

**Minutes of the September 5, 2008
Pharmacy & Therapeutics (P&T) Committee Meeting
SD Department of Social Services, Medical Services Division**

Members present

Verdayne Brandenburg, M.D.; Dana Darger, R.Ph.; William Ladwig, R.Ph.; Dennis Hedge, PharmD.; Willis Sutliff, M.D.; Rick Holm, M.D.; Galen Goeden, R.Ph.; Debra Farver, PharmD.; Timothy Soundy, M.D.

Members absent

James Engelbrecht, M.D.

DSS staff present

Mike Jockheck, R.Ph.; Larry Iversen

HID staff present

Candace Rieth, Pharm.D.

Administrative Business

The P&T meeting was called to order by chair, D. Darger, at approximately 1pm. The minutes of the June 20, 2008 meeting were presented. V. Brandenburg made a motion to approve as written, with a second by W. Sutliff. The motion was approved unanimously. L. Iversen introduced Debra Farver, PharmD, and Timothy Soundy, MD, who have both recently been appointed by the governor to serve on the P&T committee.

L. Iversen spoke regarding future meeting venues. P&T Committee meetings are typically held on a quarterly basis and several committee members as well as State employees fly to Sioux Falls to attend. In an effort to contain costs, the State anticipates that at least two meetings a year will be held in a location equipped with teleconferencing capabilities. The teleconferencing equipment will be available in Sioux Falls, Pierre, and Rapid City. Information regarding the location of future meetings will be posted on the HID SD Medicaid website. The next P&T meeting date will be December 12, 2008.

Prior Authorization Statistics

C. Rieth presented an overview of the prior authorization (PA) activity for April, May and June, 2008. There were a total of 1,337 PAs processed in the month of April, with 99.10% of those requests responded to in less than 8 hours. There were a total of 1,644 PAs processed in the month of May, with 98.48% of those requests responded to in less than 8 hours. There were a total of 1,655 PAs processed in the month of June, with 99.21% of those requests responded to in less than 8 hours. In April, there were 1,134 (85%) requests received electronically and 203 (15%) received by fax. In May, there were 1,478 (90%) requests received electronically and 166 (10%) received by fax. In June, there were 1,466 (89%) requests received electronically and 189 (11%) received by fax. In response to a request from the committee, C. Rieth presented the number of approvals and denials, by form type, for the faxed (manual) PA requests.

Analysis of the Top 15 Therapeutic Classes

C. Rieth reviewed the Top 15 Therapeutic Classes by total cost of claims from 01/01/2008 – 03/31/2008. The top five classes were antipsychotics, anticonvulsants, cerebral stimulants, monoclonal antibodies, and antidepressants.

Committee members requested additional information on the antipsychotics, anticonvulsants, cephalosporins, and antidepressants. C. Rieth presented the analysis of these classes including cost per script, number of prescriptions, and age of patients. Committee members asked for percentage spends of antipsychotics, anticonvulsants, and antidepressants in other State Medicaid programs. This information was presented.

Committee members asked for information regarding duplicate antipsychotic utilization. This information will be presented at the next meeting. M. Jockheck suggested the committee implement quantity limits based on the FDA guidelines for maximum dosing. Suggested quantity limits will be presented at the next P&T meeting.

Invega Review

C. Rieth presented the drug review and utilization for Invega, an antipsychotic indicated for the acute and maintenance treatment of schizophrenia. D. Mantella, representing Ortho McNeil Janssen, spoke about Invega. He suggested that patients that are rapid metabolizers of Risperdal as well as patients with hepatic dysfunction are good candidates for Invega therapy, since this medication is renally excreted. P. Arends, representing NAMI, spoke against prior authorization of all medications. K. Oehlke, PA-C, spoke against prior authorizing antipsychotics and antidepressants. Committee members asked that reports comparing Risperdal utilization and Invega utilization be brought to the next meeting. Members also requested the specialty of providers prescribing these agents, the number of patients that have taken Risperdal prior to Invega and the diagnoses of patients. This information will be presented at the next P&T meeting.

Antidepressant Review

C. Rieth presented information regarding the Wyoming Medicaid antidepressant step therapy initiative. Wyoming sent two provider letters asking for guidance in the development of the step therapy process. The step therapy program was implemented August 1, 2008. W. Sutliff made a motion to develop a tier system for antidepressants. V. Brandenburg seconded the motion. A provider letter will be developed for the next meeting.

Singulair Review

In response to a previous request from the committee, C. Rieth presented information regarding diagnoses codes submitted on patients utilizing Singulair. Committee members requested further analysis of the 1,442 patients that had none of the diagnoses codes related to asthma, allergic rhinitis, exercise induced bronchospasm, laryngotracheobronchitis, or reactive airway disease. Committee members suggested that the data include diagnosis codes for the past 2-3 years. This information will be presented at the next P&T meeting.

Medications for Head Lice

C. Rieth presented the drug class review and utilization for medications used to treat head lice. There was no public comment. A motion was made by B. Ladwig to place lindane and malathion on prior authorization. G. Goeden seconded the motion. The prior authorization of lindane and malathion will begin as soon as providers are notified.

New Business

C. Rieth reviewed Opioid utilization with committee members. This topic will be discussed at future meetings.

Because of time restraints, it was requested that the meeting be adjourned. All topics that were not discussed will be tabled until the December meeting. The next meeting date is December 12, 2008. The location will be sent to members and interested parties as soon as possible. The SD Medicaid P*T meeting was adjourned at 3:10pm.