Drug Utilization Review Board
Minutes Draft

Name of Meeting:	Drug Utilization Review Board
Date of Meeting:	June 11, 2020
Length of Meeting:	3 hours and 3 minutes
Location of Meeting:	Electronic Meeting

Members Present:
Rachel Cain, PharmD, Chair
Randy Ferrance, MD
Denise Lowe, PharmD
Wendy Nash, PharmD
Melissa Chouinard, MD
Michele Thomas, PharmD
Denese Gomes, NP
Kathryn Reid, PhD

Members Not Present:
Chethan Bachireddy, MD, Chief Medical Officer, Chair
Seth Brant, MD

DMAS Attendees:
Donna Proffitt, RPh, Pharmacy Program Manager
Riva Kamat, MD, Pediatric Consultant
Usha Koduru, Counsel to the Board, Office of the Attorney General
Maryann McNeil, RPh, Pharmacist
Danielle Adeeb, CPhT, Pharmacy Contract Administrator
Nettie Emmelhainz, PharmD, Senior Pharmacy Policy and Data Analyst

Contractors:
Debbie Moody, RPh, Director, Clinical Account Services, Magellan Health Services
Nancy Eldin, PharmD, Pharmacist Account Executive, Magellan Health Services

Visitors:
31 representatives from pharmaceutical companies, providers, advocates, associations, etc.

DRAFT

Call to Order and Introductions

Dr. Rachel Cain took a roll call of the Committee members since this is an electronic meeting.

Dr. Michele Thomas motioned to call the DUR meeting to order. Dr. Kathryn Reid seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

Dr. Cain called the meeting to order at 1:05 pm.

Minutes – December 12, 2019

Dr. Reid motioned to approve the meeting minutes as submitted. Dr. Thomas seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

DUR Board Updates

Dr. Cain welcomed and thanked everyone for attending the electronic meeting and provided information about a change for today's meeting that includes having speakers.

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

RetroDUR Criteria Estimates

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 Managed Care Organization (MCO) plan.

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

- Criteria number 7735 – Atypical Antipsychotics without metabolic testing was lettered in July 2019.
- Criteria number 7773 – Aripiprazole without an FDA approved indication in history in the last 365 days was lettered in February 2020.
- Criteria number 7910 – Diabetics ages 40 – 75 with no statins was lettered in December 2017.
- Criteria number 7961 – Update for Prescribers: ACC/AHA Guidelines for blood pressure management was lettered in April 2018.

- Criteria number 22451 – Diabetes and Hypertension (by diagnosis) and no ACEI or ARB in history was lettered in September 2019.

Members were interested in the following criteria for lettering:

- Criteria number 8007: Amphetamine type ADHD medications have a higher risk of psychosis in children and young adults.
- Criteria number 6804: Use of Antibiotics for URI – antibiotic overutilization and resistance.
- Criteria number 7244: FDA Alert: Possible association between use of montelukast and behavior/mood changes, suicidality, and suicide.
- Criteria number 7814: Non-compliance with atypical antipsychotics (oral and IV) with a 10-day gap.
- Criteria number 22437: Members with opioid claims and risk factors without naloxone claims.

Dr. Eldin also reviewed the Criteria Exception Estimates Report for Lab Values with the DUR Board. Dr. Eldin will bring back information pertaining to IT development for the ability to differentiate the members between FFS or MCOs that hit Lab Value criteria with no pharmacy claims.

Dr. Eldin reviewed the Hemoglobin A1C Lab Value Over 9 and On Diabetic Meds for 6 Months Report. The DUR Board requested to have the MCOs run this same report for comparison. The DUR Board requested a report looking at FFS members with a diagnosis of type 2 diabetes in the last 6 months.

New Drugs

The DUR Board reviewed Ayvakit™ (avapritinib), Baqsimi™ (glucagon), Brukinsa™ (zanubrutinib), Fasenra® Pen (benralizumab), Gvoke™ (glucagon), Oxbryta™ (voxelotor), Pretomanid, and Tazverik™ (tazemetostat).

The DUR Board discussed the service authorization (SA) criteria and AutoPA criteria for Ayvakit™. Dr. Denese Gomes motioned to accept the service authorization criteria and Auto-PA criteria for Ayvakit™. Dr. Randy Ferrance seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

The DUR Board discussed adding a drug-drug interaction ProDUR edit for Baqsimi™. The ProDUR drug-drug interaction is in reference to indomethacin and glucagon with the potential for hypoglycemia. Dr. Thomas motioned to accept the drug-drug interaction ProDUR edit for Baqsimi™. Dr. Reid seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

The DUR Board discussed the SA criteria and AutoPA criteria for Brukinsa™. Dr. Reid motioned to accept the service authorization criteria and Auto-PA criteria for

Brukinsa™. Dr. Melissa Chouinard seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

The DUR Board discussed the SA criteria for Fasenra® autoinjector pen. The service authorization fax form also includes the Nucala® prefilled autoinjector and syringe SA criteria. Dr. Eldin mentioned the minimum member age for the Nucala® self-administered formulation for severe asthma will be changed from 6 to 12 years of age. Dr. Reid motioned to accept the service authorization criteria for Fasenra® Pen and to update the minimum member age for a diagnosis of severe asthma for the self-administered Nucala® formulation. Dr. Gomes seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

The DUR Board discussed adding a drug-drug interaction ProDUR edit for Gvoke™. The ProDUR drug-drug interaction is in reference to indomethacin and glucagon with the potential for hypoglycemia. Dr. Chouinard motioned to accept the drug-drug interaction ProDUR edit for Gvoke™. Dr. Gomes seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

