

DRUG UTILIZATION REVIEW BOARD

October 20, 2010

**205 JEFFERSON STREET
JEFFERSON CITY, MO 65101**

Board Members Present

John Newcomer, M.D.
Susan Abdel-Rhaman, Pharm.D
Randy Beckner, Pharm.D
Kenneth Haller, M.D.
Charlene Heyde, R.Ph
Kirk Nelson, D.O.
Ginger Nicol, M.D.
Jennifer Passanise, F.N.P.
Glen Talboy, M.D.

Committee Members Absent

Sandra Bollinger, Pharm.D.
Joy Gronstedt, D.O.
Stacy Mangum, Pharm.D

Contractors Present

Jennifer Kemp-Cornelius, Pharm.D, ACS Healthcare
Geri Roing, R.N., Infocrossing
Tom Beetem, R.Ph., Infocrossing

MO HealthNet Staff Present

George L. Oestreich, PharmD, Dep. Division Director
Rhonda Driver, R.Ph., Pharmacy Director
Mark Roaseau, Clinical Pharmacist
Andrew Haslag, Fiscal Manager
Mary Heet, R.N
Jenna Twehus, RN
Beth McQuaide, Special Assistant
Jackie Hickman, Unit Supervisor
Angela Wilson, Unit Supervisor
Kim Morgan, Correspondence and Information Specialist

Rick Pope, Pharm.D., First Health Services
Sophie Backes Pharm.D, ACS HealthCare

Others Attending

Eric Blake, Merck
Paul Setlak, Abbott
Kyle Mays, Student
Debbie King, Amgen
Grant Cale, BMS

M. Patty Laster, Genentech,
Nick Boyer, Astra Zeneca
Annie Palmer, Taro
Dustin M, Student
Susan Zalenski, Johnson and Johnson

Jeff Knappen, Allergan
Joe Summer, Takeda
Rob V, Azur
Emal Gurh, Pfizer

John Harris, Abbott
Chet Steckler, Purdue
Phil King, Pfizer
Patty Minear, Lilly
Jim Graham, Johnson and Johnson

Welcome, Introductions and Opening Remarks	John Newcomer, MD, Chairman called the meeting to order at approximately 10:00 a.m.
Minutes Approval	Minutes from the October 2010 meeting were approved as submitted. (See Roll Call Vote)
Pharmacy Program Budget Update	George L. Oestreich, PharmD, Deputy Division Director provided an abbreviated overview of the general work plan for the Pharmacy program. This included total number of eligibles in the program and discussion of expected effects of Health Care Reform on this number, average prescription cost, cost trends, per member per month costs, regression analysis of the expended trends of the program. Members were reminded of our vendor partners for the preferred drug list (PDL), Magellan Health Systems, Infocrossing (IFOX) the fiscal agent and ACS Healthcare Information Systems, the clinical editing vendor. Rick Pope PharmD with Magellan and Jennifer Kemp-Cornelius, PharmD, ACS were introduced. Dr. Oestreich briefly explained how ACS and IFOX work together. Generic utilization data was reviewed and it was noted that utilization was not 100% due to approximately three PDL classes in which branded products remain preferred do to cost differentials. An in depth discussion of the pharmacy provider tax will be provided at a later date, however a brief description of this program was provided including discussion of the carve out of managed care pharmacy services, reimbursement methodology and enhanced fees. He provided updates on the electronic tools(CyberAccess, SmartPA, DirectCare Pro, Direct Inform and a clinical traits tool) used by the Clinical Services Unit including all the programs that are currently managed through these tools. Plans are to present each tool in more depth over the next few meetings. MoRx Plan, the state pharmacy assistance program, data was shared and the on line tool MoRx Compare referenced. Dr. Oestreich noted the comprehensive review of the MO HealthNet Program, completed by the Lewin Group, was available on the Division's Webpage for review. Lewin was especially complimentary of the Pharmacy Program's leadership and knowledge. Copies of the PowerPoint presentation will be available on the MHD Web page or upon request.
ACS HealthCare Update	Dr. Kemp-Cornelius, ACS Healthcare Systems summarized two CyberAccess SM log in information handouts detailing every month since the implementation of the tool. Dr. Cornelius summarized these statistics including total log ins to each of the available applications as well as active user counts and log ins by each provider type. Dr. Kemp-Cornelius discussed the training provided to users by ACS staff and the end user agreements for the use of the tool. She stressed that in order to access a patient; a provider must have the participant's MO HealthNet identification number as well as their birth date or last name. She followed this information with a live demonstration of the tool including alert messages to providers using the tool, drug claim information which includes a medication possession ratio (MPR) percentage and drug prior authorization request history. She detailed how a provider's office can print detailed patient profiles for review. E-prescribing was also discussed and how

