

**Drug Utilization Review Board
Minutes Draft**

Name of Meeting: Drug Utilization Review Board
Date of Meeting: November 10, 2016
Length of Meeting: 1 hour and 40 minutes
Location of Meeting: DMAS Board Room 13th Floor

Members Present:

Randy Ferrance, MD, Chair	Bill Rock, PharmD, Vice Chair
Avtar Dhillon, MD	Sandra Dawson, RPh
Seth Brant, MD	Michele Thomas, PharmD
Wendy Nash, PharmD	

Members Not Present:

Kathryn Reid, PhD
Jonathan Evans, MD
Denese Gomes, NP

DMAS Attendees:

Donna Proffitt, RPh, Pharmacy Program Manager
Rachel Cain, PharmD
Kathleen Sardegna, MD
Danielle Adeeb, CPhT
Keith Hayashi, RPh

Contractors:

MaryAnn McNeil, RPh, Clinical Pharmacy Manager, Xerox
Tina Carter, CPhT, Xerox

Vendors:

Debbie Moody, RPh, Magellan Health Services
Nancy Eldin, PharmD, Magellan Health Services

Visitors:

Beth Pegram, Vertex	Alice Bowman, Sunovion
Ken Jennings, BMS	Nick Cassotis, Shire
Alain Porté, Walgreens	Cherie Robertson, Pfizer
Audrey Pham, Richmond VAMC	Nicole Abolins, Pfizer
Barbara Exum, VCU School of Pharmacy	
Paula Pitman-Kupresak, Abbvie	

Call to Order and Introductions

Dr. Ferrance called the meeting to order at 2:12pm.

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Meeting minutes were reviewed and approved.

NEW Drugs

Venclexta™ (venetoclax) – M. McNeil presented the drug information and service authorization criteria recommendations for Venclexta. The motion was made to accept the criteria as written with the exception of quantity limitations, request to remove. The Board seconded and approved the criteria.

Xiidra™ (lifitegrast ophthalmic solution) – M. McNeil presented the drug information with the recommendation of P&T Committee review in the PDL process since there are now two drugs (Restasis and Xiidra) in this class. No action required by the Board.

New Drugs: PDL Eligible; Physician-administered - M. McNeil presented the drug information for a New Physician-administered Drug and PDL Eligible Drugs. The PDL eligible drugs were previously reviewed by the P&T Committee. No action required.

Service Authorizations – Descovy® - M. McNeil reported no Service Authorizations for HIV medications have ever been approved by the DUR Board. Based on the Centers for Disease Control and Prevention (CDC) treatment guidelines issued in December 2014, Xerox recommends the review of all drugs used in the treatment of HIV to insure proper utilization and develop clinical criteria for use at the DUR Board meeting in February 2017. The Board requested Xerox research information on how other states manage these drugs. No action taken by the Board.

Topics for Discussion

Analysis of Compounded Prescriptions – M. McNeil presented the data findings as requested by the DUR Board from the August meeting with recommendations. M. McNeil introduced Barbara Exum, PharmD, director of VCU'S Center for Compounding Practice and Research. Dr. Exum stated that many topical compounds have research/study status and have no proven efficacy or evidence base. Board discussions ensued and a motion was made to differentiate the compounded products by cost. All claims over \$500 would require a service authorization. The current recommendation is that all oral compounds would pay at Point-of-Sale (POS). Topical compounds would require a medical review and the criteria would be medical justification based on peer review literature for safety and effectiveness. The Board requested reports from Magellan on the service authorizations requested. The Board seconded and approved the motion. POS system changes would be required to implement the changes. The Board requested the same data report for the February meeting to also include a review of the Florida and Tennessee prescribers who have prescribed compounded products.

Pediatric Narcotic Utilization – M. McNeil presented the pediatric narcotic utilization reports from May 2016 through August 2016. It was noted that there was a dramatic

decrease in the overall number of prescriptions written during this period. The Board requested the reports continue for the February DUR Board meeting with a month to month visual. The Board seconded and approved.

Morphine Equivalent Dosing for Narcotics – M. McNeil presented the data findings with second and third quarter comparisons for Opioid Utilization. It was reported that the impact of the DMAS Opioid limits effective July 1, 2016 have been measurable. Donna Proffitt stated that these numbers have been shared with the Governor of Virginia. The Board requested continued reporting with additional information – by adult patient, prescriber and FIPS code.

Synagis Update – Rachel Cain presented an update on the Synagis program.

CMS Annual Report 2015 – M. McNeil presented the CMS Annual Report for 2015 of Medicaid Drug Utilization Review.

DUR Quarterly Newsletter – M. McNeil presented the quarterly newsletter for September 2016.

Reports

ProDUR and RetroDUR- M. McNeil reviewed reports provided in the DUR Board binder. The Board seconded and approved the RetroDUR topics for the next 3 months- Diabetes, Review of Therapy Duration on GI drugs, benzodiazepines and antidepressants and Underutilization of lipid lowering therapies.

Utilization Analysis Reports- M. McNeil reviewed the Top 25 Drugs Ranked by Claim Count, by Payment Amount and the Cost Utilization Analysis by Drug Type provided in the DUR Board binder. A request was made for utilization reporting of once daily insulin products.

Top Diagnoses by Age- M. McNeil reviewed the Top Diagnoses by Age for all ages provided in the DUR Board binder.

AAP Report- M. McNeil reviewed the report provided in the DUR Board binder. Request was made for trending reports for the next DUR Board meeting.

Meeting was adjourned at 3:52 pm.

Next DUR Board meeting scheduled for February 9, 2017.