



STATE MEDICAID DUR BOARD MEETING
THURSDAY, May 12, 2005
7:00 a.m. to 8:30 a.m.
Cannon Health Building
Room 125



MINUTES

Board Members Present:

Charles M. Arena, M.D.
Derek G. Christensen, R.Ph.
Dominic DeRose, R.Ph.
Karen Gunning, Pharm D.

Bradford D. Hare, M.D.
Jeff Jones, R.Ph.
Wilhelm T. Lehmann, M.D.
Bradley Pace, PA-C

Board Members Excused:

Lowry Bushnell, M.D.
Colin B. VanOrman, M.D.

Joseph K. Miner, M.D.

Dept. of Health/Div. of Health Care Financing Staff Present:

Rae Dell Ashley
Merelynn Berrett
Richard Sorenson
Duane Parke

Suzanne Allgaier
Tim Morely
Nanette Waters
Tom Jones

Other Individuals Present:

Jeff A. Buel, J&J
Shirley Murrow, Janssen Medical
Patrick, Vojta, Boehringer Ingelheim
Pierre Thoumsin, Amgen
Barbara Boner, Novartis
Larry Thomas, Jr., U of U
Kerri Fakata, Life Tree Pain Clinic
Joseph Yau, VMH
Laura Hill, Takeda

Craig Boody, Lilly
Alan Sloan, Purdue
Shawn Prince, Elan
Alan Bailey, Pfizer
Tim Smith, Pfizer
Martene Balker, U of U
Scott Brown, Elan
Jim Rodgerson, Merck

Meeting conducted by: Duane Parke

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1. Minutes for May 2005 where reviewed and approved.
 2. Duane noted that a review of 1600 of 3,000 claims of fentanyl/Duragesic utilizations for the past 4 months show possibly two cases where a patient did have an increase in number of patches and increase in strength. He noted that the generic mandate went into effect 2/17/05 so there was no long terms patterns emerging. He also indicated that just looking at the

Duragesic utilization for the first six weeks showed patients that had increase number of patches and increase strength, so there was no significant problem apparent based on claim history. Rick noted that the request for prior approval for Duragesic has fallen off this past month.

Brad noted that price may be a factor since the net of rebate may show the brand name to be significantly less expensive than the generic. Karen said that as more generics come into the market the price will continue to fall. Duane said that selectively exempting prior approval on a brand based on price alone causes confusion to providers when looking at the program as a whole. The DUR Board requested that a price comparison be presented next month. (Check on all three wholesaler supply for 75mcg for June meeting)

3. The DUR Board discussed possible restrictions on the muscle relaxant drugs. A utilization study of the therapeutic class showed that there were some clients receiving large quantities, but at the top end, baclofen, dantrolene and tizanidine predominated which would imply those patients with spinal cord injuries were treating spasms. Carisoprodol showed that highest total utilization based on units. Carisoprodol has a cumulative limit of 120 units/30 days. Brad noted that there still is room to further restrict carisoprodol and other excepting out baclofen, dantrolene and tizanidine. He said that two weeks is the nominal treatment time after which the agents are just providing sedation. Brad asked if there was a way to give a short term supply and then have a yearly or 90 day cumulative limit. Duane said he will inquire if that type of programming is possible. The DUR Board requested that a proposal be presented next month.
4. The DUR Board discussed butalbital utilization. Duane noted that there are four formulations for butalbital: butalbital/ASA/caffeine; butalbital/ASA/caffeine/codeine; butalbital/APAP/caffeine; and butalbital/APAP/caffeine/codeine. There were 2076 clients using these products in CY2004. The top 300-400 utilizers had excessive use. Brad noted that there is more and more evidence that shows continuous use actually provokes headache and that a limit of 30 tablets is a reasonable limit. Duane indicated that the entire group could be placed on a cumulative or the butalbital/APAP combinations could be added to the existing narc/APAP restriction. The DUR Board requested that the butalbital groups, as a whole, be limited to a cumulative limit and a proposal be offered next month.
5. Keri Fakata, Pharm D. Lifetree Pain Clinic addressed the DUR Board regarding Prialt. Dr. Fakata noted that Prialt is a neuronal calcium channel blocker that inhibits the influx of calcium into the pre-synaptic central nociceptive neuron and inhibits the transmission of pain. Keri noted that this product is covered by Medicare. Prialt is given intrathecally. Brad noted that as Prialt conversion proceeds, the narcotic utilization would be expected to decrease. A specific CPT code probably will be available in January 2007. Rae Dell noted that the physician can bill for the office call and the J-code for the product, which in this case is J3490 (unclassified drugs). No action was taken on this item.
6. Pat Bojta, Boehringer-Ingelheim discussed Spiriva (tiotropium bromide), an anticholinergic bronchodilator used for COPD (chronic bronchitis and emphysema). Spiriva is the first once daily bronchodilator. It is co-administered with beta-agonists but is not to be co-administered with other anticholinergics. It is more cost effective than ipratropium bromide or salmeterol regimens. Duane noted that 1/4 of current patients on Spiriva are under age 50 and many of these may not be appropriate candidates for Spiriva. Karen noted that it should not be used concomitantly with Atrovent or Combivent or other forms of long acting

anticholinergics, and once daily dosing should not be exceeded. The DUR Board requested a proposal regarding concomitant use and unit restriction be presented next month.

7. Ventavis discussion was tabled until next month.
- 8 Rick noted that the prior on Zelnorm does not address separate out irritable bowel syndrome and chronic constipation in regards to use of stimulant laxatives. Karen said she would forward a recommendation for correcting the prior approval criteria to be considered by the DUR Board.

Karen requested that coverage of OTC Vit. B complex be considered and also that the prior approval criteria for Sanctura and Vesicare be reviewed.

Next meeting set for June 9, 2005
Meeting adjourned.

The DUR Board Prior Approval Subcommittee convened and considered 13 petitions.