	<p>to check for approval of a product and open a prior authorization ticket should the provider wish was shown. A short display of the pharmacy edits on the MHD Webpage and the link from CyberAccessSM to this information was also shared. Medical claim information was demonstrated. Dr. Kemp-Cornelius continued the demonstration with the medical/durable medical equipment precertification process through the tool. EPSDT/HCY was recently added to the tool and this feature was also shared. Screens to allow the manual addition of clinical trait data, as well as, a subset of providers who are working with an ACS subcontractor to have data from their electronic medical records "mined" for information and added to into the tool were also discussed. The discussion concluded with a question and answer session which lead to a brief discussion of statewide health information exchange (HIE). Dr. Oestreich shared a slide to help demonstrate where CyberAccessSM fits into the HIE discussions</p>
Review Of Prior Authorization Meeting and Public Hearing	<p>The Drug Prior Authorization Committee met and held the public hearing, for MHD recommendations for edits under review during this quarter, on September 16, 2010. A complete Drug PA meeting packet was included with meeting handouts to the Drug Utilization Review Board for review and action and to all attendees. Each document and the discussion surrounding them is detailed below. A copy of the draft minutes from the Drug PA Committee was included for the Board members' information as well.</p>
Old Business	
Implementation Schedule	<p>An updated copy of the <i>Proposed Implementation Schedule for Edits</i> was included in the members' meeting packet and as a handout to all attendees. The schedule had been updated with all edits approved at the last quarter's meeting. This included the implementation following the annual review of one third of the PDL done in June/July and implemented in October. The schedule may be found on the MHD Web-site at http://dss.missouri.gov/mhd/cs/pharmacy/imsched.pdf. Ms Driver clarified that the implementation of the first psychotropic edit had been delayed until the 21st of October.</p>
New Business	
New Drug Review	<ul style="list-style-type: none"> ● Discussion- Drug monographs for products reviewed during this quarter were available at http://www.heritage-info.com/mohealthnet. A listing of products detailing MHD's recommendations 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 to all in attendance. Ms. Driver reviewed the recommendations and responded to questions from Board members. ● Decision-In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any recommendation from the batch vote if discussion warranted. New Drug Review recommendations were added to the group vote. (See Roll Call Vote)

<p>Clinical Edits Smoking Cessation in Pregnant Women</p>	<ul style="list-style-type: none"> ● Discussion-Ms. Driver reviewed the clinical edit criteria document for the roll out of the smoking cessation program. MHD has identified pregnant women as the population covered by this edit. She reviewed approval and denial criteria. Behavioral intervention is encouraged in conjunction with pharmaceutical products. Following a question from the Board a revision to the edit will be made to correct the date range checked for appropriate diagnosis to 365 rather than 720. Mrs. Driver responded to questions regarding the use of products not considered appropriate for use during pregnancy. Discussion ensued how to transparently capture participants who are actively pregnant earlier than current medical claims allow and should a call for approval of the drug intervention be required for approval. Prenatal vitamin use was one suggestion. Following this discussion the group felt any road blocks would be counter-productive, even though this edit did not exhibit the Board's usual level of caution. Also was discussion of some type of information regarding smoking cessation with over the counter pregnancy tests as a way to provide information at the earliest point. This sparked discussion of the lack of national coordination surrounding support for behavioral interventions. MHD will discuss with the Department of Health and Senior Services the possibility of working with pharmacies to provide this type of messaging. ● Decision-In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This recommendation was added to the group vote. (See Roll Call Vote)
<p>PDL Edits</p>	<p>The classes reviewed this quarter consisted of the annual review of the second half of the Preferred Drug List (PDL). Any changes to the existing edit will be implemented in January 2011 at the expiration of the current contracts.</p>
<p>Ace Inhibitors</p>	<ul style="list-style-type: none"> ● Discussion-Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. No change was recommended for this class. It was noted that this was a generics first edit. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
<p>Ace Inhibitor/Diuretic Combination</p>	<ul style="list-style-type: none"> ● Discussion-Ms. Driver reviewed the criteria document noting MHD recommendations mirrored those for the Ace inhibitor class. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
<p>Ace Inhibitor/Calcium Channel Blocker Combinations</p>	<ul style="list-style-type: none"> ● Discussion- Discussion- Ms. Driver summarized this document noting no changes. ● Decision- In the interest of time the Board agreed to consider all recommendations as a

