



## AGENDA

### State and Public School Life and Health Insurance Board Drug Utilization and Evaluation Committee

February 07, 2014

1:00 p.m.

EBD Board Room – 501 Building, Suite 500

- I. *Call to Order ..... Kat Neill, Chairman*
- II. *Approval of November 4, 2013 Minutes ..... Kat Neill, Chairman*
- III. *2015 Formulary Considerations ..... David Keisner, UAMS*
- IV. *Lipid Guidelines ..... Jill Johnson, UAMS*
- V. *Hepatitis C Review ..... Jill Johnson, UAMS*
- VI. *2<sup>nd</sup> Review of Drugs ..... Jill Johnson, UAMS*
- VII. *New Drugs ..... Jill Johnson, UAMS*
- VIII. *Subcommittee Structure ..... Kat Neill, UAMS*
- XI. *Summary of DUEC Cost-Savings Recommendations ..... David Keisner, UAMS*
- X. *EBD Report.....Michele Hazelett, Chief Health Services Officer*

#### ***Upcoming Meetings***

***April 7th***

***NOTE: All material for this meeting will be available by electronic means only aseps-board@dfa.arkansas.gov***

***Notice: Silence your cell phones. Keep your personal conversations to a minimum. Observe restrictions designating areas as "Members and Staff only"***

**State and Public School Life and Health Insurance  
Board Clinical and Fiscal Drug Utilization and  
Evaluation Committee  
Minutes  
February 7, 2014**

The State and Public Life and Health Insurance Board, Drug Utilization and Evaluation Committee (DUEC) met on Friday, February 7, 2014 at 1:00 p.m., in the EBD Board Room, 501 Woodlane, Little Rock, AR.

**Members present:**

Dr. Matthew Hadley  
Dr. Kat Neill  
Dr. William Golden (teleconference)  
Larry Dickerson  
Eric Crumbaugh  
Dr. Hank Simmons  
Connie Bennett  
Dr. John Kirtley  
Dr. Jill Johnson  
Mark McGrew  
Dr. Joe Stallings (teleconference)

**Members absent:**

Michele Hazelett, Chief Health Services Officer, Employee Benefits Division

**OTHERS PRESENT**

Jill Johnson, Dwight Davis, David Keisner,, UAMS College of Pharmacy; John Kirtley, State Board of Pharmacy; Sherry Bryant, Janna Keathley, Makesha Thompson EBD; Connie Bennett Catamaran; Marc Watts, ASEA; Warren Tyes, Merck; Ronda Walthall, AHTD; Ro Summers, ACHI; Frances Bauman, N. Nordisk; Charlene Kaiser, Amgen; Kanita Collins, Takisha Sanders, Health Advantage; Barry Fielder, Qual Choice; Robert Boyd, Windstream; Amanda Hatfield, ARCH

**CALL TO ORDER**

Meeting was called to order by Dr. Kat Neill, Chairman.

## **APPROVAL OF MINUTES**

The motion was made by Dr. Neill to approve the November 4, 2013 minutes. Simmons made the motion to approve. Dickerson seconded. All were in favor.  
**Minutes Approved.**

## **2015 FORMULARY CONSIDERATIONS: *by Dr. David Keisner, UAMS***

Dr. Keisner reported in 2015 pharmacy co-pay will count toward the maximum out-of-pocket. Reference pricing meds allow for very large co-pays, which also counts toward the maximum out-of-pocket. When the member reaches their maximum the meds are free.

Dr. Keisner reported that the Tech department is researching data to show how many members reached their out-of-pocket max in 2013. Also, if pharmacy co-pays had applied, how many would have reached the maximum out-of-pocket.

Dr. Keisner also recommended the committee consider a mandatory generic to avoid large co-pays. Currently, if there is a brand name and generic available the member pays the generic cost plus the difference in the amount of the brand and generic. This will also count toward the maximum out-of-pocket.

Reference pricing does not apply to the Bronze Plan. When the member meets their deductible the cost is 20%.

Bennett reported that Catamaran is developing a Generic Centric Formulary. It should be available by second quarter. Catamaran is reviewing high quality generic products in all the drug classes. Those will be supplemented by preferred brands where there are no generics available in the class. Catamaran is also reviewing a formulary list of meds that are popular with coupons to possibly exclude them.

Dr. Neill requested a more detailed explanation regarding how the coupons are processed.

Bennett reported on coupons with co-pay assistance. A member begins taking a med listed as Tier 3. The co-pay is higher for this med. However, with the co-pay card the member could receive the med with no payment. The cards can be valid up to two (2) years. At the end of the two (2) year period, a physician may appeal the brand med to be covered due to the success of the patient. In terms, the patient has not failed therapy with a generic alternate or a preferred brand.

