# South Dakota Department of Social Services, Division of Medicaid Services Pharmacy & Therapeutics (P&T) Committee Meeting Minutes

Friday, September 24, 2021 1:00 – 3:00 pm CT

### **Members and DSS Staff**

Michelle Baack, MD	Χ	Heather Preuss, MD	-
Dana Darger, RPh, Chair	Χ	Matthew Stanley, DO	-
Mikel Holland, MD	Χ	Deidre Van Gilder, PharmD	Χ
Bill Ladwig, RPh	Χ	Mike Jockheck, DSS Staff	Χ
Kelley Oehlke, PharmD	Χ	Matthew Ballard	-
Lenny Petrik, PharmD	Х	Bill Snyder, DSS Staff	Х

### **Administrative Business**

Darger called the meeting to order at 1:05 pm. The minutes of the June meeting were presented. Jockheck noted to make a change under Administrative Business to reflect minutes from March meeting instead of December. Ladwig made a motion to approve. Baack seconded the motion. The motion was unanimously approved via roll call vote.

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

The committee reviewed the PA activity report from April 1, 2021 to June 30, 2021. A total of 1,455 PAs were reviewed of which 141 requests (9.7%) were received via telephone and 847 requests (58.2%) were received via fax, and 467 (32.1%) were reviewed via electronically. There was a 15% decrease of PAs received from the previous quarter. Antidiabetics made its debut on the Top Therapeutic Classes reviewed for PA.

# Analysis of the Top 15 Therapeutic Classes and Drug Spend

The committee reviewed the top 15 therapeutic classes by total cost of claims from April 1, 2021 to June 30, 2021. The top five therapeutic classes based on paid amount were atypical antipsychotics, disease-modifying anti-rheumatic agents, skin and mucous membrane agents, cystic fibrosis correctors, and anticonvulsants. These top 15 therapeutic classes make up 25.59 % of total claims. The committee also reviewed the top 50 drugs based on amount paid and number of claims. The top 50 drugs by amount paid make up 8.89 % of total claims. Dupixent was noted twice on the top 50 drugs by paid amount. Dupxient 300mg strength is linked to skin and mucous membrane agents and Dupxient 200mg strength is linked to interleukin antagonist class. With the strengths combined, Dupixent rose to number 10 on the list. Baack commented combining the utilization of these strengths together to provide the actual information on cost per prescription and number of people on it. Darger brought to attention Creon utilization.

# **Old Business**

#### 90-Day Fill

Jockheck provided an update on the 90-day fill which was implemented on 10/1/2020. A 90-day supply of generic maintenance medication is allowed after member establishes three monthly fills. Utilization had continued to creep up each month and eventual leveling off. Ladwig commented as long as there is no brand utilization abuse, there is not a need for continual monitoring at each meeting.

# Atypical antipsychotic utilization in children

Committee continued the conversation on the proposed PA criteria for prescribers wanting to add a 3 or more atypical antipsychotics. The areas of the criteria that were of interest for in-depth were the age at which the specialist is involved in care and criteria allowing more than 3 atypical antipsychotics. Committee reviewed members 6 to 12 years old taking more than 2 atypical antipsychotics. After review, committee decided to table the discussion for Dr. Stanley's input.

### **ADHD** utilization

Committee reviewed ADHD comparison of PMPM and PUPM of other state Medicaid programs and State B's PA criteria. Ladwig commented South Dakota's PMPM was in the ballpark of other states' PMPM. Committee also reviewed utilization of Vyvanse chewable tablets.

# Gabapentin high-dose utilization

Committee reviewed eleven members taking over 4,800 mg per day of gabapentin. Baack was concerned about the children taking over 4,800 mg per day. Van Gilder surmised these were probably children on gabapentin 250 mg liquid. In addition, one member identified during 1Q2021 utilization switched to pregabalin during 2Q2021. This left 4 members taking over 4,800 mg per day of gabapentin. Committee discussed placing quantity limits of greater than 3.6 g per day.

Darger inquired if there was any public comment. There were none.

## Opioid update

The committee reviewed 2Q2021 opioid outcomes compared to previous quarters from the opioid initiatives. There was an increase in opioid utilization and opioid utilizers during second quarter which corresponds to the increase in total eligible members.

# Review PA forms and criteria

The committee reviewed utilization of drugs on PA that are available as generics now. After review, the committee decided on the following:

- Nuvigil and Provigil keep PA on all brands and generics
- Onfi remove PA on generics only but keep PA on brands
- Oracea keep step therapy on all brands and generics
- Proton Pump Inhibitors (Nexium granules and Protonix PAK) keep PA on all brands and generics
- Qualaquin keep PA on all brands and generics
- Soma 250 keep step therapy on all brands and generics
- Ultram ER keep step therapy on all brands and generics

Ladwig made the motion on the Onfi PA to retain the PA on brands but remove generics from PA. Van Gilder seconded the motion. Darger inquired if there was any public comment on prior authorizations. There were none. The motion was unanimously approved via roll call vote.

## **Juxtapid**

The committee reviewed the proposed Juxtapid PA criteria. Darger inquired if there was any public comment. There were none. Van Gilder motioned to approve the PA criteria as presented. Baack seconded the PA criteria. The motion was unanimously approved via roll call vote.

#### **Imcivree**

The committee reviewed the proposed Imcivree PA criteria. Cody Gerber from Rhythm Pharmaceuticals provided public comment on Imcivree. Baack requested changing the term "weight loss" to "weight management". Baack made a motion to approve the PA criteria as presented with the "weight management" term change. Ladwig seconded the motion. The motion was unanimously approved via roll call vote.

# **New Business**

### **Dermatological PA approval review**

Committee reviewed the PA approval rate for topical acne, rosacea, headlice and topical onychomycosis. Based on current trend, no changes were needed.

### **Antiviral PA approval review**

Committee reviewed the PA approval rate for antiviral drugs. Petrik made a motion to review Hepatitis C PA criteria at the next meeting. Baack seconded the motion. The motion was unanimously approved via roll call vote. Porscha Showers from Gilead Sciences was available for questions. Holly Budlong from AbbVie provided public comment. Jennifer Davies from Gilead Sciences provided public comment.

#### Cholbam utilization

Committee reviewed the utilization of Cholbam. Baack reviewed the utilization and since the diagnosis supported it, no changes were needed.

# Pancreatic enzyme utilization

Committee reviewed the utilization for pancreatic enzymes. Stacy Peters, clinical pharmacist, from Sanford's Children's Specialty Clinic provided public comment. Holly Budlong from AbbVie provided public comment. Committee requested to review this class again at the next meeting and for utilization to include average quantity information.

### Hemophilia factor product utilization

Committee reviewed the utilization for hemophilia factor products. Brandon Yip from Sanofi provided public comment. Brianna Murphy, a pediatric hematologist, from Sanford's Children's Specialty Clinic provided public comment. Sammy Samuelson from Genentech provided public comment.

# **Cystic fibrosis mediation compliance**

Committee reviewed the cystic fibrosis medication compliance. Darger inquired if there was any public comment. There were none.

# Brexafemme

Brexafemme clinical information was presented for review. Darger inquired if there was any public comment. There were none. Baack made a motion to add step therapy or PA to Brexafemme. Ladwig seconded the motion. The motion was unanimously approved via roll call vote.

### Adjournment

The next meeting is scheduled on December 10, 2021. The March meeting is tentatively scheduled on March 4, 2022. The Committee made a motion to adjourn the meeting and everyone seconded the motion. The motion passed unanimously, and the meeting adjourned at 3:03 pm.