



# MINUTES

Utah Department of Health  
Drug Utilization Review Board

**Thursday, July 14th, 2016**  
**7:15 a.m. to 8:30 a.m.**  
**Cannon Health Building**  
**Room 114**

**Board Members Present**

Jay Aldus, D.D.S	Jennifer Brinton, M.D., Board Chair
Keith Tolman, M.D	Susan Siegfried, M.D
Steve Lore, M.D	Ben Berrett, Pharm D
Holly Gurgle, Pharm.D.	Kumar Shah, M.Sc., P.Eng.

**Board Members Excused:**

Katherine Smith, Pharm D	Michael Symond, M.D.
Neal Catalano, Pharm D	

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

Chad Hope, Pharm.D.	Heather Santacruz, R.N.
Alyssa Pitts, R.N.	Bryan Larson, Pharm.D.
Merelynn Berrett, R.N	Megan Schlappi, C.Ph.T.

**Other Individuals Present:**

Joanita Lake, UofU*	Chris Anstead, Amgen
Caroline Kicklighter, Novartis	Becky Gonzales, ViiV Healthcare
Don Mccafferey, Vertex	Lisa Allen, Vertex
Paul Williams, Takeda	Linda Craig, Amgen
Lovell Robinson, Abbvie	Ashley Polce, Abbvie
Charissa Anne, Johnson & Johnson	Russell Vinik, UofU*
Risa Reuscher, Amgen	Sal Lufaso, Horizon
Joanne Lafleur, UofU *	Lori Howarth, Bayer
Michael Faithe, Amgen	Cody Ball, Select Health
Scott Clegg, Lilly	David Copeland, Sego
Laura Britton, UUHP	

\*UofU = University of Utah

Meeting conducted by: Jennifer Brinton, M.D.

**1. Welcome & Housekeeping:** Jennifer Brinton opened the meeting and reminded everyone to sign the rosters. Robyn Seely asked the board members for their input on any future DUR meeting topics they may want to see reviewed.

**2. Review and Approval of May Minutes:** Kumar Shah motioned to approve the minutes from May. Steve Lore seconded. 7 out of 8 board members approved. Keith Tolman abstained.

### **3. 9 Month Review: Hyaluronic Acid derivatives, Orkambi & Kalydeco and PCSK9**

**Inhibitors:** Robyn Seely reviewed clinical prior authorization (PA) criteria that had been created approximately nine months ago by the Board. She said that the PA criteria for these respective medications are working well, guiding drug use to the most appropriate patients.

**4. Reconsideration of Prior Authorization Criteria:** The Board reviewed outdated clinical PA criteria. They motioned to remove the clinical prior authorization criteria for the following medications: Humira, Enbrel, Actemra, Cimzia, Cosentyx, Entyvio, Kineret, Orencia, Otezla, Remicade, Simponi, Stelera, Taltz, Xeljanz IR/ER, Rituxan, Nucynta and Nucynta ER. Keith Tolman made the motion to remove the PA criteria. Steve Lore seconded. All in favor.

**5. Short Acting Opioids and Opioid/Acetaminophen combinations:** Joanita Lake from the University of Utah Drug Regimen Review Center presented drug information including indications, studies, side effects, and other information about short-acting opioids and short-acting opioid/acetaminophen combination products (hereafter collectively referred to as SAOs). Data was also presented about the utilization of the drugs in the Utah Medicaid population.

### **6. Public Comments:**

- a) Amgen yielded their time
- b) Pfizer yielded their time
- c) Cystic Fibrosis Foundation: Robyn Seely read a letter previously sent to the board from the Cystic Fibrosis Foundation recommending that Utah Medicaid classify Orkambi and Kalydeco as preferred on the preferred drug list.
- d) Abbvie: Ashley Polce discussed the product Humira and its two new indications.
- e) Healthy U: Russel Vinik discussed the cost vs. benefits of Orkambi and Kalydeco.

### **7. Board Discussion:**

- a) Jennifer Brinton noted that physicians have to complete training regarding opiates. She observed that the training does not discuss that the number of tablets being prescribed as a problem, although many practitioners recognize that is it a problem.
- b) Chad Hope reminded the board that this discussion was about acute and chronic non-cancer pain. A cancer diagnosis on a pharmacy claim bypasses any edits, and hospice patients do not receive their medications through fee-for-service pharmacy claims. Chad also explained to the board that Medicaid's current edits on SAOs allow for a client to fill 180 tablets per month for any combination of any SAOs.
- c) Keith Tolman discussed the negative effects seen with chronic opioid use. He also noted that quality of life and function are not addressed in any of the opiate studies.
- d) Chad Hope explained to the board that Medicaid does have the ability in their system to edit on days' supply and that some States limit the first fill to 7 days or less.
- e) Steve Lore discussed his work with patients who have osteoarthritis. He explained that some patients have osteoarthritis that is inoperable and they simply cannot get out of bed without some sort of SAO. He asked the board how the patients were going to be treated if they did not have access to SAOs.
- f) Keith Tolman and Steve Lore debated the pros and cons of limiting members' access to SAOs. They agreed that physicians should treat the patients, not treat the data. They also discussed alternative therapy and the limitations that may occur.
- g) Jennifer Brinton notified the board that time was up. She suggested continuing this discussion next month.
- h) Keith Tolman made a motion to limit SAOs prescriptions to 7 days for the initial fill, for patients that are not already taking SAOs. If the patient needs to be on the medication

longer than 7 days, there must be some justification from the physician. Patients who currently have SAO prescriptions will be “grandfathered” and will not need a 7 day fill of their current SAO(s). Kumar Shah Seconded. All in favor.

**8. Public Meeting Adjourned**

**9. Next meeting is scheduled for August 11<sup>th</sup>, 2016. Discussion on short acting opiates will continue.**

---

Audio recordings of DUR meetings are available online at:

<https://medicaid.utah.gov/pharmacy/drugutilizationreviewboard?p=DUR%20Board%20Audio%20Recordings/>