



STATE MEDICAID DUR BOARD MEETING  
 THURSDAY, July 11, 2013  
 7:00 a.m. to 8:30 a.m.  
 Cannon Health Building  
 Room 125



# MINUTES

**Board Members Present:**

Jennifer Brinton, MD  
 George Hamlin, PharmD  
 Mr. Kumar Shah  
 Michael Symond, M.D.

Tony Dalpiaz, PharmD.  
 Bradford Hare, M.D.  
 Susan Siegfroid, M.D.  
 Keith Tolman, M.D.

**Board Members Excused:**

Jay Aldous, DDS  
 Kyle Jones, M.D.

Mark Balk, PharmD.

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

Robyn Seely, PharmD.  
 Lisa V Hunt, R.Ph.  
 Richard Sorenson, R.N.  
 Heather Santacruz, R.N.

Bobbi Hansen, C.Ph.T.  
 Trevor Smith C.Ph.T.  
 Marisha Kissell, R.N.  
 Merelynn Berrett, R.N.

**Other Individuals Present:**

Scott Larson, BMS  
 Patty Harwood, Medimmune  
 Anne Marie Licos, Medimmune  
 Gary Louden, Gilead  
 Charissa Anne, J&J  
 Brooks Hubard, BI

Joanita Lake, UofU  
 Gary Oderda, UofU  
 Kim Eggert, Gilead  
 Lori Howarth, Bayer  
 Molly Meekin, Hyperion  
 Bert Jones, GSK

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**Meeting conducted by: Tony Dalpiaz, Pharm.D.**

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1. **Welcome** – Tony Dalpiaz opened the meeting.
2. **Housekeeping** – Robyn Seely announced that this would be Doctore Brad Hare’s last meeting and welcomed Doctor Michael Symond to the board. She also reminded guests and board members to sign in.
3. **P&T Committee report** – Lisa Hunt addressed the board she reported that the P&T will be re-reviewing topics discussed in June for further clarification (topics include Xa inhibitors and GLP-1s). In July they will also be reviewing the sulfonylaurea drug class.
4. **Approval of prior meeting minutes** – Keith Tolman made a motion to approve the June minutes as written. Jennifer Brinton seconded the motion. The motion was approved unanimously.

5. **New Anti-Convulsants** – Joanita Lake presented the clinical evidence prepared by the University of Utah Drug Information Center.

**Board Discussion** – Robyn Seely presented the following purposed prior authorization criteria for Fycompa, Potiga and Oxtellar XR to keep use on label:

- Diagnosis of parial-onset seizures
- Name and dose of all current and past anticonvulsant agents
- Explanation of failure on or contraindication to other anticonvulsant agents
- Age requirement:
  - Fycompa: age  $\geq$  12 years
  - Potiga: age  $\geq$  18 years
  - Oxtellar XR: age  $\geq$  6 years

Robyn Seely reported the board that the only other anticonvulsant that requires prior authorization is Sabril, which requires an eye exam due to the high instance of patients going blind while taking this medication. She also reported that there has been little to no utilization for these medications so far, due to how new they are to the market.

Susan Siegfroid asked about what indication the minimal utilization was for. Robyn reported that no diagnosis was submitted, thus making it difficult to determine the indication for which the medication was prescribed. Brad Hare asked if the immediate release presentation of the medications was any less efficacious than the extended release being discussed. Joanita Lake responded that the evidence suggested that the extended release medication was developed to promote better adherence.

Susan Siegfroid suggested the Oxtellar XR may be used a second or third line therapy for patients with Bipolar Disorder when they have tried and failed on or have a contraindication to Lithium. This being off label use is an example of why it would benefit the Pharmacy program to have this medication on prior authorization. Brad Hare added that often anticonvulsant drugs find their way into treating neuropathic pain.

Susan Siegfroid suggested that for Potiga an annual eye exam be required due to some potential adverse effects of the medication.

Dr. Brad Hare excused himself from the meeting during the board discussion and did not participate in any further motions.

Jennifer Brinton asked if the board wanted to look at other anticonvulsants (outside of these indicated as adjunctive therapy) if it would have to be discussed in a future meeting. Robyn Seely responded that yes, there would need to be notification to the public if other possible prior authorizations are to be discussed.

George Hamblin stated that the duty of the board is to look at categories or classes of medications and limit or deter off label or inappropriate use. This is done by listing the specific criteria approved by the FDA for use of the specified medication.

Jennifer Brinton asked if they could add to the criteria “appropriate monitoring as recommended by the manufacturer is followed,” rather than listing out the specifics. Tony Dapaiz directed the question to the prior authorization nurses, and asked if that would be sufficient. Richard Sorenson responded that if it is something that is tangible, that can be reviewed and approved then it is better than something that might be questionable and require peer review to come to a determination.

**Public Comment** – Bert Jones (GSK) addressed the board and suggested that other states have managed this class of medication by requiring that a diagnosis be submitted on claims rather than requiring a prior authorization.

**Board Action** – Jennifer Brinton made a motion to approved the purposed prior authorization criteria with the addition of requiring an annual eye exam when requesting Potiga. Susan Siegfried seconded the motion. The motion was approved unanimously.

6. **Meeting adjourned** – Kumar Shah made a motion to close the meeting for review of patient petitions. Michael Symond seconded the motion. The motion was approved unanimously.

The next DUR Board meeting is scheduled for Thursday, August 8, 2013.

Minutes prepared by Bobbi Hansen.

Recording available upon request, send email to [medicaidpharmacy@utah.gov](mailto:medicaidpharmacy@utah.gov)

3 petitions were considered in July.