



STATE MEDICAID DUR BOARD MEETING  
THURSDAY, January 13, 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.**

**Wilhelm T. Lehmann, M.D.**  
**Joseph K. Miner, M.D.**  
**Bradley Pace, PA-C**  
**Colin B. VanOrman, M.D.**

**Board Members Excused:**

**Lowry Bushnell, M.D.**

**Jeff Jones, R.Ph.**

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

**Rae Dell Ashley**  
**Merelynn Berrett**  
**Richard Sorenson**  
**Nanette Waters**

**Suzanne Allgaier**  
**Tim Morley**  
**Darlene Benson**

**Other Individuals Present:**

**Craig Boody, Lilly**  
**Alan Bailey, Pfizer**  
**Oscar Fuller, CMS**  
**Jeff A. Buel, J & J**  
**Marianne Mabey, U of U**  
**Rich Heddense, MedImmune, Inc.**

**Tim Smith, Pfizer**  
**Cap Ferry LEC**  
**Joe Busby, Lilly**  
**Paul Pereira, TAP**  
**Cassandra Bellamy, U of U**

Meeting conducted by: Derek Christensen

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1. Minutes for December 2004 were reviewed and approved without any correction.
  2. DUR Board Chairman elections were deferred to the February 10, 2005 meeting.
  3. Tim discussed the policy on Palladone. He noted that the recommendations are to allow the use of Palladone for cancer with no restrictions other than the correct ICD.9 code, which is the same for other long acting narcotics. For chronic nonmalignant pain (CNP), the cumulative limit would be set at 30 capsules per 30 days. The 24mg and 32mg dose would not be covered for CNP. Palladone would be used simultaneously with

methadone, but not simultaneously with other long acting narcotics. Brad thought the simultaneous use of methadone and any long acting narcotics including Palladone is inappropriate. Karen said that policy should be changed to strike methadone with concurrent use of long-acting narcotics. The DUR Board requested the methadone issue be brought back next month. Brad noted that a dose equivalency be established for Palladone vs. morphine. Brad also noted that other diagnoses including HIV be included in the ICD.9 restrictions. The DUR Board wants to review the entire policy next month.

4. Tim discussed amending the policy for Restatis as outlined in the handout. Charles noted that the listed conditions all have a genetic predisposition. It makes sense to the prior approval time period to be the same for all five. The DUR Board moved to make the prior approval period for one year for all five listed conditions.
5. RaeDell discussed the proposed prior approval criteria for Trizivir, the new combination HIV drug that contains three nucleoside reverse transcriptase inhibitors (NRTI). Brad asked if the combination drug is less costly than the three components separately (7¢ more for Trizivir). Karen noted that anything that can be done to improve compliance should be pursued. RaeDell noted that a combination drug decreased options on drug strengths. The DUR Board requested that this issue be brought back next month. Karen noted that she will ask an expert at the U of U to weigh in.

Next meeting set for February 10, 2005.

Meeting adjourned.

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

