



STATE MEDICAID DUR BOARD MEETING  
 THURSDAY, November 14, 2013  
 7:00 a.m. to 8:30 a.m.  
 Cannon Health Building  
 Room 114



# MINUTES

**Board Members Present:**

Tony Dalpiaz, PharmD.  
 George Hamblin, PharmD  
 Mr. Kumar Shah  
 Michael Symond, M.D.  
 Susan Siegfroid, M.D.

Jennifer Brinton, MD  
 Jay Aldus, DDS  
 Kyle Jones, M.D.  
 Keith Tolman, M.D.

**Board Members Excused:**

Mark Balk, PharmD.

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

Robyn Seely, PharmD.  
 Tim Morley R.Ph.  
 Merelynn Berrett, R.N.  
 Heather Santacruz, R.N.

Lisa V Hunt, R.Ph.  
 Trevor Smith C.Ph.T.  
 Richard Sorenson, R.N.

**Other Individuals Present:**

Gary Oderda, UofU  
 Bryan Larson, UofU  
 Robert Jaramillo, Forest  
 Jeff Rich, BMS

Joanita Lake, UofU  
 Charissa Anne, J&J  
 Sean McGarn, Forest

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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 there will be no petitions following the meeting.
3. **P&T Committee report** – Lisa Hunt addressed the board she reported that the P&T committee will be reviewing phosphate-binding agents. She also reported that a new PDL is being drafted to reflect 2014 changes.
4. **Approval of prior meeting minutes** – Keith Tolman made a motion to approve the September minutes as written. George Hamblin seconded the motion. The motion was approved unanimously.
5. **Diabetic Agent Review** – Robyn said that after last meeting, it was decided to present all diabetic class medications recently reviewed, including DPP-4s, GLP-1s, TZDs and SGLT2 drug classes, to see if there was a way to provide more consistency in criteria

needed to obtain them. She presented current criteria, comparison in effectiveness, comparisons with other states coverage and ACO coverage, and previous usage from fee for service Medicaid. She proposed that an automatic PA be used on all the drugs. This automatic PA will look for patient age, diagnosis, and a look at the patients drug history to look for contraindications, or step through requirements. This automatic PA will reduce paperwork required by the prescriber, and will ensure patient safety. Prescribers can still fill out a PA for patients who fail to meet one of the automatic PA requirements.

6. **No public comment.**

7. **Board Discussion**

- Some questions were presented about how far in-depth the automatic PA will look for possible contraindications. It was decided that black box warnings were a good place to draw the line, and rely on prescribers to look for other contraindications.
- Another question about if the dispensing pharmacy would need to keep track of currently used prescriptions, and what if a patients uses two different pharmacies. Robyn clarifies that any pharmacy can be used and the automatic PA will generate from Utah Medicaid computer databases and transmit to the pharmacy.
- George Hamblin makes a motion to use the automatic PA as Robyn proposed, and use any blackbox warnings as a barrier to obtain the automatic PA. Jennifer Brinton seconds the motion. Keith Tolman abstains from voting, all other board members approve the motion.

8. **Tudorza** – Joanita Lake presented the clinical evidence prepared by the University of Utah Drug Information Center.

9. **Public Comment** – Robert Jaramillo, (Forest) provided information about Tudorza and requested that it be available to Medicaid patients.

10. **Board Discussion**

- Robyn told the board about current criteria and preferred drugs in this class.
- Robyn suggests keeping the drug non preferred, and requiring a step through one of the preferred agents.
- Board members asked why this would be done.
- Robyn said that as these products in this class have been reviewed by the P&T committee as equally safe and effective products. After this determination, cost is looked at to determine placement on the PDL.
- Lisa Hunt clarified that a drug can change from preferred to non-preferred on the PDL once it has been reviewed based upon pricing and any rebates offered by manufacturers.
- George Hamblin said that based on clinical evidence, like the P&T committee found, they are equally safe and effective. In cases such as this, it would be wise to then look at cost benefits between the two drugs.
- George Hamblin makes a motion to make the Tudorza require a step through a preferred agent, an automatic PA check for mutual exclusivity, and a quantity limit of one inhaler for 30 days. The motion was seconded by Mike Symond. All board

members in favor.

## **11. Meeting adjourned**

The next DUR Board meeting is scheduled for Thursday, January 8, Insulin Pens.  
Minutes prepared by Trevor Smith.

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