	<p>group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)</p>
Alpha-Glucosidase Inhibitors	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. No change to the edit was recommended. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Alzheimer's Agents	<ul style="list-style-type: none"> ● Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status and approval criteria. No change to product coverage was being recommended with the exception of a new generic product, Rivastigmine Caps to preferred status. Dr. Newcomer commented on the new product Airicept 23 and asked for data on the use of two Airicept 10 mg tablets. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Angiotensin Receptor Blockers	<ul style="list-style-type: none"> ● Discussion-Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. No change was recommended for this class. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Angiotensin Receptor Blocker/Diuretic Combinations	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. No change was being recommended for this class. This edit is an example of a branded preferred as discussed in Dr. Oestreich's program update. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Antidiabetic Combination Agents	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. A new product, Actosplus Met XR® was added to non preferred status post the new product review. Ms. Driver reminded members that the additional criteria surrounding heart failure and TZD products will continue with this edit. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This

	class was added to the group vote. (See Roll Call Vote)
Biguanides	<ul style="list-style-type: none"> • Discussion- Discussion Ms. Driver reviewed the proposed criteria document. No change was being recommended for this class which is a generics first edit. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Bone Ossification Suppression Agents/Calcitonins	<ul style="list-style-type: none"> • Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. Two products, Boniva® Tabs Syringe and Prolia® Syringe, were recommended as non preferred status. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote with the addition of the Drug PA Committee's recommendation surrounding Actonel® products. (See Roll Call Vote)
Direct Renin Inhibitor Direct Renin Inhibitor/Combinations	<ul style="list-style-type: none"> • Discussion- Ms. Driver reviewed the proposed criteria document. Noting that all products were recommended for preferred status including the addition of new product Valturna® to the class. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Electrolye Depleters	<ul style="list-style-type: none"> • Discussion- Ms. Driver reviewed the proposed criteria document. Noting no change to the products recommended for preferred and non-preferred status. It was noted that it is expected that Renagel will leave the market with the next year or so and MHD will plan to revisit the edit when that occurs. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Herpes Antivirals	<ul style="list-style-type: none"> • Discussion- Ms. Driver reviewed the proposed criteria document. No change was recommended to the products recommended for preferred and non-preferred status for this therapeutic class. Another edit where the brand name is supported by supplemental rebate to remain in preferred status. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
DMARDS	<ul style="list-style-type: none"> • Discussion- Discussion-Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. Ms. Driver explained how the rules engine is used to determine diagnosis specific use for each product to ensure

	<p>appropriate use. Acterna® and Stelara® were new additions to non preferred status. A trial and failure on methotrexate remains as part of the approval criteria. Susan Zalenski, Johnson and Johnson, requested a name change for the edit to recognize the recent addition of Biologics to the class be considered. She asked that Board and MHD consider the addition of "Biologics" to the name or drop DMARDs from the title using only Immunomodulators in the title of the edit document. It was agreed this was an appropriate change.</p> <ul style="list-style-type: none"> ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Leukotriene Modifiers	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Zyflo and Zyflo CR were additions to no preferred status.. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Lipotropics-Niacin Preparations	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. Simcor® was recommended for movement to non preferred status. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Low Sedating Antihistamines	<ul style="list-style-type: none"> ● Discussion-Ms Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. No change was recommended. Ms. Driver noted this is a generic OTC first edit. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Low Sedating Antihistamines/Decongestant Combinations	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. No changes were recommended. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Macrolides Adult/Pediatric	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. This also is a generics first edit. No change was being recommended for this therapeutic class. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This

	class was added to the group vote. (See Roll Call Vote)
Meglitinides	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Prandin® was a new addition to preferred products. Nateglinide was added to non preferred status. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Multiple Sclerosis Agents	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Extavia® was added to the class in non preferred status post the new drug review process.. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Narcotics: Long Acting	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. Two new products, Embeda® and Exalgo ER® were added to non preferred status post solicitation and new drug review. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Intranasal Steroids	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. No changes were recommended. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Ophthalmic Antihistamines	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Ms. Driver noted the addition of an new generic, Azelastine Oph, to non preferred status. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Ophthalmic Mast Cell Stabilizers	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. No change was recommended. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Ophthalmic Quinolones	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status including the addition of a new product Zymaxid ® to non preferred status. ● Decision- In the interest of time the Board agreed to consider all recommendations as a

