

**Drug Utilization Review Board
Minutes Draft**

Name of Meeting: Drug Utilization Review Board
Date of Meeting: September 26, 2019
Length of Meeting: 1 hour and 49 minutes
Location of Meeting: DMAS Board Room Floor 13

Members Present:

Chethan Bachireddy, MD, Chief Medical Officer
Rachel Cain, PharmD, Chair
Bill Rock, PharmD
Wendy Nash, PharmD
Denise Lowe, PharmD
Melissa Chouinard, MD
Seth Brant, MD
Avtar Dhillon, MD
Michele Thomas, PharmD

Members Not Present:

Randy Ferrance, MD
Denese Gomes, NP
Kathryn Reid, PhD

DMAS Attendees:

Donna Proffitt, RPh, Pharmacy Program Manager
Maryann McNeil, RPh, Pharmacist
Danielle Adeeb, CPhT, Pharmacy Contract Administrator

Contractors:

Debbie Moody, RPh, Pharmacist Account Executive, Magellan Health Services
Nancy Eldin, PharmD, Clinical Manager, Magellan Health Services
Jeni Hodzic, CPhT, Lead Formulary Analyst, Magellan Health Services

Visitors:

Kurt Elward, DMAS
Rob Berringer, MCCVA
Brad Burmeister, Gilead
Kevin Mann, Novo Nordisk
Monica Berry, Novo Nordisk
Christina Barrille, Virginia Pharmacists Association
Mark Vaughan, Pfizer

Kristie Bryerton, Sarepta
Jim Farrell, AKCEA
Rebecca Bowers-Lanier, VHF
Dara Kuller, Takeda
Mary Fullerton, Pfizer
Shauna Burns, Sobi
Teri Homes, GW
Bryan Menally, Bayer
Christian Reyes, Optima Health

Call to Order and Introductions

Dr. Rachel Cain called the meeting to order at 2:15 pm.

Minutes – June 13, 2019

A question was brought up in reference to the DUR Board members survey. Dr. Cain will check on the status of mailing out the survey to the DUR Board members.

Meeting minutes were approved as submitted.

DUR Board Updates

Dr. Cain welcomed and thanked everyone for attending the meeting.

She shared that Dr. Chethan Bachireddy is the Chair of the DUR Board but was not able to attend the entire meeting due to a scheduling conflict and designated Dr. Cain to Chair the meeting.

RetroDUR Criteria Estimates

Dr. Cain mentioned that at the last meeting, the DUR Board requested an expanded description for all the criteria. This glossary with the expanded description for all the criteria was posted to the DUR webportal.

Regarding the MCO reports, the individual MCO names will be replaced by a number or letter moving forward, and Dr. Cain directed the board members to not state the MCOs by name at today's meeting, as this is a public meeting.

Dr. Nancy Eldin reviewed the Criteria Exception Estimates Reports with the DUR Board. The reports were broken down to the Top 40 Criteria Exception Estimates by Members and the Top 40 Criteria Exception Estimates by Total Payment Amount for Fee-For-Service (FFS) and each individual MCO plan.

Dr. Eldin noted four criteria that appeared on ALL the Top 40 Criteria Exception Estimates Reports (FFS and MCOs). These four criteria have also been run, discussed and lettered before in the past by the DUR Board.

- Criteria number 7734 – Diabetics without an ACEI or ARB in history was done back in November 2017 and in the process of lettering for September 2019.
- Criteria number 7735 – Atypical Antipsychotics without metabolic testing was lettered in July 2019. A re-review will be done for this in 6 months from lettering.
- Criteria number 7961 – Update for Prescribers: ACC/AHA Guidelines for blood pressure management was lettered in April 2018.
- Criteria number 7910 – Diabetics ages 40 – 75 with no statins was lettered in December 2017.

Members were interested in the following criteria for lettering:

- Criteria number 7856 – High Risk Medications in members 65 or older with 2 claims in 365 days.
- Criteria number 7871 – Non-adherence to antidepressants with a gap in therapy of 10 days.
- Criteria number 7984 – Use of antipsychotics in children < 18 without metabolic testing.
- Criteria number 7773 – Aripiprazole without an FDA approved indication in history in the last 365 days. Dr. Avtar Dhillon requested to add Seroquel®.
- Criteria number 7879 – Non-compliance with anticonvulsant medications.

Dr. Eldin reviewed the Criteria Exception Estimates Report for Lab Values with the DUR Board. The DUR Board requested the new lab value criterion on HbgA1C over 9 with diabetic medications for at least 6 months to be brought back at the next DUR meeting.

