

Idaho DUR Committee Meeting Minutes

Date: October 10, 2013

Time: 9am-1pm


Location: Idaho Medicaid, 3232 Elder Street, Boise, Idaho, Conference Room D-West

Moderator: Mark Turner, M.D.

Committee Member Present: Perry Brown, M.D., Mark Turner, M.D., Matthew Hyde, Pharm D., Paul Cady, Ph.D.

Others Present: Tami Eide, Pharm.D., Christopher Johnson, Pharm.D., Jane Gennrich, Pharm.D., Mark England, Pharm.D., Jeanie Armstrong

Committee Members Absent: Suzette Cooper, Pharm.D. Myrna Olson-Fisher, FNP, Paul Cady, Ph.D., Wayne Baures, R. Ph.,

AGENDA ITEMS	PRESENTER	OUTCOMES/ACTIONS
Committee Business ➤ Call to Order	Mark Turner, M.D.	 DUR_10_10_2013_F INAL.pptx
➤ Introductions/Review of Minutes from July 18, 2013	Mark Turner, M.D.	Minutes were approved as written.

<ul style="list-style-type: none"> ○ Hepatitis C DUR 	<p>Chris Johnson, Pharm.D</p>	<p>revealed Hydrocodone is favored, oxycodone second favored. Discussion to alert law enforcement of identified abuse cases. No further questions/discussion.</p> <p>Review of Hepatitis C DUR included Total Medicaid patients who received Hep C treatment:</p> <ul style="list-style-type: none"> ● 53 (36 Incivek, 17 Victrelis) ● Review of Genotypes ● Dual Therapy treatments ● HCV levels following treatment ● Completion/non-completion of both types therapies ● Therapy failure review <p>Refer slides 21-30</p> <p>Open discussion – What is National norm for success/failure? Costly if recipient receives 4 month treatment Follow up – provide 6-month follow –through study on recipients.</p>
<ul style="list-style-type: none"> ○ Geo-Mapping Analysis Utilization of Narcotic Analgesics (HIC3 = H3A) 16YO+ 	<p>Mark England, Pharm.D.</p>	<p>Handout provided separate from presentation. Review of finding of participants 16+. Prepared by MMA 6/13/2013 originally Age specific prepared by MMA 8/5/2013</p> <p>Open Discussion – Committee found all additional information in 16+ study intriguing, would like to drill down to further analysis for region 2 high use.</p>

<ul style="list-style-type: none"> ➤ Current Interventions/Outcomes Studies <ul style="list-style-type: none"> ○ Use of Psychotropic Medications in Foster Children – Next Steps <ul style="list-style-type: none"> • 2012 Data Analysis Update 	<p>Tami Eide, Pharm.D.</p>	<p>Slides 34- 51 Analysis included the following topics;</p> <ul style="list-style-type: none"> • Percentage of children 0-17yo prescribed Psychotropic medication in various States – Foster versus non-foster • Foster versus non-foster population variance by year, decrease in 2012, with 1011 highest. • Foster versus non-foster use of Psychotropic’s over 2007-1012 • Use by drug class 2012 • Age Distribution • Drugs by age/gender • Type of Prescribers of drugs • Regional comparison of Prescribers <p>Next Steps-</p> <ul style="list-style-type: none"> • Identify children with highest number of claims, are they receiving therapy, review profile. • Is there a possibility in 1 year to coordinate with Optum in a study? • Analysis Foster children population to Medicaid Non-foster children use • What is the level of child protective services involved with children on these drugs? • Should an informed consent/advocate be involved on decisions to prescribe these drugs? <p>Open Discussion –</p> <ul style="list-style-type: none"> • Concerns <ul style="list-style-type: none"> ○ State of Idaho availability of mental health resources/counseling ○ poor mental health system/parenting ○ high numbers
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<ul style="list-style-type: none"> ○ Immune Globulin (IV and SQ) Follow-up to 2012 DUR Project 	<p>Jane Gennrich, Pharm.D.</p>	<p>Slides 53-78</p> <p>Immune Globulin (IV and SQ) review included;</p> <ul style="list-style-type: none"> • Therapeutic criteria review • Type of medical claims (J-codes) <ul style="list-style-type: none"> ○ Paid claims ○ Unique Patients ○ Costs <p>Medical Claims annualized cost savings since prior authorization implementation: \$192,794</p> <ul style="list-style-type: none"> ○ 67% reduction in claims ○ 60% reduction in number of unique patients ○ 65% reduction in expenditure <ul style="list-style-type: none"> • Medical Claims – Prior Authorization Issue • Review of Pharmacy claims <ul style="list-style-type: none"> ○ Paid claims ○ Unique Patients ○ Costs <p>Pharmacy Claims 2012</p> <ul style="list-style-type: none"> ○ 17% reduction in claims ○ 18% <u>increase</u> in number of unique patients (two more patients) ○ 13% reduction in expenditure <ul style="list-style-type: none"> • Medical and Pharmacy Claims Combined <ul style="list-style-type: none"> ○ 40% reduction in claims ○ 32% reduction in number of unique patients ○ 31% reduction in expenditure <p>Annualized cost savings since prior authorization requirement instituted January 1, 2013: \$271,116</p> <p>Open Discussion – Review of participants Prior Authorizations request, was Medicaid primary? Jane Gennrich, Pharm.D. Will review and report next DUR meeting</p>
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<ul style="list-style-type: none"> ○ Non-Preferred Growth Hormone 	<p>Jane Gennrich, Pharm.D.</p>	<p>Slides 79 – 89 Review of Preferred Growth Hormones - Norditropin, Nutropin, Nutropin AQ Non-Preferred Growth Hormones - Genotropin, Humatrope, Omnitrope, Saizen, Serostim, Tev-Tropin, Zorbtive</p> <ul style="list-style-type: none"> • Non-Preferred POS paid claims • Prescriber type • Potential cost savings • Case studies • Letter sent to prescribers regarding “grandfathered” patients. <p>Open Discussion – Follow up letter to be sent out in December to prescribers who have failed to respond.</p>
<ul style="list-style-type: none"> ○ Levofloxacin 	<p>Jane Gennrich, Pharm.D.</p>	<p>Slides 90 – 97 Review of Levofloxacin The minimum age was changed from 16 years down to zero on 11/1/2012 for Levofloxacin.</p> <ul style="list-style-type: none"> • Recipients and claims Jan.-June 2012/2013 <ul style="list-style-type: none"> ○ 0-15 years, 16+ • Diagnoses review <p>Open Discussion - Overall thoughts were drug is being used in the appropriate circumstances</p>
<ul style="list-style-type: none"> ○ Oral Ketoconazole 	<p>Jane Gennrich, Pharm.D.</p>	<p>Slides 98 - 109 On July 26, 2013, the U.S. Food and Drug Administration (FDA) released a safety announcement regarding the safe use of oral ketoconazole tablets due to potentially fatal liver injuries, adrenal problems, or drug interactions.</p> <ul style="list-style-type: none"> • A copy of the Drug Safety Communication

