Drug Utilization Review Board
Minutes Draft

Name of Meeting: Drug Utilization Review Board
Date of Meeting: March 22, 2018
Length of Meeting: 2 hours and 12 minutes
Location of Meeting: DMAS Board Room 13th Floor

Members Present:
Bill Rock, PharmD, Chair
Avtar Dhillon, MD, Vice Chair
Kathryn Reid, PhD
Wendy Nash, PharmD
Rachel Cain, PharmD
Denese Gomes, NP
Kathleen Sardegna, MD
Seth Brant, MD

Members Not Present:
Randy Ferrance, MD
Jonathan Evans, MD
Michele Thomas, PharmD
Denise Lowe, PharmD
Sandra Dawson, RPh

DMAS Attendees:
Donna Proffitt, RPh, Pharmacy Program Manager
Keith Hayashi, RPh, Pharmacist
Dean Beuglass, RPh, Senior Pharmacy Policy and Data Strategist
Danielle Adeeb, CPhT, Pharmacy Contract Administrator
Maryann McNeil, RPh, Pharmacist
Matthew Keats, MD, Behavioral Health Medical Director

Contractors:
Debbie Moody, RPh, Clinical Account Manager, Magellan Health Services
Nancy Eldin, PharmD, Clinical Manager, Magellan Health Services

Visitors:
Vicki Star, Merck
Michelle Hayes, Merck
Steve Curry, ALK, Inc
Amy Nicholas, Strongbridge
Kay Barry, Strongbridge
Steve Patterson, Alkermes
Robert Wright, Indivior
Brad Burmaster, Gilead
David Roy, Vertex
Ken Jennings, BMS
Chike Okon, Aetna
Gabrielle Williams, Magellan Complete Care
Collin Sinclair, Pharmacyclics
Jonell Lanta, Shire

Elizabeth Brusig, Optima Health Plan
Katherine Klem, Gilead

Call to Order and Introductions

Dr. Rock called the meeting to order at 2:05 pm.

Minutes – November 9, 2017

Meeting minutes were approved as submitted.

New Drugs

Calquence® (acalabrutinib) – Dr. Nancy Eldin presented the drug information and service authorization criteria recommendations for Calquence®. The motion was made to update the ProDUR Edit from FDB Severity Level 2 to Severity Level 1 for drug interactions with proton pump inhibitors. The motion was made to accept the criteria as written. The Board seconded and approved the updates to the ProDUR Edits and the criteria.

Gocovri™ (amantadine extended-release) – Dr. Eldin presented the drug information and service authorization criteria recommendations for Gocovri™. The motion was made to accept the criteria as written. The Board seconded and approved the criteria.

Hemlibra® (emicizumab-kxwh) – Dr. Eldin presented the drug information and service authorization criteria recommendations for Hemlibra®. The motion was made to accept the criteria as written with the addition of adding the words "AND" and "OR" to clarify the clinical criteria. The words "AND" and "OR" are added as follows: Does the member have a diagnosis of hemophilia A that has been confirmed by blood coagulation testing? "AND" Confirmation that the member has inhibitors to factor VIII. "AND" Has the member used routine prophylaxis to prevent or reduce the frequency of bleeding episodes? "AND" Has the member had ≥ 2 documented episodes of spontaneous bleeding into joints? "OR" Does the member have a documented trial and failure of Immune Tolerance Induction (ITI)? Hemlibra® is not used in combination with ITI. "OR" Does the member have a documented trial and failure of or is currently on routine prophylaxis with a bypassing agent? The Board seconded and approved the updates to the criteria.

Juluca™ (dolutegravir/rilpivirine) – Dr. Eldin presented the drug information and service authorization criteria recommendations for Juluca™. The motion was made to accept the criteria as written with an update to the quantity limits to 30 tablets/30 days. The Board seconded and approved the criteria with the updates to the quantity limits.

Prevymis™ (letermovir) – Dr. Eldin presented the drug information and service authorization criteria recommendations for Prevymis™. Debbie Moody, RPh, briefly explained auto Prior Authorization (PA) to the board. The motion was made to require an auto PA for Prevymis™. The Board seconded and approved.

Rebinyn® (coagulation Factor IX (recombinant), glycopegylated) – Dr. Eldin presented the drug information for Rebinyn®. There was much discussion by the board.