New Drugs

Dr. Cain suggested that instead of looking at the utilization of new DUR drugs, to look at diagnosis of the indications for the new drugs.

The DUR Board reviewed Balversa™ (erdafitinib), Dovato® (dolutegravir and lamivudine), Egaten™ (triclabendazole), Nucala® prefilled autoinjector and syringe (mepolizumab), Piqray® (alpelisib) and Vyndaqel®/Vyndamax™ (tafamidis meglumine)/(tafamidis).

The DUR Board discussed the service authorization (SA) criteria and AutoPAs for the drugs in this section. A motion was made and approved to accept the service authorization criteria for Balversa™, Dovato®, Nucala® prefilled autoinjector and syringe, Piqray® and Vyndaqel®/Vyndamax™ as written. A motion was made and approved to have no service authorization criteria for

Egaten™ and to accept the AutoPA criteria for Balversa™ and Piqray® as written.

For Vyndaqel®, a motion was made and approved to accept the service authorization criteria as written with the addition of Vyndamax™.

New Drugs: DUR Drugs with New Generics; DUR Drugs with New Dosage Forms/Strengths; New PDL-Eligible Drugs and New Physician Administered Drugs

The DUR Board reviewed the new drugs in this section.

Dr. Cain stated that we will continue to list the new physician administered drugs in this section. For the next DUR meeting, Dr. Cain will bring back the current list of physician administered drugs criteria from the medical support side.

DMAS will be reviewing the policy on the future handling of physician administered drugs.

Specialty Drugs

Children with Peanut Allergy - The oral peanut allergy pipeline drug (AR101) will be managed by the P&T Committee once it is on the market.

MRx Pipeline - The DUR Board reviewed the July 2019 MRx Pipeline.

The DUR Board requested an impact report for new pipeline oral drug semaglutide. The report will be looking for members who are on injectable GLP-1 receptor agonists.

The DUR Board requested an impact report for new pipeline IV drug crizanlizumab. The report will be looking for members who have ICD-10 codes for sickle-cell disease.

Topics for Discussion

Antihemophilic Drug Factors – A motion was made and approved to remove the service authorization criteria from Hemlibra® and leave the other antihemophilic drug factors without SA criteria.

Synagis – A motion was made and approved to accept the service authorization criteria as is.

Concurrent Use of Opioids and Benzodiazepines – The DUR Board reviewed Concurrent Use of Opioids and Benzodiazepines utilization reports for FFS and MCOs.

Dr. Cain will bring to the next DUR meeting information from the MCOs Annual Report in reference to concurrent use of opioids and benzodiazepines and the ARTS report.

Acetaminophen Doses Greater than 4 Grams – The DUR Board reviewed Acetaminophen Doses Greater than 4 Grams reports for FFS and MCOs.

DUR Quarterly Newsletter – The June 2019 newsletter was provided in the binder for review.

Surveillance

Analysis of Compounded Medications – The DUR Board reviewed the different Analysis of Compounded Prescription reports for FFS and MCOs.

Pediatric and Adult Opioid Utilization – The DUR Board reviewed the 2nd Quarter 2019 Pediatric and Adult Opioid Utilization reports for FFS and MCOs.

Antipsychotic Duplication – The DUR Board reviewed the Antipsychotic Duplication with Antipsychotics report for FFS and MCOs.

Opioid Use with Risk Factors and No Naloxone – The DUR Board reviewed Opioid Use with Risk Factors and No Naloxone reports for FFS and MCOs. A RetroDUR review was completed and letters were mailed in February 2019. The DUR Board requested a report looking at opioid use with risk factors and members that are getting naloxone. The DUR Board will continue to monitor this topic.

Dr. Cain will bring to the next DUR meeting information from the MCOs Annual Report in reference to opioid use with risk factors and no naloxone and the ARTS report.

Reports

ProDUR, RetroDUR and Utilization Analysis Reports – The DUR Board reviewed the standard ProDUR, RetroDUR and Utilization Analysis reports. These reports are requirements for the CMS Annual Report.

The DUR Board requested for the Top Drug Claims Data for Virginia Medicaid FFS report to bring back the number of hits for the Top 5 Claim Denial Reasons.

Next DUR Meetings

December 12, 2019
March 12, 2020
June 11, 2020

September 10, 2020
December 10, 2020

Meeting was adjourned at 4:04 pm.