North Dakota Medicaid Drug Use Review (DUR) Board
Meeting Minutes
June 2, 2021

Members Present: Joshua Askvig, Andrea Honeyman, Michael Quast, Kathleen Traylor, Gabriela Balf, Mary Aaland, Amy Werremeyer, Laura Schield, Tanya Schmidt, Peter Woodrow

Medicaid Pharmacy Department: Alexi Murphy, Brendan Joyce

Old Business

Chair A. Honeyman called the meeting to order at 1:07 p.m. Chair A. Honeyman asked for a motion to approve the minutes of the March 3, 2021 meeting. M. Quast moved that the minutes be approved, and J. Askvig seconded the motion. The chair called for a voice vote to approve the minutes. The motion passed with no audible dissent.

Review Top 25 Drugs

A. Murphy presented budget updates and the quarterly review of the top 25 drugs based on total cost of claims, the top 25 drugs based on the total number of claims, and the top drug classes based on claims and cost for the 2nd quarter of 2021. Newly added to the top drug/drug class lists was a column showing the difference from the previous quarter, as requested by the Board. A. Murphy presented data to the Board that was reflective of the changes in the number of patients enrolled in ND Medicaid from January 2020 to March 2021, as well as per member spend, which indicated increased costs to the Medicaid program over the past year have been due to the increased number of enrollees during this time. A Murphy also presented utilization data of select medication classes to the Board to illustrate drug utilization trends during this time. Drug classes presented included Antipsychotics, beta agonists, non-steroidal anti-inflammatory drugs, and antidepressants.

PDL/PA Criteria Updates

A. Murphy shared with the Board all of changes made to the Preferred Drug List since the last version of the Preferred Drug List was posted. Notable changes included the addition of multiple combination agents to the "Kit" PA criteria, as well as adding newly approved agents such as Filphilia, Udenyca, Gemtasa, Epclusa 200-50 mg to already existing PA category criteria. All PDL updates are listed in the handouts for the Junea 2021 DUR Board meeting. When a new version of the PDL is published and posted to the website, all updates/changes made since the last version are called out at the top of the document itself.

Second Review of Agents for the Management of Sickle Cell Anemia

A motion and second was made at the March 2021 DUR Board meeting to place agents for the management of sickle cell anemia on prior authorization. The topic was brought up for a second review. Prior authorization criteria were presented to the Board by T. DeRuiter. During public comment, C. Henderson from Global Blood Therapeutics, Inc. made herself available to the Board for any questions they had. Chair A. Honeyman called for a voice vote to approve the updated criteria, which passed with no audible dissent.

Second Review of Agents for the Treatment of Fabry Disease

A motion and second was made at the March 2021 DUR Board meeting to place agents for the treatment of Fabry disease on prior authorization. The topic was brought up for a second review. Prior authorization criteria were presented to the Board by T. DeRuiter. There were no public comments. Chair A. Honeyman called for a voice vote to approve the updated criteria, which passed with no audible dissent.

Second Review of Imcivree (setmelonotide)
A motion and second was made at the March 2021 DUR Board meeting to place Imcivree (setmelonotide) on prior authorization. The topic was brought up for a second review. Prior authorization criteria were presented to the Board by T. DeRuiter. There were no public comments. Chair A. Honeyman called for a voice vote to approve the updated criteria, which passed with no audible dissent.

Second Review of Bowel Prep Agents
A motion and second was made at a prior DUR Board meeting to place bowel prep agents on prior authorization. The topic was brought up for a second review. Prior authorization criteria were presented to the Board by T. DeRuiter. There were no public comments. Chair A. Honeyman called for a voice vote to approve the updated criteria, which passed with no audible dissent.

Update to the Prior Authorization Criteria for Evrysdi (risdiplam)
At the March 2021 DUR Board meeting, Evrysdi criteria was approved by the Board and the Medicaid Pharmacy Department informed the Board that the criteria would be updated at the following meeting after further discussion with specialists and experts in the treatment of SMA. T. DeRuiter presented the proposed updates to the prior authorization criteria for Evrysdi (risdiplam). The proposed updates included more clearly specifying requirements for confirmation of the patient's diagnosis, requiring the medication be prescribed by or in consultation with a neuromuscular neurologist or neuromuscular physiatrist, clarifying requirements surrounding ventilation/intubation, specifying what medications the patient cannot previously have been treated with, expanding the acceptable baseline motor function tests, requiring neuromuscular clinical information, and consolidating the criteria to apply to all SMA types. J. Whalen from Genentech presented on Evrysdi to the Board and made himself available for questions. A. Murphy proposed that the Board amend the criteria to specify that only patients who have received prior treatment with Zolgensma be excluded from coverage, allowing for coverage for those who had been treated with Spinraza. M. Aaland spoke to concerns they had with allowing coverage for Evrysdi due to concerns with its cost and available trial data. J. Askvig made a motion to amend the criteria to specify that only patients who have received/are receiving Zolgensma should not meet criteria for coverage. A. Werremeyer seconded the motion. Chair A. Honeyman called for a voice vote to approve the amendment, and all but one member voted in the affirmative, with M. Aaland voting against the amendment. A. Werremeyer made a motion to approve the amended criteria, and J. Askvig seconded the motion. Chair A. Honeyman called for a voice vote to approve the updated criteria, which passed with no audible dissent.