Verzenio™ (abemaciclib) – Dr. Eldin presented the drug information and service authorization criteria recommendations for Verzenio™. The motion was made to accept the criteria as written with the addition of a new FDA approved indication. The new FDA approved indication is to use Verzenio™ "in combination with an aromatase inhibitor as initial endocrine-based therapy for the treatment of postmenopausal women with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative advanced or metastatic breast cancer". The Board seconded and approved the criteria with the addition of the new FDA approved indication.

Ximino™ (minocycline) – Dr. Eldin presented the drug information and service authorization criteria recommendations for Ximino™. The motion was made to auto PA Ximino™ with the addition of having the member try at least two products in the same minocycline class before approving Ximino™. The Board seconded and approved the plan to auto PA.

New Drugs: DUR Drugs with New Generics; PDL Eligible; Physician-Administered – Dr. Eldin presented the drug information for New DUR Drugs with New Generics, PDL Eligible Drugs and New Physician-Administered Drugs. No action required by the Board.

Also, included in this section was the United States Food and Drug Administration's (FDA) definition of a drug. Dr. Sardegna requested that periodically, questionable agents be discussed by the board in order to assist DMAS in determining which agents should be covered as a drug.

RetroDUR Criteria Estimates

Dr. Eldin presented the Criteria Exception Estimates Report for January 2018 and discussed several ideas for upcoming RetroDUR criteria topics. The Board selected several RetroDUR topics for the next few months.

Topics for Discussion

Orphan Drugs – Dr. Eldin presented the list of Orphan Drugs and the fee-for-service (FFS) utilization report of approved Orphan Drugs from January 1, 2017 through January 25, 2018. The Orphan Drugs utilization report included each member's diagnoses.

Proton Pump Inhibitors – Dr. Eldin presented the FFS claims analysis for acute dosing of Proton Pump Inhibitors (PPIs). Dr. Eldin mentioned the implementation of the hard denials for members on PPIs for more than 90 days, without having a clinical reason for longer duration, will be implemented on March 31, 2018. Magellan will have the PPIs edit as an auto PA.

Gender Edits – Dr. Eldin presented the November and December 2017 results of the First DataBank Severity Level 1 Gender Edit that was implemented on October 1, 2017 for medications to be used exclusively by males or females according to FDA approved indications.

Opioid Utilization – Dr. Eldin presented the utilization reports for adult and pediatric FFS populations. Data included: Monthly dosages/units over the past 24 months through December 2017, standard fourth quarter 2017 opioid utilization report for the adult population, pediatric opioid utilization summary from third quarter 2015 through fourth quarter of 2017, all of 2017 pediatric utilization reports broken down by less than 14 days and greater than 14 days medication dispensed and diagnosis information for the pediatric patients receiving greater than 14 days' supply of opioids.

Naloxone Utilization – Reviewed FFS utilization and comparison of the Naloxone products for fourth quarter 2017. Dr. Eldin gave a summary for the Fatal Drug Overdose Quarterly Report, 3rd Quarter 2017 from Virginia Department of Health (VDH) – Office of the Chief Medical Examiner.

A copy of the Fatal Drug Overdose Quarterly Report, 3rd Quarter 2017 from VDH – Office of the Chief Medical Examiner was provided in the DUR Board meeting binder.

Analysis of Compounded Prescriptions – Dr. Eldin reported on FFS paid claims for compounded prescriptions over a three month period (October through December 2017). On October 1st, 2017, DMAS implemented a service authorization requirement for compounded prescriptions over $500. Dr. Eldin provided the fourth quarter 2017 results since the implementation of the compounded prescriptions over $500 service authorization. The motion was made that ALL compounded prescriptions over $500 will now be forwarded to the DMAS physicians for review and approval/denial. The Board seconded and approved that all compounded prescriptions over $500 will now be reviewed and approved/denied by the DMAS physicians.

DUR Quarterly Newsletter – December 2017 newsletter, no questions from the Board.

Reports

ProDUR and RetroDUR – Standard reporting, no questions from the Board.

Utilization Analysis Reports – Standard reporting, no questions from the Board.

Top Diagnosis by Age – No questions from the Board.

AAP Report – No questions from the Board.

Meeting was adjourned at 4:17 pm.

Next DUR Board meeting scheduled for May 10, 2018.