<ul style="list-style-type: none"> ○ Imitrex Pens 	<p>Jane Gennrich, Pharm.D.</p>	<p>handout is available in your packet.</p> <ul style="list-style-type: none"> ● Review of paid pharmacy claims for Idaho ● Case Studies reviewed ● Prior Authorization request review ● POS paid claims <p>No Discussion or Future Steps</p> <p>Slide 111 – 117 Imitrex Pens review of paid claims; cartridge, pen + cartridge refills, single pen, multi pen refill.</p> <p>Letter went to pharmacies with multi pen refill.</p> <p>Next Steps – Educate Pharmacies</p>
<ul style="list-style-type: none"> ➤ Study Proposals for Next Quarter ○ P&T Committee Narcotic Analgesic Studies – Next Steps ○ Use of Psychotropic Medications in Foster Children – Next Steps ○ Tamiflu/Influenza Vaccine DUR ○ Uloric and Colcrys DUR ○ Antipsychotic Indication Evaluation- Hold for Future 		<p>Narcotic Analgesic Studies – Next Steps to complete analysis on patients receiving more than 1 short acting</p> <p>Use of Psychotropic Medications in Foster Children – Next Steps prime focus will be on Psychotropic polypharmacy (2 or more agents) for a given mental disorder prescribed before utilizing psychotropic monotherapy. Tami Eide, Pharm.D. to complete.</p> <p>Tamiflu/Influenza Vaccine DUR will include high use population, evaluation of dispense and use during flu season. Chris Johnson, Pharm.D to complete</p> <p>Uloric and Colcrys DUR study to include analysis of utilization and criteria update. Jane Gennrich, Pharm.D. to complete.</p>

➤ ProDUR Quarterly Report	Mark England, Pharm.D.	Mark England, Pharm.D. reviewed the quarterly report. ProDUR trends no change.
➤ DUR Newsletter	Mark England, Pharm.D.	<p>Current Newsletter was provided via hard copy, which included a review of participants paying cash for Opioids in the same timeframe, treatment for Hepatitis C.</p> <p>Next newsletter topics to include;</p> <ul style="list-style-type: none"> • Nystatin • Anti Fungal <ul style="list-style-type: none"> ○ Cost per tube size ○ Resistant rate • Hep C study write-up <p>Newsletter available on IDHW website.</p>
➤ Medicaid Update	Tami Eide, Pharm.D.	<p>Overview of ISPA meeting, review of top topics; reimbursements, Aderal/BAR buy-out, brand vs. generic costs, tobacco sensation.</p> <p>Review of Hospice claims paid process</p>
➤ Adjourn, 1pm	Mark Turner, M.D.	
Next Meeting: TBD	Mark England, Pharm.D.	Tami Eide, Pharm.D. to review calendar and provide 2014 DUR dates