

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

Friday, June 21, 2019

1:00 – 3:00 pm CT

Members and DSS Staff

Michelle Baack, MD	X	Kelley Oehlke, PharmD	
Dana Darger, RPh	X	Lenny Petrik, PharmD	X
James Engelbrecht, MD		Timothy Soundy, MD	
Deidre Van Gilder, PharmD	X	Mike Jockheck, DSS Staff	X
Mikal Holland, MD		Sarah Akers, DSS Staff	X
Richard Holm, MD	X	Bill Snyder, DSS Staff	X
Bill Ladwig, RPh, Chair	X		

Administrative Business

Darger called the meeting to order at 1:03 PM. The minutes of the March meeting were presented. Holm made a motion to approve and Van Gilder seconded the motion. The motion was approved unanimously.

Prior Authorization Update (PA) and Statistics

The committee reviewed the PA activity report from January 1, 2019 to March 31, 2019. A total of 2,112 PAs were reviewed of which 347 requests (16%) were received via telephone and 1,166 requests (55%) were received via fax, and 597 (22%) were reviewed electronically.

Analysis of the Top 15 Therapeutic Classes and Drug Spend

The committee reviewed the top 15 therapeutic classes by total cost of claims from January 1, 2019 to March 31, 2019. The top five therapeutic classes based on paid amount were atypical antipsychotics, amphetamines, anticonvulsants, and respiratory and CNS stimulants. The top 15 therapeutic classes make up 25.96% of total claims. The committee also reviewed the top 50 drugs based on total claims cost and number of claims. The top 50 drugs by claims cost make up 15.49% of total claims.

Old Business

Committee reviewed the calcitonin gene related peptide (CGRP) utilization comparing 4Q18 vs 1Q19. Utilization continues to increase each quarter. Committee also reviewed utilization for Orilissa for 1Q19. Committee requested to review utilization for both classes again at the next meeting.

Committee reviewed the CiproDex utilization for 1Q19. After in-depth reviews over several quarters, Committee was satisfied with the utilization.

Committee reviewed the attention-deficit-hyperactivity-disorder/attention deficit disorder (ADHD/ADD) utilization for 1Q19. Committee wanted to further explore utilization for adults 26 years of age and older only. Utilization to include prescriber specialty, diagnosis; and concurrent therapy for opioids, benzodiazepines, and stimulants.

Committee reviewed criteria consideration for Dupixent and recommended a trial and failure of ICS and controller medication for asthma diagnosis. Baack made a motion to approve and Van Gilder seconded the motion. The motion was approved unanimously.

Committee reviewed criteria consideration for Actemra and recommended to accept clinical diagnosis for Giant Cell Arteritis instead of requiring a biopsy, a trial of oral or parenteral corticosteroid, and rheumatologist consult. Baack made a motion to approve and Holm seconded the motion. The motion was approved unanimously.

New business

Committee reviewed the utilization for Hepatitis C for the time-period 2014 through May 2019. The Committee also discussed updating the criteria for coverage of hepatitis C treatments to:

1. Female patient prescribed ribavirin must have a negative pregnancy test within thirty days prior to initiation of therapy and monthly during treatment.
2. Age of patient must be equal to or greater than the age indicated for the drug requested.
3. The drug requested must match the approved genotype for that drug.
4. Treat reinfections using these same criteria.

Hannah Wenger, staff physician from Rosebud Service Unit, Indian Health Service spoke regarding her experience treating the hepatitis C population at Rosebud. Brent Hildebrand from Gilead spoke regarding the pediatric age labeling starting at 12 years of age for Harvoni and Sovaldi and no pediatric age labeling currently for Epclusa. Margaret Olmon from AbbVie spoke regarding the FDA approval for an age indication of 12 years old and older for Mavyret; and provided information on a possible new indication for treatment naïve patients with compensated cirrhosis therapy decreasing from 12 weeks to 8 weeks. Jessica Leston, HCV/HIV Clinical Programs Director of Northwest Portland Area Indian Health Board, shared a letter from a mother about her daughter on the risks of opioid addiction and contracting hepatitis C.

Jockheck clarified the recommended criteria and stated he would provide the Committee's recommendation to the Department of Social Services executive management for consideration. Holm made a motion to approve and Baack seconded the motion. The motion was approved unanimously.

Committee reviewed utilization for triptans. Some generics are still on step therapy. Jockheck clarified if the Committee wanted to remove generics from step therapy. Baack made a motion to remove generics from step therapy and Van Gilder seconded the motion. The motion was approved unanimously.

Committee reviewed outcomes reporting for the opioid initiatives implemented in 2018. In reviewing the opioids utilization snapshot, Jockheck presented outcomes comparing 1Q18 to 1Q19. The number of opioid claims, opioid utilizers, the use of poly pharmacies, and poly prescribers have all decreased. The Committee was excited and pleased with the opioid outcomes. Darger requested the opioid snapshot reports to be included at the next meeting.

The next meeting is scheduled for September 27, 2019. Tentative meeting date for December is December 13, 2019. Darger signified the meeting was adjourned by everyone leaving. The motion passed unanimously and the meeting adjourned at 3:35 PM.