Drug Utilization Review Board Meeting Minutes
November 14, 2007

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.
Lester Labus, M.D.
Ernest Miller, D.O.
Myra Chiang, M.D.
K.C. Lovin, PA-C, MS
Greenbrier Almond, M.D.
David Elliott, PharmD.
Kerry Stitzinger, R.Ph.

Members Absent:
Pat Regan, PharmD.
Steve Judy, R.Ph.

DHHR/BMS Staff Present:
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
Joe Paradis, Health Information Designs
Steve Espy, Health Information Designs
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 19, 2007, MINUTES

A motion was made to accept the minutes of the September 19, 2007, DUR Board meeting as written. The motion was seconded and passed unanimously.

III. OLD BUSINESS

A. Conflict of Interest Statements

Dr. Dickman asked the Board members if they had any questions regarding the Conflict of Interest forms in their packets. One member stated that the section on immediate family should say minor children instead of children. He said that their employment should not conflict with his appointment with the Board. Ms. Cunningham stated that the information is given to the Bureau's attorney for review and those concerns would be taken into consideration. If there appears to be a conflict, the member will be asked to refrain from commenting or voting on a particular drug class in order to avoid the appearance of a conflict of interest. Dr. Dickman asked the Board members to complete the Conflict of Interest documents and return them to the Bureau as soon as possible.

IV. NEW BUSINESS

A. Vyvanse Criteria

Dr. Dickman read the draft Vyvanse criteria. Ms. Cunningham stated that the Pharmaceutical and Therapeutics Committee had not reviewed this drug. She asked the Board to review prior authorization criteria because of numerous requests for utilization outside manufacturer dosing and indication recommendations. Many of the requests had been made because providers felt that Vyvanse® had less potential for abuse. There was a lengthy discussion about the package insert and the recommendation contained stating that it should not be used by patients with a history of drug abuse. One Board member stated that the FDA should be notified if the company has been misrepresenting the potential for abuse of the product.

A Board member asked if there were any specialists to consult when there were questions regarding off-label uses and dosages of drugs. Ms. Cunningham responded that the Medical Director, Sandra Joseph, had resigned. However, the Bureau is seeking a specialist for consultations regarding utilization of the mental health drugs.

A motion was made to accept the criteria, motion was seconded, votes were taken and motion carried.
(See Attachment A)

B. Lexapro – Dosage and Quantity Limits

This information was not discussed.

C. Azithromycin Utilization and Limits

HID discussed the utilization of azithromycin. Ms. Cunningham stated that the pharmacists at Rational Drug Therapy Program have reported that azithromycin suspension is being prescribed for 10 days. Because of this, utilization of antibiotics was reviewed. After analysis of data, there did not seem to be significant inappropriate utilization. The problem of antibiotic resistance and the public health crisis that it represents was discussed. A discussion regarding appropriate first-line antibiotics and the lengths of therapy followed.

D. Long-Acting Muscle Relaxants – PA Criteria

Dr. H. R. Henney, Acorda Therapeutics, spoke about long-acting muscle relaxants. He discussed the difference between immediate release and sustained release forms of Zanaflex® (tizanidine). He also discussed the maximum tolerable dose of tizanidine and the need for a sustained release product when the maximum dose of the short acting agent cannot be reached due to somnolence.

Dr. Dickman read the draft criteria for Zanaflex®. Ms. Cunningham said that she was unable to find evidence that Zanaflex® Capsules were more effective that the tablets. One of the Board members said that the capsules seem to cause less somnolence than

the tablet. Ms. King stated that there needed to be evidence of the effectiveness of the capsules, since they are three times more expensive than the generic. Ms. Cunningham called the attention of the Board members to letters sent by providers requesting that Zanaflex® capsules be made available for their patients with conditions causing chronic pain. Members of the Board did not feel that the draft prior authorization criteria was appropriate and asked that Ms. Cunningham develop new criteria for review at the next meeting.

Ms. Cunningham also reported that the FDA had approved Amrix®, a controlled release form of cyclobenzaprine. Although there have been few requests for this agent. It may be necessary to develop prior authorization criteria due to its cost relative to generic cyclobenzaprine.

E. Calendar 2008

The next meeting dates will be:

Wednesday, March 12, 2008
Wednesday, May 14, 2008
Wednesday, September 17, 2008
` Wednesday, November 19, 2008

V. REPORTS

A. Rational Drug Therapy Program

Steve Small gave an overview of the Rational Drug Therapy Program report. He also stated that, in many instances, prescribers are not aware of drugs prescribed by other prescribers for their patients. This often caused therapeutic duplications and excessive doses of medications. Ms. Cunningham said that the Retrospective Drug Utilization Review Committee works to reduce this by individual profile review and communication with prescribers.

Mr. Small reported that Synagis® was being actively marketed during the months of cold and influenza season. He also reported a change in the pharmacy process for members eligible for Mountain Health Choices prescription benefits. Members will have 90 days to enroll in the Enhanced benefit plan and their prescriptions will not be limited to 4/month during their transition period.

B. Retrospective Drug Utilization Vendor – Health Information Designs

Joe Paradis discussed the utilization of azithromycin, concluding that most of the long duration was for children with cystic fibrosis or for the treatment of patients with AIDS. He also reported that many patients with profiles flagged for polypharmacy were diabetic and claims for diabetic supplies were included. The Board suggested that profiles with twenty claims per month, excluding diabetes supplies, be reviewed and prescribers notified regarding the medications received by their patients.

Mr. Paradis also suggested review of medication profiles with excessive quantities of pain medication. The use of methadone for pain management, and the number of deaths associated with methadone, was also discussed. Mr. Paradis proposed a review of profiles with large quantities of short acting opioids, but no long acting agents. It was decided that a pain management educational intervention be done, including review of the utilization of methadone.

Board members made a motion to proceed with two educational interventions, Polypharmacy and Chronic Pain Management. The motion was seconded, votes were taken and the motion carried.

C. Third Quarter Report-Unisys

Eric Sears gave an overview of the Unisys Report.

VI. OTHER BUSINESS

A Board member asked how the savings generated by the Drug Utilization Program was used. Ms. King said it is considered money not spent, but absorbed into the growth of the Pharmacy Program. She stated that the cost of the Medicaid program grew each year. Before the implementation of the PDL, growth was occurring at about 20%. Since the PDL has been implemented, growth has slowed considerably. However, the cost of new drugs, especially the biopharmaceuticals has been astronomical. The object is to slow the growth of the Program. She stated the promotion of generic drugs was cost effective for the Pharmacy Program

VII. OPEN TO THE FLOOR

No comments were made from the floor.

VIII. NEXT MEETING AND ADJOURNMENT

Ms. King stated that the P & T Committee wanted to have a hookup for their laptops and no paper copies. The Board decided they would like to have their packets e-mailed to them and a hard copy waiting for them at the meeting.

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 12, 2008, from 4:00 p.m. - 6:00 p.m.

Respectfully submitted,

Lynda L. Edwards
Secretary