

Drug Utilization Review (DUR) Meeting Minutes November 7th, 2005

Members Present: Albert Samuelson, Greg Pfister, John Savageau, Patricia Churchill, Carrie Sorenson, Cheryl Huber, Leann Ness, Norman Byers, Scott Setzepfandt, Gary Betting, Bob Treitline

Medicaid Pharmacy Department: Brendan Joyce

HID Staff Present: Candace Rieth

Members Absent: Jay Huber

Chair J. Savageau called the meeting to order at 1:00pm and asked for a motion to approve the minutes from the August 8th, 2005 meeting. N. Byers moved that the minutes be approved and C. Huber seconded the motion. The chair called for a voice vote to approve the minutes, which passed with no audible dissent.

Budget Update:

B. Joyce reported the appropriations for the fiscal biennium were \$61,881,000. Estimated expenditures for the fiscal biennium were \$69,170,000 or \$7.3 million over the appropriation. Actual expenditures for the first 2 months of the biennium were \$8.3 million, which is \$620,000 under the appropriation.

Review of Board Policy and Procedures:

B. Joyce gave an update on modifying the Board Policy and Procedures. The Department decided to retain the current set of Policy and Procedures developed July 28, 2003, with no changes.

Review of Average Daily Consumption of ADHD Agents:

C. Rieth brought example guidelines and standards of care for use of the ADHD agents for the Board members to review. Included in the DUR packs were several articles as well as a Pocketcard developed by the American Academy of Child and Adolescent Psychiatry. At the August Board meeting, Dr. Byers asked for specialty codes of the physicians prescribing these medications. A report was provided by HID showing the specialty codes summarized by claims count, quantity dispensed and total dollars. B. Treitline suggested that B. Joyce continue to monitor the situation with quantity limits, using the guidelines and standards of care provided. Any change in trend will be presented at a later DUR Board meeting.

Review of Revatio:

B. Joyce reviewed the information provided for Revatio. He mentioned the necessity of the prior authorization in relation to the federal mandate concerning sexual offenders. N. Byers moved to place Revatio on PA. G. Pfister seconded the motion; the motion was approved by voice vote with no audible dissent.

Review of statins:

HID was asked by the Board at the August DUR meeting to bring back, as an agenda item, utilization data, cost analysis and proposed criteria for potential prior authorization of the statin drug class. C. Rieth reviewed the statin class. The point was made that the private sector is requiring their beneficiaries to move towards statins that will soon become generic. Placing the statin class on prior authorization and allowing lovastatin, simvastatin and pravastatin to be preferred, would be a way that ND Medicaid could mirror the private sector. After much discussion, the topic of placing the drug class of statins on prior authorization was tabled.

Public Comment:

There was public comment by Paul Cain, Senior Professional Healthcare Consultant for Pfizer. He spoke against the Board implementing a prior authorization of statins. Scott Anderson spoke, representing Astra Zeneca.

SROA Physician Survey:

At the August DUR meeting, B. Joyce asked the Board to recommend to the Department that he do a survey of the providers to find out diagnoses, directions and whether or not the doctor is using a contract on the patients taking these medications. J. Savageau asked HID to produce a report that indicated the number of single prescriptions for the SROA agents. C. Rieth presented the report of single prn prescriptions as well as a survey and letter to send to providers, for the DUR Board to approve. C. Huber suggested that the rationale for prn use be included as a question on the survey. B. Treitline made a motion to send the SROA letter and survey to physicians prescribing these agents on a prn basis. N. Byers seconded the motion; the motion was approved by voice vote with no audible dissent.

Review of Actoplus met:

C. Rieth reviewed Actoplus met and suggested that the Board place the combination product on prior authorization. Actos alone is a once a day dose; in combination with metformin, there is concern that Actos will become a twice a day dosed medication to ensure appropriate metformin dose. B. Treitline made a motion to place Actoplus met on prior authorization. N. Byers seconded the motion; the motion was approved by voice vote with no audible dissent. This topic will be brought up again at the next Board meeting for finalization.

Public Comment:

There was public comment by Leah Florhaug, representing Takeda. She spoke against the Board implementing a prior authorization on Actoplus met.

Review of Fosamax plus D and Actonel with Calcium:

C. Rieth reviewed Fosamax plus D and Actonel with Calcium and suggested that the Board place these products on prior authorization. The Department does not pay for OTC vitamins and minerals, currently, and anticipate a problem if these combination products are covered. After much discussion, the topic of placing Fosamax plus D and Actonel with Calcium on prior authorization was tabled.

Public Comment:

Shane Redderman spoke, representing Merck. He spoke against the Board implementing a prior authorization on Fosamax plus D.

Review of Recommended Criteria:

B. Joyce advised the Board that the enclosed recommended RDUR criteria are developed from product information provided by the manufactures and usually are consistent with new indications, new drugs added, new warnings, etc. These criteria will be added to the current set of criteria, and will be used in future RDUR cycles. C. Huber moved to approve the new criteria and N. Byers seconded the motion. The motion was approved by voice vote with no audible dissent

C. Rieth suggested the Board set the four quarterly meetings for 2006; 2/5, 5/1, 8/7 and 11/6. These dates were discussed. The February meeting was changed to Feb. 13th, 2006. Chair J. Savageau adjourned the meeting at 3:05pm.