The DUR Board discussed the SA criteria for Oxbryta™. Dr. Thomas motioned to accept the service authorization criteria for Oxbryta™. Dr. Reid seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

The DUR Board discussed the SA criteria for Pretomanid. The DUR Board mentioned changing the duration for the initial approval from 6 months to 26 weeks. The DUR Board also mentioned adding a question asking, “Is the prescribing provider a pulmonologist or infectious disease physician or has the provider had a consult recommendation from a pulmonologist or infectious disease physician?” Dr. Thomas motioned to accept the service authorization criteria for Pretomanid with the updates to the initial duration approval from 6 months to 26 weeks and adding the question asking if the prescribing provider is a pulmonologist or infectious disease physician or if the provider had a consult recommendation from a pulmonologist or infectious disease physician. Dr. Gomes seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

The DUR Board discussed the SA criteria for Tazverik™. Dr. Thomas motioned to accept the service authorization criteria for Tazverik™ with NO Auto-PA criteria. Dr. Reid seconded the motion. (Reference Attachment 1 for the Committee Vote Tally)

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

The DUR Board reviewed the new drugs in this section and had no questions.

Specialty Drugs

Crizanlizumab IV Impact Report - Dr. Eldin reviewed the reports showing how many members have a diagnosis of sickle cell and the members total claims across FFS and all the MCO plans.

Semaglutide Oral Impact Report - Dr. Eldin reviewed the reports showing how many members were taking injectable GLP-1 receptor agonist across FFS and all the MCO plans.

MRx Pipeline - The DUR Board reviewed the April 2020, January 2020, and October 2019 MRx Pipeline Reports.

Topics for Discussion

SUPPORT Act Update – Dr. Cain gave a summary of the SUPPORT Act and mentioned how DMAS is already monitoring these issues and has implemented new edits and reports to meet the requirements of the SUPPORT Act.

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

Concurrent Use of Opioids and Antipsychotics - The DUR Board reviewed Concurrent Use of Opioids and Antipsychotics utilization reports for FFS and MCOs. Dr. Cain mentioned the implementation of the new ProDUR edit which sends a soft message to the pharmacist when there is concurrent use of opioids and antipsychotics. The DUR Board requested to look deeper into a particular FFS member who was on very costly antipsychotics and opioids together and see if this member has moved on to an MCO and if the member continues to be on this costly concurrent therapy.

DUR Quarterly Newsletters – The March 2020, December 2019, and September 2019 newsletters were provided in the binder for review.

Surveillance

Opioid Use with Risk Factors and No Naloxone or Getting Naloxone - The DUR Board reviewed Opioid Use with Risk Factors and No Naloxone or Getting

Naloxone reports for FFS and MCOs. The DUR Board requested a report looking at naloxone reversals. The DUR Board requested to letter pharmacists in reference to dispensing naloxone to members with chronic opioid use.

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.

Other Business

The DMAS Addiction and Recovery Treatment Services (ARTS) Summary report and the February 2020 Virginia Commonwealth University ARTS Access and Utilization During the Second Year report were provided in the binder for review.

Speakers

- Wally R. Smith, MD, Florence Neal Cooper Smith Professor of Sickle Cell Disease at Virginia Commonwealth University (VCU) (Oxbryta™)
- Syed Mahmud, MD, Medical Science Liaison, Global Blood Therapeutics (Oxbryta™)

Next DUR Meetings

September 10, 2020 (electronic meeting)
December 10, 2020

Dr. Reid motioned to adjourn the meeting. Dr. Gomes seconded the motion. Dr. Cain adjourned the meeting at 4:08 pm. (Reference Attachment 1 for the Committee Vote Tally)

Attachment 1 – Committee Vote Tally

Committee Vote Taken:	Rachel Cain, PharmD (Chair)	Randy Ferrance, MD	Denise Lowe, PharmD	Wendy Nash, PharmD	Melissa Chouinard, MD	Michele Thomas, PharmD	Denese Gomes, NP	Kathryn Reid, PhD
Called DUR Meeting to Order	A	A	A	A	A	M	A	S
DUR Committee Meeting Minutes from December 12, 2019	A	A	A	A	A	S	A	M
Ayvakit™ Service Authorization Criteria and Auto-PA	A	S	A	A	A	A	M	A
For Baqsimi™ -- Adding a drug-drug interaction ProDUR edit between Baqsimi™ and indomethacin.	A	A	A	A	A	M	A	S
Brukinsa™ Service Authorization Criteria and Auto-PA	A	A	A	A	S	A	A	M
Fasenra® Autoinjector Pen Service Authorization Criteria and Update to the Nucala® Prefilled Autoinjector and Syringe minimum member age from 6 to 12 years of age for a diagnosis of severe asthma.	A	A	A	A	A	A	S	M
For Gvoke™ -- Adding a drug-drug interaction ProDUR edit between Gvoke™ and indomethacin.	A	A	A	A	M	A	S	A
Oxbryta™ Service Authorization Criteria	A	A	A	A	A	M	A	S
Pretomanid Service Authorization Criteria with the updates to the initial duration approval from 6 months to 26 weeks and adding the question to the SA criteria "Is the prescribing provider a pulmonologist or infectious disease physician or the provider had a consult recommendation from a pulmonologist or infectious disease physician?"	A	A	A	A	A	M	S	A
Tazverik™ Service Authorization Criteria with NO Auto-PA criteria	A	A	A	A	A	M	A	S
Motion to Adjourn Meeting	A	X	A	X	A	X	S	M

KEY

M = member made motion

S = member seconded motion

A = member approved

D = member voted against

X = member did not vote