

**Mississippi Division of Medicaid  
Drug Utilization Review (DUR) Board  
Minutes of the November 19, 2009 Meeting**

**Members Attending:** William Bastian, M.D.; Gera Bynum, RPh.; Alvin Dixon, RPh.; Edgar Donahoe, M.D.; Lee Merritt, RPh.; Mark Reed, M.D.; Paul Read, Pharm.D; Jason Strong, Pharm.D; Vickie Veazey, RPh.;

**Members Absent:** Jason Dees, D.O.; Laura Gray, M.D.; Frank Wade, M.D.

**Also Present:**

**DOM Staff:** Judith Clark, RPh., DOM Pharmacy Bureau Director; Paige Clayton, Pharm.D, DOM DUR Coordinator; Terri Kirby, RPh., DOM Clinical Pharmacist; Carlis Faler, DOM Program Integrity Director

**HID Staff:** Ashleigh Holeman, Pharm.D, Project Manager; Leslie Leon, Pharm.D, Clinical Pharmacist; Kathleen Burns, R.N., Call Center Manager

**Call to Order:** Dr. Mark Reed, Interim Chairman of the Board, called the meeting to order at 2:04 p.m. Dr. Reed asked for a motion to accept the minutes from the meeting of August 20, 2009. Dr. Donahoe made the motion to accept the recommendation with a second from Ms. Veazey. All voted in favor of the motion. Dr. Reed then asked for the Board to introduce themselves as there were new Board members present.

Dr. Reed continued the meeting by moving into the new business under the direction of Dr. Holeman.

**Cost Management Analysis:**

Dr. Holeman began with the presentation of the Top 15 Therapeutic classes by the total cost of claims dating June 01, 2009 thru August 31, 2009. The Top Therapeutic class remains Antipsychotic Agents. The Top 25 Drugs based on the number of claims for these same dates continues to be led by hydrocodone-acetaminophen agents. The Top 25 Drugs based on total claims cost was led by Abilify<sup>®</sup> and Prevacid<sup>®</sup>, with Singulair<sup>®</sup> leading the month of August.

**Pharmacy Program Update:**

Dr. Clayton reviewed several changes DOM implemented in order to facilitate the immediate claims transactions of Tamiflu<sup>®</sup> for Medicaid beneficiaries with the re-emergence of the H1N1 virus. These changes were implemented September 1, 2009. Tamiflu does not count towards the monthly service limits for children only, and compounding issues were addressed to allow for the timely treatment of the H1N1 virus. There were quantity limits placed on the medication to assure proper dosing and conservation of the product. Ms. Clark stated that Medicaid would pay for the dispensing fee of the H1N1 vaccine for adults only through the Pharmacy Program. Children will be required to obtain their H1N1 vaccine through their primary care physicians, as is the case with all vaccines. H1N1 vaccinations for long term care facilities will be handled through their normal processes for vaccinations and not the pharmacy program.

**DUR Overview Review:**

Dr. Holeman began by noting that with newly appointed Board members it would be beneficial to review the purpose of the DUR program. Dr. Holeman reviewed requirements that were outlined by OBRA 90 for states' DUR programs, as well as the roles and responsibilities of the DUR Board and the state Medicaid agencies in regard to drug utilization review. Dr. Holeman stated many proactive changes to the Pharmacy Program have been implemented by this Board.

**Prior Authorization Status of Immunosuppressants:**

HID gathered utilization data for the fiscal year 2009 (7/1/08- 6/30/09) for the immunosuppressant class. This data was analyzed to determine if these agents were being used appropriately based on diagnoses. Dr. Holeman presented this data, concluding that these agents were being appropriately used. DOM requested the DUR Board's counsel regarding whether the prior authorization requirement should be lifted for the immunosuppressant class. Dr. Donahoe motioned that this prior authorization requirement be lifted but monitored the next year by HID for appropriate utilization. Dr. Strong seconded the motion. All voted in favor of the motion.

