Drug Utilization Review Board Meeting Minutes
February 15, 2006

The West Virginia Medicaid Drug Utilization Review Board meeting was called to order with the following in attendance:

Members Present:
Karen Reed, R.Ph., Chairperson
Chris Terpening, PharmD., Ph.D.
John R. Vanin, M.D.
Mary Nemeth-Pyles, M.S.N., R.N., C.S.
Myra Chiang, M.D.
Steve Judy, R.Ph.
Ernest Miller, D.O.
Lester Labus, M.D.
Kerry Stitzinger, R.Ph.
Pat Regan, PharmD.
Dan Dickman, M.D.

Members Absent:
Kevin Yingling, R.Ph., M.D.
James Bennett, M.D.
George Bryant, PA-C
Bernie Smith, R.Ph., M.B.A., M.H.A.
David Elliott, PharmD.
Mitch Shaver, M.D.
Matthew Watkins, D.O.

DHHR/BMS Staff Present:
Sandra Joseph, M.D., Medical Director
Peggy King, R.Ph., Pharmacy Director
Gail Goodnight, R.Ph., Rebate Coordinator
Vicki Cunningham, R.Ph., DUR Coordinator
Lynda Edwards, Secretary

Contract Staff:
Steve Small, Rational Drug Therapy Program
Craig Boon, ACS/Heritage Information Systems

Interested Parties Present:
AstraZeneca: Debbi Casto
Boehringer Ingelheim: David Large
Elan: Jonathan Williams
Eli Lilly: Steve Wolfarth
GSK: Steve Mitchell, Cindy Snyder
Merck: Bob Kelley
OMJ Pharm: Nick Rebholz
Organon: Tim Stanley
Pfizer: Kent Hunter, Nic Culp, Jeff Borman
Reliant: Geoff Fusco
Sanofi-Aventis: George Aiello
Schering: Rob Marsh
Sepracor: Larry Green
TAP: Judy Ricci
Other: Heather Densmore

I. INTRODUCTIONS

Karen Reed, Chairperson, welcomed everyone to the Board meeting. Members of the Board and interested parties introduced themselves.

II. APPROVAL OF THE November 16, 2005, MINUTES

A motion was made to accept the minutes of the November 16, 2005 DUR Board meeting as written. The motion was seconded and passed unanimously.

III. OLD BUSINESS

A. Report from Nominating Committee and Election of Officers

Karen Reed stated that the Nominating Committee met by e-mail and conference call. The nominees were Dr. Dan Dickman and Dr. Ernest Miller. Dr. Dickman was elected Chairman and Dr. Miller was elected Co-Chairman of the Board.

B. Prior Authorization Criteria for Omacor (See Attachment)
Ms. Reed read the guidelines for Omacor. The criteria was voted on and approved.

IV. NEW BUSINESS

A. Vicki Cunningham stated that the Centers for Medicare and Medicaid (CMS) had issued a directive effective on January 1, 2006 stating that erectile dysfunction agents could no longer be covered by Medicaid. She stated that Revatio would continue to be covered for its approved indication of pulmonary hypertension.

She reported that, as requested by the Board, the Pharmaceutical and Therapeutics (P&T) Committee had reconsidered its recommendation for Concerta. As a result of the recommendation and the second review, Concerta was placed on the Preferred Drug List.

Ms. Cunningham said that the Xopenex information given to them was compiled by Heritage. She directed their attention to graphs showing its utilization. She also commented that the prior authorization criteria adopted at the last meeting would promote better management of asthma. She also said that the Bureau would follow the utilization and provide a report in May regarding provider prescribing habits and PA requests.

B. Review of Changes to Preferred Drug List and PA Criteria Updates

1. **ACE Inhibitor/CCB Combinations:** No changes were made to the PA criteria.

2. **Acne Agents, Topical:** A trial of 30 days of one of the preferred agents in each category will be required before a non-preferred agent will be authorized. (In case of pregnancy, a trial of retinoids will not be required.) Some discussion occurred about the possibility of retinoids being used to treat wrinkles. Since acne agents require prior authorization for members over 17 years of age, it was decided that this would not be a concern.

3. **Analgesics, Narcotic:** No changes were made to the PA criteria.

4. **Angiotensin II Receptor Blockers:** No changes were made to the PA criteria.

5. **Anticoagulants, Injectable:** No changes were made to the PA criteria.