Catamaran is developing a list to attach to the plan that will eliminate this. When the med is excluded from the plan, the co-pay card will not be approved at the pharmacy.

Dr. Neill inquired if there is a way to identify if the med is processed with a coupon. Bennett reported there is not an avenue to identify processing a coupon.

Dr. Keisner reported reviewing a selection of coupons to exclude. This is mainly due to members reaching their maximum out-of-pocket with no payment.

### **LIPID GUIDELINES:** *by Dr. Jill Johnson, UAMS*

Dr. Johnson reported that the updated Lipid guidelines were published in December 2013 from The American Heart and The American College of Cardiology. In November 2013 the committee voted to stop covering all fenofibrate products. The effective date is May 2014. The anticipated savings is \$940,000 annually. Last quarter EBD had approximately 1400 utilizers of fenofibrate products. In November 2013, there was discussion that there is a lack of RCT evidence for efficacy of non-statin use in hypercholesterolemia patients.

The only data that supports their use are the VA-HIT and Helsinki Heart trials which used gemfibrozil. The committee left gemfibrozil available without barriers. The other data includes the FIELD trial which used micronized fenofibrate 200 mg daily in patients not taking statins. After a mid-trial protocol amendment, the trial found a reduction in nonfatal MI and revascularizations. There were several problems with the FIELD trial that should be considered.

There are two (2) options to consider. (1) Cover no fenofibrate products. Keep the policy as it is with the effective date May 2014. (2) Cover fenofibrate products per closed formulary. (Exclude: Antara, Tricor, Fenoglide, Lipofen, Triglide. etc.)

Gemfibrozil will continue to be covered by the plan without barriers regardless of which option is chosen.

Dr. Golden motioned to adopt the previous recommendations. Dickerson seconded. All were in favor.

### **Motion Approved.**

### **HEPATITIS C REVIEW:** *by Dr. Jill Johnson, UAMS*

Dr. Johnson reported that there are two (2) new Hepatitis C products for review; Olysio and Sovaldi. These are direct acting antivirals. The previous meds Peginterferon and Ribavirin resulted in a Hepatitis C sustained viral response. A sustained viral response is the ability to detect virus 12 – 24 weeks after the therapy ends. There was a 40% response for Peginterferon and Ribavirin. However, when

Boceprevir and Telaprevir were added the response increased to 75% of patients achieving a sustained viral response. Little data are available for Olysio beyond the package insert. Some data are published for Sovaldi.

Dr. Golden motioned to table until the next meeting waiting for updated guidelines. Simmons seconded. All were in favor.

### **Motion Approved.**

### **2<sup>ND</sup> REVIEW OF DRUGS:** *by Dr. Jill Johnson, UAMS*

Dr. Johnson reported that **Stivarga** is for treatment of metastatic colorectal cancer in patients previously treated with fluoropyrimidine-, oxaliplatin-, and irinotecan-based chemotherapy, anti-VEGF therapy, or anti-EGFR therapy (if KRAS wild type). There is not any significant change in available evidence since the last time it was discussed.

Dr. Hadley motioned to continue to exclude. Dickerson seconded. All were in favor.

### **Motion Approved.**

Dr. Johnson reported that **Tafinlar** has no new trial data found. Tafinlar is a kinase inhibitor indicated as a single agent for treatment of patients w/ unresectable or metastatic melanoma with BRAF V600E mutation as detected by an FDA approved test.

Dr. Johnson recommended the committee exclude Tafinlar.

Dr. Keisner acknowledged that the Delivery Coordination Subcommittee is being formed to address strategies for review and coverage for particular drug classes including chemotherapy agents.

Dr. Hadley motioned to continue to exclude. Dr. Neill seconded. All were in favor.

### **Motion Approved.**

### **NEW DRUGS:** *by Dr. Jill Johnson, UAMS*

1. Actemra Inj – Tx of moderate to severe active RA.

Dickerson motioned to approve on Tier 4 with a PA. Dr. Hadley seconded. All were in favor.

**Motion Approved.**

2. Adempas – Tx of pulmonary HTN.

Dr. Hadley motioned to approve on Tier 4 with PA criteria. Dickerson seconded. All were in favor.

**Motion Approved.**

3. Opsumit - Tx of pulmonary HTN.

Dr. Hadley motioned to table until the next meeting. Dr. Neill seconded. All were in favor.

**Motion Approved.**

4. Fycompa tabs – Tx of partial onset seizures.

Dickerson motioned to approve on Tier 3. Dr. Hadley seconded. All were in favor.

**Motion Approved.**

5. Noxafil – for prophylaxis of invasive Aspergillus & Candida infections.

Dr. Hadley motioned to exclude. Dr. Neill seconded. All were in **favor**.

