

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

Friday, June 7, 2024

1:00 – 3:00 pm CT

Members and DSS Staff

Michelle Baack, MD	X	Brandi Tackett, PharmD	X
Bill Ladwig, RPh	X	Deidra Van Gilder, PharmD, Chair	X
Kelley Oehlke, PharmD	X	Clarissa Barnes, MD, DSS Staff	X
Lenny Petrik, PharmD	X	Mike Jockheck, DSS Staff	X
Heather Preuss, MD		Taylor Koerner, DSS Staff	X
Matthew Stanley, DO	X	Heather Petermann, DSS Staff	X

Administrative Business

Van Gilder called the meeting to order at 1:01 pm. Jockheck introduced new committee member Brandi Tackett, pharmacist at Monument Health in Rapid City. The minutes of the March meeting were presented. Ladwig made a motion to approve. Baack seconded the motion. The motion was approved unanimously.

Prior Authorization Update (PA) and Statistics

The committee reviewed the PA activity report from January 1, 2024, to March 31, 2024. A total of 3,498 PAs were reviewed of which 175 requests (5%) were received via telephone, 148 requests (4.2%) were received via fax, 1,316 (37.6%) were reviewed electronically, and 1,853 requests (53%) were received via ePA. There was a 23% increase in PAs received compared to the previous quarter. The therapeutic class Medical Devices comprising of continuous glucose monitors (CGMs) debut on the Top Classes for PAs reviewed. Jockheck explained, traditionally CGMs had been covered on the medical side for Type 1 diabetics only. Coverage was moved to the pharmacy side with some expanded coverage. Ladwig requested outcomes data on CGMs in the future.

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, 2024, to March 31, 2024. The top five therapeutic classes based on paid amount were atypical antipsychotics, skin and mucous membrane agents, disease-modifying anti-rheumatic agents, incretin mimetics, and antineoplastic agents. These top 15 therapeutic classes comprise 22.28% 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 constitute 7.96% of total claims.

Old Business

Vijoice PA reviews

Committee reviewed the PA approvals and utilization of Vijoice. There were 2 patients utilizing Vijoice with appropriate diagnosis.

Linzess PA reviews

Committee had requested an in-depth review of Linzess PA appeals. The increase in appeals was due to Linzess 72mcg approved for pediatric patients 6 to 17 years old. The PA criteria has been updated to

include the expanded age indication. The appeals for Linzess should decrease.

Van Gilder inquired if there were any public comment on agenda items covered thus far. There were none.

Opioid Update

The committee reviewed 1Q2024 opioid outcomes compared to the previous quarter from the opioid initiatives. There was an increase in opioid utilization and utilizers during 1Q2024 with corresponding increase in total eligibility and utilizers. The committee also reviewed the average MME/day/utilizer graph. Ladwig requested additional utilization data for trend tracking.

Van Gilder inquired if there was any public comment. There was none.

New Business

Committee reviewed low volume requests with high approval rates. Most of the reviews were on antibiotic quantity limit reviews, antihypertensive and beta blocker quantity limits. The Committee agreed to the DSS request to adjust quantity limits for inexpensive generic products in order to decrease the number of quantity limit prior authorization requests.

Van Gilder inquired if there was any public comment. There was none.

Rezdifra

Rezdifra clinical information was presented for review. Baack said this disease state is being seen in younger patients including the pediatric population. Baack is in favor of having a specialist involved in and following the patient's care. Tara McKinely, Health System Scientific Director at Madrigal Pharmaceuticals, provided public comment. Baack made a motion to adopt the PA criteria from State A, but remove criteria 3a to 3d (confirming the diagnostic testing); only requiring documented chart notes confirming diagnosis. Ladwig seconded the motion. Jockheck requested a roll call vote. The following committee members replied with a yes response: Van Gilder, Oehlke, Stanley, Petrik, Tackett, Ladwig, Baack. The motion carried. Ladwig requested to evaluate utilization in 3 to 6 months, review PA approval rate, and what other states have done and been successful.

Auvelity

Auvelity clinical information was presented for review. Stanley provided clinical comment. Ronnie DePue, Senior Director at Axsome Therapeutics, provided public comment. After discussion, Stanley made a motion to add State B's PA criteria with 3-year lookback for three other drugs to try first except for trial of esketamine. Ladwig seconded the motion. The motion was approved unanimously.

Exxua

Exxua clinical information was presented for review. Stanley provided clinical comment. There was no public comment. Stanley made the motion to add the same PA recommended for Auvelity. Oehlke seconded the motion. The motion was approved unanimously.

Lybalvi

Lybalvi clinical information was presented for review. Stanley appreciated new approaches to treating chronic psychiatric diseases. Paul Thompson, psychiatric pharmacist and Medical Science Liaison from Alkermes, provided public comment. Stanley made the motion to add PA criteria similar to the

commercial criteria with 3-year lookback for two other drugs to try first for diagnosis of schizophrenia and bipolar disorder 1. Ladwig seconded the motion. The motion was approved unanimously.

Veozah

Veozah clinical information was presented for review. Baack inquired on the number of patients using non-hormonal agents (i.e., SSRI, SNRI, gabapentin, etc) for menopause. After discussion, Ladwig asked how long the patients currently using Veozah have been on therapy. Baack inquired when patients would stop therapy. Committee requested more information.

Adjournment

The next meeting is scheduled on September 20, 2024. The December meeting is scheduled for December 13, 2024. Ladwig motioned to adjourn the meeting and Baack seconded the motion. The motion to adjourn the meeting was unanimous and the meeting adjourned at 2:55 pm CT.