

## **DRUG UTILIZATION REVIEW BOARD**

**April 18, 2012**

**James C. Kirkpatrick State Information Center, 600 West Main Street, Jefferson City MO**

### **DUR BOARD MEMBERS PRESENT**

Susan Abdel-Rahman, PharmD  
Charlene Heyde, RPh  
Sandra Bollinger, PharmD  
Kenneth Haller, MD  
Glenn Talboy, MD  
Ginger Nicol, MD  
Randy Beckner, PharmD

### **DUR BOARD MEMBERS ABSENT**

Jennifer Passanise, ANCC-BC, FNP  
Stacy Mangum, PharmD  
Kirk Nelson, MD

### **MHD STAFF PRESENT**

Rhonda Driver, RPh, Director of Pharmacy  
Mark Roaseau, RPh, Clinical Pharmacist  
Tasia Roberts, Administrative Assistant  
Whitney Maloy, Sr. Office Support Assistant  
Ashley Wilson, DUR Coordinator  
Andrew Haslag, Fiscal Manager  
Jayne Zemmer, Program Manager  
Jenna Twehus, RN  
Angela Wilson, Pharmacy Unit Supervisor  
Allison Lauf, RN  
Mary Heet, RN

### **CONTRACTED STAFF PRESENT**

Jennifer Kemp-Cornelius, PharmD, ACS  
Josh Moore, Clinical Pharmacist, ACS  
Katie Wilbers, Clinical Pharmacist, ACS

### **OTHERS IN ATTENDANCE**

Todd Houldsworth, J & J  
Mike Kloos, Pfizer  
Jeff Knappen, Allergan

Dave Sproat, BMS  
Stephanie Keithly, Novo Nordisk  
Hank Lavellet, Forest

Patty Minear, Lilly  
Eric Blake, Merck  
Berend Koops, Merck

Hank Lavellet, Forest  
Joe Summers, Novo Nordisk

\*Many names on the sign in sheet were illegible. Sign in sheet on file for review.

<b>Welcome, Introductions and Opening Remarks</b>	Acting Chairman, Susan Abdel-Rahman, PharmD, called the meeting to order at approximately 10:10 a.m. A quorum was established. Rhonda Driver, RPh, Director of Pharmacy, facilitated the meeting on behalf of the MO HealthNet Division (MHD). No introductions or announcements were made.
<b>Minutes Approval</b>	Minutes of the January 18, 2012 meeting were reviewed and approved as submitted.
<b>Pharmacy Program/Budget Update</b>	Andrew Haslag, Fiscal Manager, announced we are close to the end of the FY12 budget. The next fiscal year budget shows significant amount for generic savings. There are no other cuts to any programs. Randy Beckner inquired what the budget is for FY13, which is right at 1 billion dollars. 340B Program: Mr. Haslag gave a brief overview of the 340B program and how we can save money with this program. They are going to look at other states to try and better our program. Health Home Update: Jayne Zemmer, Program Manager, gave an update on Health Home. The program is moving forward and things are into place. We were approved, by CMS, for both Primary Care and CMHC Health Homes. Both are focused on chronic illnesses and serious mental illnesses. Goals for the Health Home Program are to improve care management, facilitate patient interest and motivation in reaching optimal health with their condition with self care and community support that will help them improve their condition. Enrollment started in January and as of April, all of clinics were enrolled.
<b>Review of Prior Authorization Meeting:</b>	Copies of the agenda and draft minutes, including public hearing, from the March 15, 2012 <i>Drug Prior Authorization Committee Meeting</i> were included in the members' meeting packet.
<b>Implementation Schedule</b>	An updated copy of the <i>Proposed Implementation Schedule for Edits</i> , including PDL classes was included in the Members' meeting packet and provided as a handout to all attending. The schedule had been updated with all edits approved at the last quarter's meetings which included and annual PDL implementation. This schedule may be found on the MHD web page at <a href="http://dss.missouri.gov/mhd/cs/pharmacy/pdf/impsched.pdf">http://dss.missouri.gov/mhd/cs/pharmacy/pdf/impsched.pdf</a>
<b>New Drug Review</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> - Drug monographs were available for review at <a href="http://www.heritage-info.com/mocaidrx">http://www.heritage-info.com/mocaidrx</a> for all new products reviewed this quarter (Identified by First Data Bank in October, November, and December 2011). A listing of products recommended for open access, clinical edit, as a PDL product or for continued prior authorization was provided in the Members' meeting packet for discussion and action. This listing was also provided as a handout (see meeting packet) to all attending. Ms. Driver reviewed the MHD recommendations for products whose review was completed this quarter.</li> <li>• <b>Decision</b> – In the interest of time the Board agreed to block these and the Preferred Drug List (PDL) recommendations into one inclusive vote, pulling out any issues that might require separate discussion. New Drug recommendations were included in this block vote and approved as submitted. (See Roll Call Vote)</li> </ul>
<b>Preferred Drug List (PDL)</b>	Products and classes under review this quarter have existing contracts through June 30, 2012. Recommended changes to the edits were bolded for easy identification.

