Minutes of the December 10, 2010 Pharmacy & Therapeutics (P&T) Committee Meeting SD Department of Social Services, Medical Services Division

Members present

Bill Ladwig, R.Ph.; Rick Holm, M.D.; Debra Farver, PharmD.; Verdayne Brandenburg, M.D.; Willis Sutliff, M.D.; Galen Goeden, R.Ph.; Dana Darger, R.Ph.; James Engelbrecht, M.D.

Members absent

Timothy Soundy, M.D.; Dennis Hedge, PharmD.

DSS staff present

Mike Jockheck, R.Ph.; Larry Iversen

HID staff present

Christina Faulkner, PharmD.

Administrative Business

The P&T meeting was called to order by D. Darger at approximately 1:00pm. The minutes of the September 10, 2010 were presented. B. Ladwig made a motion to approve. R. Holm seconded the motion. The motion was approved unanimously.

Prior Authorization Update and Statistics

C. Faulkner presented an overview of the prior authorization (PA) activity for the month of September 2010. There were a total of 2,343 PAs processed in the month of September, with 99.66% of those requests responded to in less than 8 hours. There were 2,032 (87%) requests received electronically and 311 (13%) requests received by fax.

- C. Faulkner reviewed the Top 15 Therapeutic Classes by total cost of claims for 3^{rd} quarter 2010 (07/01/2010 to 09/30/2010). The top five classes were antipsychotics, cerebral stimulants, amphetamines, beta-adrenergic agonists, and antidepressants. The top 15 therapeutic classes make up 41.53% of total claims.
- C. Faulkner reviewed the Top 25 Drugs based on the number of claims and total claims cost for 3rd quarter 2010. D. Darger asked if there were any advantages to the state using Symbicort over Advair. M. Jockheck said that he would check and update the committee during the March meeting.

Patent Expiration Update

C. Faulkner presented an updated patent expiration list, including only those items that will have generics available in the next two years. D. Darger requested that HID review the use of Patanol and Pataday. B. Ladwig requested that the list be indexed with information on number of prescriptions and Medicaid spend.

High Cost/Low Utilization Drugs

C. Faulkner presented an updated list of the top drugs by dollar total (over \$1,000) for 2009. The drugs included currently have no prior authorization requirement. The committee requested that HID review the diagnoses for Oxycontin and to review the diagnoses and ages for patients using caffeine citrate oral solution. D. Darger requested that the diagnoses for Zyvox be reviewed. R. Holm requested that the quantity per prescription be included with the Zyvox information. The committee requested that HID review medications for multiple sclerosis (MS) and pulmonary hypertension (including treatment guidelines) at the March meeting.

Statin Update

The committee discussed the statins and determined that, because utilization is highest with simvastatin (which is generic) and Lipitor (patent expiring), that there would be no reason to place any of these drugs on prior authorization at this time.

Isotretinoin Review

C. Faulkner presented clinical information and data for isotretinoin. The committee requested additional information regarding the use of isotretinoin because patients, prescribers, and pharmacies are required to be enrolled in the iPLEDGE program and are closely monitored. D. Darger requested that HID determine what type of providers are prescribing isotretinoin and W. Sutliff requested information regarding the diagnosis of patients who are currently taking the medication.

Triptan Review

C. Faulkner presented clinical information and data for the triptan class. G. Goeden discussed medications for migraine prophylaxis versus acute treatment with triptans. B. Ladwig requested that the DUR Board review this topic. D. Darger made a motion to place a prior authorization on Treximet and Maxalt. J. Engelbrecht seconded the motion, requesting that prior authorization criteria and forms be brought to the March meeting. Barbara Felt, representing GSK, spoke against prior authorization of Treximet. Merck will speak regarding Maxalt at the March meeting. After discussion, the motion was withdrawn.

Ampyra Review

C. Faulkner presented clinical information and data for Ampyra. D. Farver requested that HID do a class review of the medications for multiple sclerosis. Injections and oral medications, total costs, and specialties of prescribing physicians should be included. B.

Ladwig also requested that compliance data be included. The topic was tabled. Caroline Jones, representing Acorda, spoke about Ampyra.

Tyvaso Review

C. Faulkner presented clinical information and data for Tyvaso. D. Farver requested that HID do a class review of the medications used for treatment of pulmonary hypertension. The topic was tabled.

Oravig Review

C. Faulkner presented clinical information and data for Oravig. D. Farver recommended that Oravig require a prior authorization. Failed therapy should include clotrimazole troches, fluconazole, and/or nystatin suspension. V. Brandenburg seconded the motion. There was no public comment. The motion was approved unanimously.

Gilenya Review

C. Faulkner presented clinical information regarding Gilenya. The topic was tabled, pending class review.

Zuplenz Review

C. Faulkner presented clinical information regarding Zuplenz. B. Ladwig requested a class review with utilization data, including data regarding Sancuso patch. R. Holm seconded the motion. There was no public comment. The motion was approved unanimously.

Qualaquin Review

C. Faulkner presented clinical information regarding Qualaquin. G. Goeden made a motion that Qualaquin require a prior authorization and be approved only for patients with a diagnosis of malaria. J. Engelbrecht seconded the motion. There was no public comment. The motion was approved unanimously.

DUR Update

The committee requested that DUR updates be given during the P&T meeting. D. Helgeland reported that he had reviewed 500 patients taking stimulants and found 3 patients taking 3 or more stimulants. These patients will receive DUR letters. D. Helgeland briefly reviewed the Texas algorithm for treatment of patients with stimulants.

New Business

L. Iversen announced that W. Sutliff will be leaving the committee after a replacement is found. V. Brandenburg announced that he is resigning from the committee as well. L. Iversen thanked both for their dedication to the South Dakota Medicaid program.

The next meeting date is scheduled for March 4, 2011. The location will be updated on the website as soon as possible. A motion was made by D. Darger at approximately

2:30pm to adjourn the SD Medicaid P&T meeting. B. Ladwig seconded the motion. Motion passed unanimously and the meeting was adjourned.