763 requests (22%) received by fax.

# Analysis of the Top 15 Therapeutic Classes and Drug Spend

The committee reviewed the top 15 therapeutic classes by total cost of claims from 10/01/16 – 12/31/16. The top five classes were antipsychotic agents, insulins, respiratory and CNS stimulants, amphetamines, and anticonvulsants, misc. The top 15 therapeutic classes make up 40.75% 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 14.08% of total claims. Baack asked for a breakdown of all products included in the insulin class. Darger asked for a presentation on insulin, including the new biosimilar insulins. Possible presenters will be researched.

## **Opioid Strategies for Management Review**

At the December meeting the Committee was asked to provide insight on ways to manage opioid utilization. Holm discussed opioid prescribing statistics. The South Dakota Board of Medicine's white paper on responsible opioid prescribing was discussed. An overview of several state Medicaid morphine milligram equivalents (MME) prior authorization requirements were reviewed. Baack asked that a report on MMEs/day be provided, excluding patients with a terminal or cancer diagnosis. Ladwig suggested that patients taking more than 90 MME/day be identified. It was also requested that the MME report be broken down into smaller groupings, to determine

current opioid utilization. Holland suggested a review of providers. Soundy discussed ways to identify patients with acute pain. Baack asked the committee if patients on chronic opioids should also be required to have naloxone available. Further discussion of opioid utilization management will be added to the agenda for future meetings. There was no public comment.

#### Methadone Second Review

A PA form was developed and presented to the committee at the December meeting. The committee asked that the form be re-reviewed in March. Darger discussed methadone use in neuropathic pain and for renally impaired patients. Soundy made a motion to accept the form as presented. Englebrecht seconded. The motion was unanimously approved. There was no public comment.

# Over-the-counter (OTC) Iron

The State requested the committee's insight whether OTC iron should be a covered product. A review of several state Medicaid's OTC iron policies were reviewed. Baack suggested that iron be covered for children. Holm made a motion to cover OTC iron products for children aged 2 and under. Englebrecht seconded. The motion passed unanimously. There was no public comment.

## **Nuplazid Second Review**

At the December meeting the committee requested a PA form be developed and presented for review. The committee asked that the form be amended to state that the medication be prescribed by, or in consultation with, a neurologist or psychiatrist. Oehlke made a motion to approve the form as amended. Baack seconded. The motion passed unanimously. There was no public comment.

## **Specialty Medication Review**

Utilization of medications over \$5,000 for CY2016 was presented to the committee. Engelbrecht recommended that this report be included in each pack and that biosimilars be included. There was no public comment.

### **Emflaza Review**

Emflaza information was presented for review. Panna Patel, representative from Marathon Pharmaceuticals, spoke regarding prolonged ambulation and less instances of weight gain. The committee requested that information be brought back to regarding Emflaza versus prednisone in clinical trials, if available. Englebrecht made a motion to approve the prior authorization criteria (diagnosis of Duchenne muscular dystrophy and age greater than 5 years) as presented. Holland seconded. The motion passed unanimously.

## **Diclegis Review**

Diclegis prior authorization criteria was presented for review at the request of two OB/GYN providers. The committee discussed if prior therapy with ondansetron should be required. There was no public comment. Baack made a motion that the PA requirements be amended and that the requirement for a trial of ondansetron be removed and the diagnosis of hyperemesis gravidarum be required. Soundy seconded. The motion passed unanimously.

### **Eucrisa Review**

Eucrisa information was presented for review. Adil Anwar, representative from Pfizer Pharmaceuticals, spoke regarding the indications and duration of therapy. Baack asked for additional information regarding pimecrolimus and tacrolimus creams/ointments. The committee would like a comparison in cost, indication and place in therapy between Eucrisa and other available agents. Engelbrecht requested additional information about what other payors are doing with drugs indicated for atopic dermatitis. This information will be revisited at the June meeting.

## **Onzetra Review**

Onzetra information was presented for review. There was no public comment. Baack made a motion to add prior authorization criteria to this drug (requesting a trial of all other triptans). Soundy seconded. The motion passed unanimously.

# **Keveyis Review**

No action was taken. There was no public comment

The next meetings are scheduled for 06/23/2017, and 09/29/2017. Holland motioned to adjourn. Ladwig seconded. The meeting adjourned at 2:45 P.M.