Drug Utilization Review Board Meeting Minutes
September 16, 2009

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

Members Present:
Steve Judy, R.Ph, Acting Chairman
Myra Chiang, M.D.
Karen Reed, R.Ph.
Pat Regan, PharmD.
Chris Terpening, PharmD, Ph.D.
John R. Vanin, M.D.
Mary Nemeth-Pyles, MSN, RN, CS.
Lester Labus, M.D.
K.C. Lovin, PA-C

Members Absent:
Ernest Miller, D.O, Chairman
Scott Brown, R.Ph, Co-Chairman
Dan Dickman, M.D.
David Elliott, PharmD.
Kerry Stitzinger, R.Ph.
Greenbrier Almond, M.D.

DHHR/BMS Staff Present:
Peggy King, R.Ph, Pharmacy Director
Vicki Cunningham, R.Ph, DUR Coordinator
Gail Goodnight, R.Ph, Rebate Coordinator
William Hopkins, Pharmacy Operations Manager
Lynda Edwards, Secretary

Contract Staff:
Steve Small, R.Ph. Rational Drug Therapy Program
Zack Metheny, R.Ph. Rational Drug Therapy Program
Laureen Biczak, M.D, Goold Health Systems, Inc.
Steve Espy, R.Ph, Health Information Designs
Eric Sears, R.Ph, Unisys

I. INTRODUCTIONS

Steve Judy welcomed everyone to the Board meeting. Members of the Board and interested parties introduced themselves.

II. APPROVAL OF THE JUNE 3, 2009 MINUTES

A motion was made to accept the minutes of the June 3, 2009 DUR Board meeting as written. The motion was seconded and passed unanimously.

III. OLD BUSINESS

A. Letter to prescribers regarding Seroquel 25 mg.

Ms. Cunningham indicated that the letter included in the Old Business section was sent to related prescribers regarding the use of Seroquel 25 mg. as monotherapy for the treatment of schizophrenia and bipolar disorder. This was included so that Board members would have a sample of the intervention letter.

IV. NEW BUSINESS

A. Update from P & T Meeting on August 19, 2009

Steve Judy stated that the Proton Pump Inhibitor (PPI) Class was reviewed at the most recent Pharmaceutical and Therapeutics Committee meeting. Nexium and Kapidex will be preferred as of October 1, 2009. Ms. Cunningham said that treatment naïve patients will be required to have trials of those two agents before a non-preferred PPI would be approved. Clients already established on non-preferred agents will have until January 1, 2010 to have their prescriptions for Prevacid changed to Kapidex or Nexium. (See Attachment B)

B. Covered Cough and Cold Agents and Criteria for Prenatal Vitamins (Non-Preferred)

Ms. Cunningham stated that the Board had previously looked at the Cough and Cold Product category. Medicaid is not required to cover agents in this category, but chooses to provide coverage on a limited basis. A list of covered items in the category was presented.

A list of preferred prenatal vitamins was also reviewed. Prior authorization (PA) criteria for the non-preferred vitamins have not been established. At the last meeting, the Board suggested that requests be reviewed before establishing criteria for non-preferred agents. Steve Small furnished information regarding reasons for requests for the non-preferred agents. Ms. Cunningham then suggested PA criteria. A motion was made to accept the criteria. The motion was seconded and passed unanimously. (See Attachment C)

C. Neuraminidase PA Criteria Changes

Ms. Cunningham said that the Centers for Disease Control (CDC) guidelines have been followed for the neuraminidase inhibitors prior authorization criteria and had been put on the website, along with a link to the CDC flu website. In accordance with those guidelines, a flu test is no longer required for authorization for these agents. The criteria have been entered in the Auto PA System. A motion was made to accept the criteria as written. The motion was seconded and passed unanimously. (See Attachment D)

D. Synagis Criteria Changes

After the proposed prior authorization criteria were read by Mr. Judy, Ms. Cunningham stated that the changes recommended were also recommended by the American Academy of Pediatrics. She also proposed a change to the start of the Respiratory Syncytial Season (RSV) from October 15 to November 1. Ms. Cunningham said Dr. Chiang had contacted the pediatric infectious disease specialists at Women's and Children's Hospital to ask for an opinion regarding the proposed changes. Dr. Chiang said that her colleagues agreed with the proposed changes, which only affect infants

born prematurely whose gestational age falls between 32-35 weeks. A motion was made to accept the criteria as written, with the addition of the proposed November 1 guideline as the beginning of the RSV season in West Virginia. The motion was seconded and passed unanimously. (See Attachment E)

E. Byetta and Januvia Automated PA Policy

Steve Judy read the current prior authorization criteria for Byetta. Ms. Cunningham said there is no clinical information that supports the effectiveness of Byetta and insulin use concomitantly. There is also no clinical information that demonstrates effectiveness of Januvia and insulin when prescribed concomitantly. Since these agents have similar mechanisms of action, she asked the Board to consider the proposed criteria for denial of Januvia prescribed with insulin. Ms. Cunningham said that there would be a letter with a 60-90 day period for the prescriber to adjust medications for patients on this combination of therapy. A motion was made to accept the criteria as written. The motion was seconded and passed unanimously. (See Attachment F & G)

F. Abilify for MDD PA Criteria Changes

Mr. Judy read the proposed changes to the prior authorization criteria for Abilify for the treatment of Major Depressive Disorder. The new criteria require a trial of one drug in at least two of three classes of antidepressants, the SSRIs, SNRIs, and bupropion. A motion was made to accept the criteria as written. The motion was seconded and passed unanimously. (See Attachment H)

G. Review of Limits Policy

A limits document has been posted on the BMS Pharmacy website and was presented to the Board for review. Ms. Cunningham stated that these limits were implemented to encourage appropriate dosing regimens and to prevent incorrect quantity billings for agents whose dosage forms or sizes cause errors in billing submissions.

V. REPORTS

A. Rational Drug Therapy Program

Steve Small, Director of the Rational Drug Therapy Program (RDTP), distributed a handout of his slide presentation. He discussed the June, July and August 2009 reports on prior authorizations, edit overrides, early refills, duplications of therapy and appeals.

B. Health Information Designs

Steve Espy gave an overview of his slide presentation. It included the utilization of muscle relaxants and narcotics, medication non-adherence for diabetics, and a proposal for educating prescribers who prescribe drugs for Alzheimer's disease or dementia without a supporting diagnosis.

C. Unisys Second Quarter Report

Eric Sears gave an overview of the Unisys Second Quarter Report.

VI. OTHER BUSINESS

No other business was discussed.

VII. OPEN TO THE FLOOR

Larry Grogan, a representative from Medimmune, spoke about the new criteria recommended by the American Academy of Pediatrics for Synagis and adopted by the Board. He expressed concern that the studies to support this criteria change were not available and that some children who were born at 32-35 weeks of gestation might be at risk with the dosage regimen adopted.

VIII. NEXT MEETING AND ADJOURNMENT

A motion was made and seconded to adjourn the meeting. All were in favor. The meeting was concluded at 5:45 p.m. The next meeting will be held on November 18, 2009, from 4:00 p.m.-6:00 pm.

Respectfully submitted,

Lynda L. Edwards,
Secretary