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

Friday, June 10, 2022
1:00 – 3:00 pm CT

Members and DSS Staff

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

Administrative Business

Darger called the meeting to order at 1:06 pm. The agenda for today's meeting was presented. Baack made a motion to approve the agenda. Oehlke seconded the motion. The motion was unanimously approved. The minutes of the March meeting were presented. Baack made a motion to approve. Stanley seconded the motion. The motion was unanimously approved.

Prior Authorization Update (PA) and Statistics

The committee reviewed the PA activity report from January 1, 2022, to March 31, 2022. A total of 1,736 PAs were reviewed of which 104 requests (6%) were received via telephone and 968 requests (55.8%) were received via fax, and 664 (38.2%) were reviewed via electronically. There was a 1.38% increase of PAs received compared to the previous quarter.

Analysis of the Top 15 Therapeutic Classes and Drug Spend

The committee reviewed the top 15 therapeutic classes by total cost of claims from January 1, 2022, to March 31, 2022. 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 amphetamines. These top 15 therapeutic classes make up 25.08 % 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 9.67 % of total claims. Of note, Humira citrate-free utilization accounted for 72% of the utilization for Humira and Xarelto made its 1st quarter debut on the top 50 drugs by paid amount. Darger requested an in-depth utilization review of Xifaxan and the need to discuss biosimilars at future meetings.

Old Business

Narrow Therapeutic Index (NTI) drugs

Darger provided a brief beginning history of NTI drugs. The committee reviewed the NTI utilization. It was noted that there was no utilization for brand digoxin and lithium, and no utilization of procainamide and quinidine. The committee discussed many aspects of NTI utilization. Stanley commented on anticonvulsant usage for mood stabilization should not be an issue when initiating therapy. Darger pinpointed levothyroxine capsule utilization. Van Gilder commented that the price of Jantoven is the same as warfarin; and Coumadin is no longer made. Jockheck inquired about removing those drugs from NTI status for drug with no brand utilization and no utilization. Darger inquired if there was any public comment. There were none. Baack made a motion to remove from the NTI list those drugs with no brand

utilization and no utilization including warfarin and Jantoven. Van Gilder seconded the motion. The motion was unanimously approved. The committee requested to review NTI utilization more in-depth at the next meeting excludingt pancreatic enzymes. For anticonvulsants, the committee wanted to review age breakdown and if the prescriber was in psychiatry to ascertain if the diagnosis was for epilepsy or mood stabilizer. Van Gilder commented on Keppra brand solution utilization compared to generic.

Sedative Hypnotics
The committee reviewed the sedative hypnotic utilization from first quarter 2022. Committee reviewed the proposed dual orexin receptor agonists (DORAs) prior authorization (PA). Darger inquired if there was any public comment. There was none. Van Gilder made a motion to add PA with the following criteria: 18 years and older, 14-day trial of zolpidem IR, quantity of 1 per day, duplicate therapy of other sedative hypnotics, benzodiazepines, or another DORAs not allowed. Baack seconded the motion. The motion was unanimously approved. Darger requested to review doxepin in-depth at the next meeting.

Vuity and pilocarpine drops
The committee reviewed utilization for Vuity and pilocarpine drugs. Jockheck suggested bringing utilization back to the next meeting to clearly see utilization.

Cyclobenzaprine
The committee reviewed the PA approvals/denials and utilization for cyclobenzaprine. Currently, the 5mg has a quantity limit of 2 tablets per day and 10mg has none. After discussion, Oehlke made a motion to add a quantity limit of 90 tablets per 30 days for cyclobenzaprine 5mg and 90 tablets per 30 days for cyclobenzaprine 10mg. Baack seconded the motion. Darger inquired if there was any public comment. There was none. Motion was approved unanimously.

Opioid and muscle relaxant combination
The committee reviewed an in-depth analysis of six members on 4 or more different opioid and muscle relaxation combination drugs. The committee requested further review of members taking more than 90 MME and muscle relaxants, excluding cancer diagnosis and spinal cord injury; the focus is on reviewing chronic non-terminal diagnosis with prescriber information including Narcan prescription history.

Opioid update
The committee reviewed 1Q2022 opioid outcomes compared to previous quarters from the opioid initiatives. There was a slight increase in opioid utilization and opioid utilizers during first quarter which corresponded accordingly with an increase in total eligible members.

New Business

Performance Measures
Sarah Aker, Medicaid Director, asked for the committee's feedback on South Dakota's adult and child core set performance measurements that are tied to medications. Jen Lavinger, Sr Data Analyst, presented the Core Set Measures review on ADHD medications, antidepressants and antipsychotics, asthma medications, contraceptives, and opioids. Committee requested additional time to review the information and a more comprehensive analysis of the measures for ADHD medications and diabetes monitoring.

Opioid & BZD
The committee reviewed an in-depth analysis of members taking opioids and benzodiazepines concomitantly including demographics, number of different drugs, different pharmacies, and different prescribers.

Opioid & stimulants

The committee reviewed an in-depth analysis of members taking opioids and stimulants concomitantly, including demographics, number of different drugs, different pharmacies, and different prescribers. The committee requested additional information for members taking opioids, stimulants, and sedative hypnotics, including those members taking more than 90 MME.

Adjournment

The next meeting is scheduled on September 23, 2022. The December meeting is tentatively scheduled for December 2, 2022. Baack made a motion to adjourn the meeting and Oehlke seconded the motion. The motion passed unanimously, and the meeting adjourned at 3:05 pm.