<b>Atypical Anti Psychotics - Clinical Edit</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document noting that the current dosing for some of the drugs is considerably higher than FDA approval dosing. Changes outlined in the proposal bring dosing for these products in line with FDA approved limits.</li> <li>• <b>Decision</b> – In the interest of time the Board agreed to block recommendations into one inclusive vote, pulling out any issues that might require separate discussion. This Clinical Edit recommendation was accepted and added to the block vote. (See Roll Call Vote)</li> </ul>
<b>SNRI-Clinical Edit</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document noting that the current dosing for some of the drugs is considerably higher than FDA approval dosing. Changes outlined in the proposal bring dosing for these products in line with FDA approved limits.</li> <li>• <b>Decision</b> – This Clinical Edit recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>SSRI-Clinical Edit</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document noting that the current dosing for some of the drugs is considerably higher than FDA approval dosing. Changes outlined in the proposal bring dosing for these products in line with FDA approved limits.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>BPH Agents-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents. The Cialis approval and denial criteria were reviewed to determine if any changes should be made.</li> <li>• <b>Decision</b> - This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Anticoagulant Agents-PDL (Oral &amp; Subcutaneous)</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Mr. Roaseau reviewed the criteria document, reviewing preferred and non-preferred agents. Mr. Roaseau also stated that the anticoagulant agents combined the platelet aggregate inhibitors, the low molecular weight heparins, and the anti-thrombin inhibiting agents. It was determined that the proposal may need to be re-reviewed to allow patients who have not had the aspirin therapy previously access to the items on the preferred list.</li> <li>• <b>Decision</b> - This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Antiemetics Agents-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents. Ms. Driver stated that other than the specific criteria for the outlier products that have very specific indications, there is no change to this edit.</li> <li>• <b>Decision</b> - This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Topical Benzoyl Peroxide/Clindamycin Combination-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Beta Adrenergic Agents Long</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, stating that because of supplementals and</li> </ul>

<b>Acting-PDL</b>	pricing, Serevent Diskus is being moved to a non-preferred status. <ul style="list-style-type: none"> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Beta Adrenergic Agents Nebulized-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, and reviewed the preferred and non-preferred agents noting that the recommendation was to move Accuneb from non-preferred to preferred.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Beta Adrenergic Agents Short Acting-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents, noting that Arcapta will have to be removed from this class and moved to COPD Agents class.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>COPD Agents-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents. Ms. Driver noted that Arcapta will be moved to this class and recommended as non-preferred and Daliresp, new to this class, is also being recommended for non-preferred status.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Hematopoietic Agents-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, and noted that all the recommended drugs in this class are preferred.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Growth Hormones-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver stated that there is no change recommended for this class.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Inhaled Corticosteroids-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver stated that there is no change recommended for this class.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Insulins-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver stated that there is no change recommended for this class.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Insulins Long Acting-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver stated that there is no change recommended for this class.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Insulins Rapid Acting-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver stated that there is no change recommended for this class.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Insulins Mix-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver stated that there is no change recommended for this class.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>

	Votes)
<b>Non Ergot Dopamine Receptor Agonists-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents, introduction Azilect as a new product that has been recommended for the non-preferred status.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Ophthalmic NSAIDS-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents, noting that Durezol is recommended for preferred status and that some of the newer products-Lotemax, Bromfenac, and Bromday-are recommended for non-preferred status.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Sedative Hypnotics-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents. Lunesta has been moved to preferred status. Ms. Driver called attention to the lists stating that Temazepam is listed under both preferred and non-preferred, but with different doses.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Skeletal Muscle Relaxants-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents. Lorzone was introduced and it is being recommended for non-preferred status; Cyclobenzaprine ER is also being recommended for non-preferred.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Statins-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Triglyceride Lowering Agents-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>Urinary Tract Antispasmodics-PDL</b>	<ul style="list-style-type: none"> <li>• <b>Discussion</b> – Ms. Driver reviewed the criteria document, reviewing preferred and non-preferred agents. Ms. Driver stated that Oxytrol has been moved to preferred status and Sanctura has been recommended for non-preferred status.</li> <li>• <b>Decision</b> – This PDL recommendation was accepted and added to the block vote. (See Roll Call Votes)</li> </ul>
<b>ACS Healthcare Update</b>	Jennifer Kemp-Cornelius, PharmD, reviewed the call center statistics for poly pharmacy and long-acting narcotics. Ms. Kemp-Cornelius went over the denial criteria for long-acting narcotics. Ms. Kemp-Cornelius reviewed the approval criteria for poly pharmacy stating that adults are allowed to have up to five psychotropic medications, while children can have up to three psychotropic medications. Ms. Kemp-Cornelius stated that the system will be triggered at that sixth drug-for adults-but that doesn't