**Appropriate Place in Therapy for Isentress®:**

Recently, the AIDS Healthcare Foundation sent letters to all state AIDS Drug Assistance Programs (ADAP) and Medicaid directors requesting that Isentress® be placed on prior authorization in order to control costs while still ensuring access to the agent for those patients whom it was medically necessary. Based on the letter from AHF, DOM asked HID to conduct claims analyses of Isentress® Utilization. Utilization for three time periods ( 7/1/08 thru 9/25/09) were reported to the Board. It was noted that there was a steady increase in the average number of claims per month of approximately 18% even after the expanded indication for first-line therapy in July 2009. Based on the information obtained, DOM requested counsel of the DUR Board members regarding prospective prior authorization of Isentress®. After some discussion among the Board, it was recommended by Dr. Donahoe that this class be reviewed by the P&T Committee for PDL placement, rather than focusing on a single agent for prior authorization. Dr. Donahoe continued that consultation with Infectious Disease specialists would be helpful as it would be out of most DUR Board members' field of expertise. Ms. Veazey seconded the motion. All voted in favor of the motion.

**Alzheimer's Agents:**

At the October 2009 Mississippi Medicaid Pharmacy and Therapeutics Committee Meeting, it was noted by committee members that utilization of the Alzheimer's agents was rather high, considering that most of the beneficiaries who require these medications should be Medicare eligible. The P&T committee asked that the DUR Board analyze this utilization further to determine what Medicaid beneficiaries are receiving these medications. There were many concern's recognized by DOM through these reports. While utilization in beneficiaries over the age of 60 appeared to be appropriate, the number of beneficiaries under the age of 50 receiving these medications was noted to be concerning. Only 3 beneficiaries had an appropriate diagnosis of Alzheimer's disease. DOM requested the DUR Board's counsel whether age limits should be implemented for

this class at the point of sale. Dr. Donahoe recommended, after much Board discussion, to start with the development of a RDUR criterion identifying those beneficiaries under age 50 receiving an Alzheimer's agent with no appropriate diagnosis. He also asked for a review of activity surrounding this criterion in six months to one year. This motion was seconded by Dr. Strong. All voted in favor of the motion.

**Other Criteria Recommendations:**

Dr. Reed asked for the Board to accept these recommendations as a block vote. All voted in favor of the motion.

**FDA Updates:**

Dr. Holeman asked if there were any questions in regard to the submitted updates. No questions were raised.

Before the conclusion of the meeting, Dr. Reed asked if there was any other business to be discussed.

Dr. Clayton interjected that she had a few items that she would like to present. She noted that the ADHD medications were some of the only controlled substances that did not have quantity limits for Mississippi Medicaid beneficiaries. After much concern and discussion, Dr. Donahoe motioned that an age limit of 21 and below be placed on the whole class. Also, he recommended that a cumulative limit of 31 units per month be placed on the extended-release ADHD medications. This was seconded by Dr. Paul Read as he had witnessed definite abuse of these medications from the retail pharmacy level. All voted in favor of this motion. The discussion of the short-acting ADHD agents was ended by Ms. Clark asking HID to run some analyses on these medication and report back to the Board at the next meeting. She stated that with this report, the Board might need to look at limiting these formulations also. Dr. Clayton continued by stating that the web submission of a prior authorization through the Mississippi Medicaid web portal is set to go live in a few weeks, easing some of the paperwork burden on physicians and clinics.

Dr. Mark Reed noted that the last order of business for the Board is to elect a Chairperson. Dr. Donahoe began by nominating Dr. Mark Reed to continue as Chairman of the Board. All voted in favor of the motion. Vickie Veazey nominated Dr. Donahoe to serve as Vice Chair of the Board. All voted in favor of the motion.

Dr. Mark Reed called for the meeting to be adjourned at 3:00 p.m. The next meeting will be held at 2:00 p.m. on February 18, 2010.

Respectfully Submitted  
Health Information Designs, Inc.