	<p>group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)</p>
Ophthalmic Prostaglandin Agonists	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document noting that all products in the therapeutic class remain preferred. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Pulmonary Hypertension Agents (Oral/Inhaled/Injectable)	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. Adcirca® was a new addition to preferred status for oral agents and Revatio® Vial to non preferred injectable/inhaled agents. Ms. Driver pointed out the clinical criteria still in place for approval and also reminded Missouri's data shows the state as an outlier compared to several other states in its utilization of this therapeutic class. The preliminary data under review shows it is a widespread statewide concern. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Otic Quinolones	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. No change was being recommended for this therapeutic class. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Quinolones-Systemic	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document noting the products recommended for preferred and non-preferred status. No change was being recommended for this therapeutic class. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
2nd Generation Sulfonylureas	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. No change was being recommended for this therapeutic class. This is a generic firsts edit. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Serotonin Receptor Agonists (Triptans)	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. The addition of Naratriptan to non preferred status was noted. No other change was being recommended for this therapeutic class. The maximum dosing clinical criteria for these products remains in the edit.

	<ul style="list-style-type: none"> ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Thiazolidinediones	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. No change was being recommended for this therapeutic class. Heart failure risk clinical criteria will remain in place. Both products remain preferred. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Topical Agents of Psoriasis	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document. Noting the products recommended for preferred and non-preferred status. No change was recommended for this therapeutic class. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Topical Retinoids	<ul style="list-style-type: none"> ● Discussion- Ms. Driver reviewed the proposed criteria document noting the addition of Adapalene to non preferred status. Ms. Driver pointed out clinical criteria remains in place for approval. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Ulcerative Colitis Agents Oral and Rectal	<ul style="list-style-type: none"> ● Discussion-Ms. Driver reviewed the proposed criteria documents. Pentasa® a new product in the oral therapeutic class was noted to have been added in preferred status. No changes were recommended for rectal agents. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Vaginal Antibiotics	<ul style="list-style-type: none"> ● Discussion-Ms. Driver reviewed the proposed criteria document. No changes were recommended. ● Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Intranasal Antihistamines	<ul style="list-style-type: none"> ● Discussion-Ms. Driver reviewed the proposed criteria document. Azelastine Nasal and Astelin® were added to the edit in non preferred status following new drug reviews of both products. ● Decision- In the interest of time the Board agreed to consider all recommendations as a

	group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Cryptin Associated Periodic Syndrome Agents	<ul style="list-style-type: none"> • Discussion-Ms. Driver reviewed the proposed criteria document including approval and denial criteria. No change was recommended. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Self-Injectable Epinephrine Agents	<ul style="list-style-type: none"> • Discussion-Ms. Driver reviewed the proposed criteria document. Post new drug review Adrenaclick® and the generic Epinephrine® were added to the edit in non preferred status. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Tramdol Like Agents	<ul style="list-style-type: none"> • Discussion-Ms. Driver reviewed the proposed criteria document including approval and denial criteria. No change was recommended to this generics first edit. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Fibromyalgia Agents	<ul style="list-style-type: none"> • Discussion-Ms. Driver reviewed the proposed criteria document including clinical criteria. that applies to approval. No change was recommended. • Decision- In the interest of time the Board agreed to consider all recommendations as a group, reserving the right to pull any edit from the batch vote if discussion warranted. This class was added to the group vote. (See Roll Call Vote)
Preferred Drug List Announcement	A handout of therapeutic categories for review and inclusion in the PDL during the next quarter was included in the meeting packet and to all meeting attendees. Five new therapeutic classes will be reviewed for addition into the PDL. This listing will be posted to the Division's Web page at http://www.dss.mo.gov.mhd . The posting will also be updated with the MHD recommendations prior to the December Drug Prior Authorization Committee meeting.
ACS DUR Update	Sophie Backes, PharmD with ACS Healthcare systems provided an update on the Synagis Clinical Edit Criteria and how changes to the edit last year affected MO HeathNet patients. Dr. Backes reviewed the current edit criteria with 2009 American Academy of Pediatrics (AAP)changes incorporated and compared it to the original edit that was implemented in 2003. She also reviewed AAP guidelines compared to another set of guidelines for the National Paranatal Association (NPA) being offered by the manufacturer of the product to state Medicaid programs. Ms. Driver noted that no further information on the origin of NPA guidelines has been found and AAP has been considered the gold standard. Statistics for the most recent RSV season were reviewed. This data included the number of infants receiving

