

South Dakota Department of Social Services, Division of Medicaid Services Pharmacy & Therapeutics (P&T) Committee Meeting Minutes

Friday, September 23, 2022

1:00 – 3:00 pm CT

Members and DSS Staff

Michelle Baack, MD	X	Heather Preuss, MD	-
Dana Darger, RPh, Chair	X	Matthew Stanley, DO	-
Mikel Holland, MD	X	Deidre Van Gilder, PharmD	X
Bill Ladwig, RPh	X	Mike Jockheck, DSS Staff	X
Kelley Oehlke, PharmD	X	Matthew Ballard, DSS Staff	X
Lenny Petrik, PharmD	-	Sarah Aker, DSS Staff	X

Administrative Business

Darger called the meeting to order at 1:03 pm. The minutes of the June meeting were presented. Baack made a motion to approve. Van Gilder seconded the motion. The motion was unanimously approved.

Prior Authorization Update (PA) and Statistics

The committee reviewed the PA activity report from April 1, 2022, to June 30, 2022. A total of 1,791 PAs were reviewed of which 117 requests (6.5%) were received via telephone and 1,031 requests (57.6%) were received via fax, and 663 (35.9%) were reviewed via electronically. There was a 3.2% increase of PAs received compared to the previous quarter.

Analysis of the Top 15 Therapeutic Classes and Drug Spend

The committee reviewed the top 15 therapeutic classes by total cost of claims from April 1, 2022, to June 30, 2022. The top five therapeutic classes based on paid amount were atypical antipsychotics, disease-modifying anti-rheumatic agents, skin and mucous membrane agents, cystic fibrosis correctors, and hemostatics. These top 15 therapeutic classes make up 25.12 % of total claims. The committee also reviewed the top 50 drugs based on amount paid and number of claims. The top 50 drugs by amount paid make up 9.38 % of total claims. Of note, Opsumit made its debut on the top 50 drugs by paid amount. There was a comment regarding Eliquis starter kit. Darger requested to presentation on biosimilars and bioidenticals. Darger inquired if there was any public comment. There was none.

Old Business

Performance Measures

Samantha Moon from the Department of Medical Services provided follow up on two Performance Measures that the State is tracking: Care for Children Prescribed ADHD Medications: Ages 6-12 years old and Metabolic Monitoring for Children and Adolescents on Antipsychotics: Ages 1-17 years old. Committee discussed ways to ensure appropriate follow up care. Committee to discuss a possible PA renewal requirement at the next meeting. Darger inquired if there was any public comment. There was none.

Narrow Therapeutic Index Drugs

The committee reviewed the NTI utilization. Ladwig questioned the need for NTI list. Darger cited many states not having an NTI list anymore. After discussion, Ladwig made a motion to remove the NTI list.

Baack seconded the motion. Darger inquired if there was any public comment. There was none. The motion was approved unanimously. Van Gilder initiated discussion on adding PA to levothyroxine capsules. Ladwig made a motion to PA the capsule. Holland seconded the motion. Jockheck inquired about the criteria, for example, the trial and failure of a tablet before capsule is allowed over 180 days. Discussion ensued that most members would meet this requirement since most would have been on therapy for years. Committee will be provided more in-depth analysis especially how many claims are submitted with DAW 1 before removing the NTI drug list and PA on levothyroxine tablets.

Oseltamivir

The committee reviewed the NTI utilization. Jockheck reminded the committee oseltamivir's debut on the Top 50 drug list by paid amount last quarter. Committee commented utilization looked appropriate. Darger inquired if there was any public comment. There was none.

Xifaxan

Darger provided background information on the Xifaxan review. There is no utilization for Xifaxan 200mg due to a drug shortage, but three 200mg tablets are cheaper than one 550mg tablet. Since the diagnosis is coded directly with the drug strength, Van Gilder made a motion to remove specific strength to diagnosis. Baack seconded the motion. Darger inquired if there was any public comment. There was none. The motion was approved unanimously.

Sedative Hypnotics – doxepin

The committee reviewed doxepin utilization. No recommendation was given.

Vuity

The committee reviewed Vuity utilization. Baack recommended reviewing Vuity at the March 2023 meeting.

Opioid and muscle relaxant combination

The committee reviewed opioid utilization of members taking over 90 MME and members taking opioid in combination with muscle relaxants. No recommendation was given.

Opioid and stimulant

The committee reviewed opioid utilization of members taking over 90 MME and stimulant combination. No recommendation was given.

Opioid update

The committee reviewed 2Q2022 opioid outcomes compared to previous quarters from the opioid initiatives. The opioid figures for 2Q2022 excluded IHS utilization with the last similar comparison during 4Q2019. There was a decrease in opioid utilization and utilizers during 2Q2022 compared to 4Q2019 even with an increase in total eligible members.

Darger inquired if there was any public comment. There was none.

New Business

Fleqsuvy

Fleqsuvy clinical information was presented for review. Baack recommended reviewing utilization at the March 2023 meeting. Darger inquired if there was any public comment. There were none.

Selgentis

Seglentis clinical information was presented for review. Committee recommended reviewing utilization at the March 2023 meeting. Darger inquired if there was any public comment. There were none.

Adjournment

The next meeting is scheduled on December 2, 2022. The March meeting is tentatively scheduled for March 24, 2022. The Committee made a motion to adjourn the meeting, and everyone seconded the motion. The motion passed unanimously, and the meeting adjourned at 2:52 pm.