Drug Utilization Review Board Meeting Minutes
November 15, 2006

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

Members Present:
Dan Dickman, M.D., Chairperson
Karen Reed, R.Ph.
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.
Lester Labus, M.D.
Kerry Stitzinger, R.Ph.
Kevin Yingling, R.Ph., M.D.
David Elliott, PharmD.

Members Absent:
Matthew Watkins, D.O.
George Bryant, PA-C
Pat Regan, PharmD.
Ernest Miller, 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
Eric Sears, Unisys

I. INTRODUCTIONS

Daniel Dickman, Chairman, welcomed everyone to the Board meeting. Members of the Board and interested parties introduced themselves.

II. APPROVAL OF THE SEPTEMBER 20, 2006, MINUTES

A motion was made to accept the minutes of the September 20, 2006 DUR Board meeting as written. The motion was seconded and passed unanimously.

III. OLD BUSINESS

A. Zyvox® (linezolid) Prior Authorization Form

Ms. Cunningham said that the form presented for review was a revision of the one currently used by the Rational Drug Therapy Progarm (RDTP). She said that some of the infectious disease specialists in Charleston had requested that it be changed to more clearly specify the attachments that were required and to make the prior authorization process more efficient. She said that the Bureau worked with Steve Small (RDTP) to update and modify the form and ask for the Board's approval. Dr. Yingling reported that the physicians from The Infectious Disease Center in Huntington did not feel that the check-box for intravenous drug abuse was appropriate. He suggested that it should be changed to intravenous drug use since drug abuse is difficult to quantify. A discussion ensued regarding the low number of infectious disease specialists in the state and exempting their requests for Zyvox® from prior authorization. Ms. King commented that our claims system could not exempt providers by specialty. Dr. Joseph commented that prior authorizations were often delayed because of a lack of documentation and little advance planning for discharge from the hospital. Comments were made that this form should help to expedite prior approval when appropriate. A motion was made and seconded to adopt the form. Votes were taken and motion carried.
See Attachment A

B. Polypharmacy Report and Profile Review

Craig Boon, ACS/Heritage, explained that medication profiles were classified as polypharmacy if patients had obtained 10 or more unique prescriptions in a 30-day period. There were 10,000 patients who met that criteria. He told the Board that the profiles provided for their review were examples of polypharmacy and also of the profiles reviewed by the Retrospective Drug Utilization Committee (RetroDUR) monthly. The Committee reviews 300 profiles monthly and operates as a subcommittee of the Board. Profiles are also reviewed for inappropriate utilization of controlled substances and, when appropriate, these patients are referred to the Lock-In Program. He said that the Lock-In Program was an effective tool for curbing doctor shopping and pharmacy hopping.

Ms. King commented that many of the edits in the Prospective Drug Utilization Review Program were generated by these profile reviews. The reviews are very effective for identifying duplications of therapy and duplications of ingredients in medication profiles. She also commented that the claims processing system was very flexible and edits could be changed or added easily.

IV. NEW BUSINESS

Dr. Dickman presented the following items as new business:

A. Calendar for 2007

A motion was moved to approve the schedule of meetings for 2007. Votes were taken and motion carried.
See Attachment A

B. Review of PA Criteria for Ensam®

Dr. Dickman read the draft criteria for Emsam. Suggestions were made regarding trials of categories of antidepressants. Ms. Cunningham said she would make the appropriate revisions and that the revised criteia would be voted on at the next meeting.
See Attachment B

Review of PA Criteria for Daytrana®

Dr. Dickman read the draft criteria for Daytrana. Ms. Cunningham said that the criteria currently used was for a non-preferred agent in the stimulant class on the Preferred Drug List. She said prior authorization for a non-preferrred agent in the stimulant class required a trial of an agent in both categories, amphetamine and non-amphetamine. A Board member asked about the cost of Daytrana® and Ms. Cunningham said that a month's therapy cost $40-$45 more than our most expensive long-acting preferred agent. Ms. Cunningham also said there were 41 requests for this patch in October and some rather emotional letters regarding the advantage of transdermal therapy as opposed to oral. One Committee member asked about the abuse potential of the patch. Board members proposed that a 30 day trial of one of the preferred agents in each stimulant class, excluding Strattera®, be required before the Daytrana® transdermal patches would be approved. A trial would not be considered adequate unless there was evidence that a therapeutically tolerable dose had been achieved. Members also requested that this medication only be approved for children between 6-18 years of age. Ms. Cunningham said she would revise the criteria and that it would be voted on at the next meeting.
See Attachment C

V. REPORTS

A. Heritage Information Systems

Craig Boon presented a population-based educational intervention for appropriate use of Plavix® (clopidogrel) and the performance indicators Heritage would be using for the proposal. One Board member said that patients often continue Plavix® indefinitely. Ms. Cunningham said Medicaid regulations required that physicians write a new prescription every twelve months. She also said that there were about 25,000 utilizers of Plavix® from the ages of 45-84 in the Medicaid program. Ms. King said that the utilization appears to be low because patients over 65 now obtain their prescriptions through Medicare Part D. Dr. Yingling commented that the intervention appeared to focus on overutilization of Plavix® and that it would be appropriate to educate providers about underutilization as well. Mr. Boon replied that he would revise the proposal and present it at the March meeting.

B. Rational Drug Therapy Program

Steve Small did not have a report for the Committee.

C. Third Quarter Report-Unisys

Eric Sears gave an overview of the Unisys Quarterly Report. Ms. Cunningham mentioned that the report showed that the period of prescription coverage for members with dual eligibility (Medicaid and Medicare) was extended because of difficulties with implementation of Medicare Part D at the Federal level A Board member inquired about the comparability of prescription utilization in the West Virginia Medicaid Program with other state Medicaid programs. Ms. King said that Provider Synergies could probably provide a comparison to Louisiana, Maryland or Florida but there were many variables in each state program.

Ms. Cunningham said that carisoprodol would require prior authorization after January 15, 2007 as requested by the Board at a previous meeting. Prior authorization will require a trial of all other available centrally acting muscle relaxants. The Board agreed that this prior authorization criteria was appropriate due to the potential for addiction and street

value of carisoprodol. The Board adopted the prior authorization criteria that was proposed.
See Attachment D

Another Board member commented on the prior authorization criteria for Exubera® that had been adopted at the September meeting. He asked if Board members were aware that Exubera® would only be available for diabetic patients who had a documented fear of injections or had lipodystrophy. Board members commented that this was appropriate criteria for the use of Exubera.

Ms. Cunningham asked Board members to review a disclosure form to be completed by persons requesting to speak to the DUR Board. A motion was made to adopt the form, votes were taken and the motion carried.

Ms. Cunningham said that Karen Reed and Peggy King had received an award for making Outstanding Contributions to the Profession of Pharmacy. They were congratulated by the Board for their achievements.

VI. OPEN TO THE FLOOR

VII.

There were no comments from the floor.

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 6 p.m. The next meeting will be held on Wednesday, March 21, 2007 from 4:00 p.m. - 6:00 pm.

Respectfully submitted,

Lynda L. Edwards
Secretary