	<p>automatically mean a denial; per Rhonda Driver, the sixth medication will get the request in the door, but the whole profile/plan of care is under evaluation to determine if the request should be approved or denied. Ms. Kemp-Cornelius stated that the point of this edit is to allow MO HealthNet to have a conversation with the prescriber about the patient's therapy and it forces the prescriber to provide adequate documentation for why they feel this patient needs to be on more than the maximum allowed psychotropic medications.</p>
<b>Preferred Drug List Discussion/Therapeutic Classes</b>	<p>A handout of therapeutic categories to be considered for inclusion on the PDL for the next quarter and meeting was provided in the meeting packet and to all attendees. These categories will be an annual review of products with contracts expiring September 30, 2012. The Division will also post these classes to the Web page.</p>
<b>Top 25 Drugs by Cost</b>	<p>Jennifer Kemp-Cornelius, PharmD, reviewed the Top 25 Drugs by Cost and provided two forms, one showing by Paid Amount and one by Claims.</p>
<b>Call Center Statistics</b>	<p>A handout detailing pharmacy help desk call center activity was provided for all attending. Cyber Access Active User Counts and Logging Information reports detailing activity was shared. Jennifer Kemp-Cornelius stated that the tele-monitoring vendors that are used by MO HealthNet are required to share clinical data with ACS and in turn, ACS is able to put that information into CyberAccess which has a Continuity of Care Document which can now be shipped out.</p>
<b>Adjourn</b>	<p>The DUR Board went into Executive Session for the sole purpose of discussing individual participant specific medical information. At the conclusion of these discussions the group adjourned entertaining no further business, actions or motions. (See attached roll call vote). The next meeting is scheduled for July 18, 2012.</p>

## Roll Call Votes – April 18, 2012

Member	Meeting Minutes	All Recommendations Block Vote	Closed Session	Adjourn
Susan Abdel-Rahman	Yeah	Yeah	<b>Motion</b>	Yeah
Charlene Heyde	Yeah	<b>Second</b>	<i>Absent</i>	Yeah
Sandra Bollinger	<b>Motion</b>	<b>Motion</b>	<b>Second</b>	Yeah
Kenneth Haller	<b>Second</b>	Yeah	Yeah	Yeah
Glenn Talboy	Yeah	Yeah	Yeah	<b>Second</b>
Jennifer Passanise	<i>Absent</i>	<i>Absent</i>	<i>Absent</i>	<i>Absent</i>
Stacy Mangum	<i>Absent</i>	<i>Absent</i>	<i>Absent</i>	<i>Absent</i>
Kirk Nelson	<i>Absent</i>	<i>Absent</i>	<i>Absent</i>	<i>Absent</i>
Ginger Nicol	Yeah	Yeah	Yeah	<b>Motion</b>
Randy Beckner	Yeah	*See below	Yeah	Yeah

**Dr. Beckner abstained from the vote on the following PDL classes: Androgen Hormone Inhibitors, Antiemetics-Oral, Beta-Adrenergic Agents: Long Acting, Beta Adrenergic Agents: Nebulized, Beta Adrenergic Agents: Short Acting, Inhaled Corticosteroids, Non-Ergot Dopamine Receptor Agonists, Triglyceride Lowering Agents. His vote is recorded as Yeah for all other classes.**

## EXECUTIVE SESSION

April 18, 2012

### DUR BOARD MEMBERS PRESENT

Susan Abdel-Rahman, PharmD  
Charlene Heyde, RPh  
Sandra Bollinger, PharmD  
Kenneth Haller, MD  
Glenn Talboy, MD  
Ginger Nicol, MD  
Randy Beckner, PharmD

### DUR BOARD MEMBERS ABSENT

Jennifer Passanise, ANCC-BC, FNP  
Stacy Mangum, PharmD  
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### MHD STAFF PRESENT

Rhonda Driver, RPh, Director of Pharmacy  
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Ashley Wilson, DUR Coordinator  
Jenna Twehus, RN  
Jayne Zemmer, Program Manager  
Angela Wilson, Pharmacy Unit Supervisor  
Allison Lauf, RN  
Mary Heet, RN

### CONTRACTED STAFF PRESENT

Jennifer Kemp-Cornelius, PharmD, ACS  
Josh Moore, Clinical Pharmacist, ACS  
Katie Wilbers, Clinical Pharmacist, ACS

Minutes Review	Minutes of the January Executive Session were approved as submitted
Case Reviews	Jenna Twehus, RN presented two handouts that detailed provider summary results and benchmark data for patients being prescribed large amounts of narcotics. The discussion included why these 2 patients were being prescribed high dosages and multiple narcotics. The board decided to do further research to get more information on these issues. No other issues were discussed.
Adjourn	Executive session adjourned at approximately 1:30p.m. (See roll call vote)