	the drug; number of requests denied and of those requests how many required some type of hospitalization including emergency room visits. Conclusions drawn from this review indicated that changes to the edit had no measureable effect on the patient population over previous years.
Program Utilization Information Top 25 Report	A listing of the top 25 drugs for dates of services between January 2007 and second quarter 2010 was provided for the Boards' Information. This report was provided in two formats: ranked by number of claims and ranked by amount paid. Copies were available to all attendees.
Clinical Edit Summary Report	An overview of clinical edit and prior authorization transactions was provided for the month of September 2010. The report provided total transaction counts as well as information on the outcome (approval or denial) of the request.
Other Business/Adjourn	The next meeting of the Board is scheduled for January 19, 2011. The Drug Utilization Review 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 Roll Call Vote)

ROLL CALL VOTES

MEMBER	MINUTES	PA RECOMNEDATIONS	CLOSED SESSOIN	ADJOURN
John Newcomer	Yeah	Yeah	Yeah	Yeah
Susan Abdel-Rahman	Yeah	MOTION	Yeah	Yeah
Randy Beckner	Yeah	* see below	SECOND	Yeah
Sandra Bollinger	Absent	Absent	Absent	Absent
Joy Gronstedt	Absent	Absent	Absent	Absent
Kenneth Haller	SECOND	SECOND	Yeah	MOTION
Charlene Heyde	Yeah	Yeah	Yeah	Yeah
Stacy Mangum	Absent	Absent	Absent	Absent
Kirk Nelson	Absent	Absent	Absent	Absent
Jennifer Passanise	MOTION	Motion	Yeah	SECOND
Glenn Talboy	Yeah	Yeah	MOTION	Yeah

* Dr. Beckner excused himself from the votes on the following classes: Oral Anti-diabetics, Thiazolidinediones, Intra-nasal Steroids, Triptans, and Herpes Antiviral Agents. All other votes were recorded as Yeah.

**Executive Session
October 20, 2010**

Board Members Present

John Newcomer, M.D.
Susan Abdel-Rhman, Pharm.D
Randy Beckner, Pharm.D
Kenneth Haller, M.D.
Charlene Heyde, R.Ph
Kirk Nelson, D.O.
Ginger Nicol, M.D.
Jennifer Passanise, F.N.P.
Glen Talboy, M.D.

Committee Members Absent

Sandra Bollinger, Pharm.D.
Joy Gronstedt, D.O.
Stacy Mangum, Pharm.D

Contractors Present

Jennifer Kemp-Cornelius, Pharm.D, ACS Healthcare
Sophie Backes Pharm.D, ACS HealthCare

MO HealthNet Staff Present

George L. Oestreich, PharmD, Dep. Division Director
Rhonda Driver, R.Ph., Pharmacy Director
Mark Roaseau, Clinical Pharmacist
Andrew Haslag, Fiscal Manager
Mary Heet, R.N
Jenna Twehus, RN
Beth McQuaide, Special Assistant
Jackie Hickman, Unit Supervisor
Angela Wilson, Medicaid Specialist
Kim Morgan, Correspondence and Information Specialist

Rick Pope, Pharm.D. First Health Services

Minutes Review and Approval	Minutes were approved as submitted
Case reviews	Jenna Twehus, RN presented a patient profiles for review and recommendation by the Board. The Board made recommendations for interventions on three cases which included a 36 year old female receiving multiple pain medications a teen prescribed two SSRI meds for greater than 90 days and a five year old child on multiple antipsychotic medications.