6. **Anticonvulsants:** Treatment naïve patients must have a trial of a preferred agent before a non-preferred agent in its corresponding class will be authorized. Patients stabilized on non-preferred agents will receive authorization to continue these drugs. Additions to that therapy will require a trial of a preferred agent in its respective class unless one of the exceptions on the PA form is present.

7. **Antidepressants, Other:** No changes were made to the PA criteria.

8. **Antihistamines, Minimally Sedating:** No changes were made to the PA criteria.

9. **Antimigraine Agents, Triptans:** No changes were made to the PA criteria.

10. **Beta-Blockers:** No changes were made to the PA criteria.

11. **Bladder Relaxants Preparations:** No changes were made to the PA criteria.

12. **BPH Treatments:** No changes were made to the PA criteria.

13. Calcium Channel Blockers: No changes were made to the PA criteria.

14. Erythropoiesis Stimulating Proteins: No changes were made to the PA criteria.

15. Growth Hormone: No changes were made to the PA criteria.

16. Hepatitis C Agents: No changes were made to the PA criteria.

17. Hypoglycemics, Meglitinides: No changes were made to the PA criteria.

18. Hypoglycemics, TZD: No changes were made to the PA criteria.

19. Lipotropics, Other: No changes were made to the PA criteria.

20. Lipotropics, Statins: No changes were made to the PA criteria.

21. Multiple Sclerosis Agents: No changes were made to the PA criteria.

22. Otic Antibiotic Preparations: No changes were made to the PA criteria.

23. Phospate Binders: No changes were made to the PA criteria.

24. Proton Pump Inhibitors: No changes were made to the PA criteria.

25. Sedative Hypnotics: No changes were made to the PA criteria.

26. Ulcerative Colitis Agents: No changes were made to the PA criteria.

Ms. Cunningham said the changes would implemented on April 1, 2006. A motion was made to accept the criteria. Motion was seconded and passed unanimously.

V. REPORTS

A. Rational Drug Therapy Program

Ms. Cunningham said that the Bureau has received notices from Centers for Disease Control (CDC) regarding resistance to amantadine and flumadine for prophylaxis and treatment of influenza. She said that she had asked a physician from the Department of Epidemiology, in the Bureau for Public Health, to review the prior authorization policy for Tamiflu and Relenza. There was concurrence from her that the prior authorization policy for these two neuraminidase inhibitors was appropriate and would provide access for treatment of documented cases of influenza or prophylaxis in cases of influenza outbreaks. Flumadine has been removed from the preferred drug list. Amantadine will be available only for other indications.

Heritage/ACS Information Systems

Craig Boon stated that yearly reports would be distributed at the next meeting.

He reported on the Psychiatric Coordination of Care intervention that was mailed in May 2005. The purpose was to reduce duplicate therapy, promote dose optimization and appropriate use of these agents. The results were a savings of $160,492.17 during the six-month post-intervention period. Ms. King commented that the treatment of children with atypical antipsychotics and duplication of atypical antipsychotic therapy were two of the most frequent prior authorization appeals received by Dr. Joseph. These requests

require difficult decisions because of the lack of studies and evidence based guidelines in support of these therapies.

Mr. Boon presented the outcome for the diabetes population-based intervention. Profiles of members with a diagnosis of diabetes were reviewed for compliance to the treatment protocols established by the American Diabetes Association. He commented that the differences in the control and target groups were impressive. Ms. Cunningham said this was the first intervention done that included a review for appropriate lab work in addition to drug therapy.

Both Steve Small and Peggy King inquired about an intervention that would educate providers regarding the use of stimulants and sedatives. Mr. Boon said that he would check to see if any interventions had been developed.

B. Fourth Quarter Report-Unisys

There were no comments from the Board regarding the Unisys Report.

VI. OTHER BUSINESS- None

VII. OPEN TO THE FLOOR

There were no comments from the floor. Ms. Cunningham thanked Karen Reed for her outstanding service as Chairperson of the Board during the past four years.

VIII. NEXT MEETING AND ADJOURNMENT

A motion was made and seconded that the meeting be adjourned. All were in favor. The meeting was concluded at 5 p.m. The next meeting will be held on Wednesday, May 17, 2006 from 4:00 p.m. - 6:00 pm.

Respectfully submitted,

Lynda L. Edwards
Secretary