Update to the Prior Authorization Criteria for Medications that Cost >$3,000
T. DeRuiter presented proposed updates to the prior authorization criteria for medications that cost >$3,000. The proposed updates included the addition of criteria that requires documentation to confirm serum marker or pathogenic gene variants amenable to treatment, if applicable. There was

no public comment. L. Schield made a motion to adopt the updated criteria and P. Woodrow seconded the motion. Chair A. Honeyman called for a voice vote to approve the updated criteria, which passed with no audible dissent.

Update to the Prior Authorization Criteria for Hepatitis C Treatment Agents

T. DeRuiter presented proposed updates to the prior authorization criteria for agents used to treat hepatitis C. The proposed updates included criteria that eliminated additional drug and alcohol testing for patients with a history of drug or alcohol abuse, lowering the medication adherence timeframe to 90 days, and adding medication-specific criteria for select agents in specified scenarios. P. Woodrow inquired as to who covers incarcerated patients, and A. Murphy clarified they are covered by the department of corrections. P. Woodrow made a motion to approve the updated criteria and L. Schield seconded the motion. Chair A. Honeyman called for a voice vote to approve the updated criteria, which passed with no audible dissent.

New Business

Review of Agents Used in the Treatment of Heart Failure

T. DeRuiter presented a review of agents used in the treatment of heart failure to the Board. There was no public comment. A motion was made by L. Schield to manage these medications through prior authorization. The motion was seconded by A. Werremeyer. Prior authorization criteria for these agents will be presented, reviewed, and voted on by the Board at the next meeting.

Utilization Review of Select Medication Classes

A. Murphy presented utilization data to the board regarding the use of opioid analgesics vs. NSAIDs by family medicine practitioners. T. DeRuiter presented data on the utilization of montelukast, comparing utilization by dose per age, comparing utilization before and after new requirements were implemented that required the appropriate, FDA-approved dose of the medication is being used for the patient's age. The data indicated a significant decrease in the number of patient's receiving the incorrect dose of montelukast since the requirements were implemented (7% of patients vs 0.2% of patients after the change). T. DeRuiter also presented utilization data of CGRP inhibitors and migraine abortive therapies over time. The data indicated that there was a sharp decline in triptan claims in January 2020, however triptan claims have been increasing over time to approach December 2019 levels despite utilization of CGRP inhibitors increasing over time. T. DeRuiter also presented data on the utilization of Xifaxan with and without lactulose, comparing utilization before and after new requirements were implemented that require a PA for Xifaxan for diagnoses other than hepatic encephalopathy, and required concomitant use of lactulose for a diagnosis of hepatic encephalopathy. The data indicated an overall decrease in Xifaxan over this period of time.

Retrospective Drug Utilization Review (RDUR) Criteria Recommendations

T. DeRuiter reviewed the RDUR criteria that were selected for review of each month of the last quarter. Presented data included number of profiles reviewed, number of cases identified for intervention, and the number of letters sent, as well as an overview of what RDUR interventions were identified as most prevalent for each monthly cycle.

Retrospective Drug Utilization Review (RDUR) Criteria Recommendations

The recommended RDUR criteria enclosed in the packet were developed from product information provided by the manufacturers and are consistent with new indications, new drugs added, and new warnings. These proposed criteria will be added to the current set of criteria and will be used in future DUR cycles. A. Werremeyer moved to approve the new criteria and M. Quast seconded the motion. Chair A. Honeyman called for a voice vote to approve the new criteria, which passed with seven members voting to approve and one voting against approval.

Adjournment and Upcoming Meeting Date

Chair A. Honeyman adjourned the meeting at 3:20 pm. The next DUR Board meeting will be held September 1, 2021 at 1:00 pm at the state capitol building.