**Motion Approved.**

6. Zomig Spray – Tx of migraine

Dr. Hadley motioned to approve on Tier 3 with quantity limits. Neill seconded. All were in favor.

**Motion Approved.**

7. Aerospan Inhaler – Tx of Asthma

Dickerson motioned to cover with Tier 3. Dr. Simmons seconded. All were in favor.

**Motion Approved.**

8. Olysio – Oral therapy for treatment of HCV

Dr. Golden motioned to exclude until more data is available. Dr. Simmons seconded. All were in favor.

**Motion Approved.**

9. Sovaldi – Oral therapy for treatment of HCV

Dr. Golden motioned to exclude until more data is available. Dr. Simmons seconded. All were in favor.

**Motion Approved.**

10. Valchlor Gel – Tx of Stage IA and IB mycosis fungoides

Dr. Hadley motioned to table for 6 months. Dr. McGrew seconded. All were in favor.

**Motion Approved.**

11. Brintellix – Tx of major depression.

Dr. Hadley motioned to exclude. Dr. Neill seconded. All were in favor.

**Motion Approved.**

12. Glycate – Tx of Ulcers

Dr. Hadley motioned to exclude. Dr. Neill seconded. All were in favor.

**Motion Approved.**

13. Zorvolex – Tx of mild to moderate pain

Dr. Hadley motioned to exclude. Dickerson seconded. All were in favor.

**Motion Approved.**

14. Achipex Sprinkle Caps – Tx of GERD.

Dr. Simmons motioned to exclude. Dr. Hadley seconded. All were in favor.

**Motion Approved.**

15. Antara - Oral lipid lowering agent

Dr. Hadley motioned to exclude. Dickerson seconded. All were in favor.

**Motion Approved.**

16. Fetzima – Tx for adults with major depression.

Dr. Hadley motioned to exclude. Dr. Simmons seconded. All were in favor.

**Motion Approved.**

17. Granix –Tx of Chemotherapy induced neutroopenia

Dr. Hadley motioned to approve on Tier 4 with a PA and exclude Neupogen.  
All were in favor.

**Motion Approved.**

18. Imbruvica Caps – Tx of mantle cell lymphoma

Dr. Hadley motioned to exclude until more data is available. Dickerson seconded. All were in favor.

**Motion Approved.**

19. Otrexup – Tx for severe active RA.

Dr. Hadley motioned to exclude. Dickerson seconded. All were in favor.

**Motion Approved.**

20. Prodrin - Tx of headache

McGrew motioned to exclude. Dickerson seconded. All were in favor.

**Motion Approved.**

21. Stendra – To treat erectile dysfunction

Dr. Neill motioned to approve on Tier 2 with a PA and quantity limits.  
Simmons seconded. All were in favor.

**Motion Approved.**



22. Versacloz – Atypical antipsychotic

Dr. Hadley motioned to exclude. Simmons seconded. All were in favor.

**Motion Approved.**

23. Ecoza – Topical antifungal agent

Dr. Hadley motioned to exclude. Simmons seconded. All were in favor.

**Motion Approved.**

24. Pro-Red AC Syrup – cough/cold preparation

Dr. Hadley motioned to exclude. Dr. Neill seconded. All were in favor.

**Motion Approved.**

25. Puralor – Medical Food

Dr. Hadley motioned to exclude. Dr. Neill seconded. All were in favor.

**Motion Approved.**

26. Gazxyva – For chronic lymphocytic leukemia

Medication is covered under the Medical benefit.

27. FluBlok – Flu Vaccine

Dr. Hadley motioned to approve for free. Dr. Neill seconded. All were in Favor.

**Motion Approved.**

28. Amitriptyline – Kit policy

Dr. Simmons motioned to exclude. Dr. Hadley seconded. All were in favor.

**Motion Approved.**

29. Avar Pads – Sulfacetamide – Kit Policy

Dr. Simmons motioned to exclude. Dr. Hadley seconded. All were in favor.

**Motion Approved.**

30. Nicazaldoxy Kit – doxycycline and multivitamin

Dr. Simmons motioned to exclude. Dr. Hadley seconded. All were in favor.

**Motion Approved.**

31. Sumadin Kit – Sulfur wash - Sunscreen

Dr. Simmons motioned to exclude. Dr. Hadley seconded. All were in favor.

**Motion Approved.**

**SUB-COMMITTEE STRUCTURE:** *by Dr. Kat Neill, UAMS*

Dr. Neill reported at the last Board Meeting there was a proposal to form a new sub-committee, the Delivery Coordination Committee. The Committee was formed to resolve issues with chemotherapy agents. Oral agents are categorized with pharmacy, and would be dispensed in the ambulatory setting. Committee members are reviewing the meds and making recommendations. There are also agents categorized with medical. The Medical Policy Group is responsible for making those recommendations. In addition, there are other agents that may fall in the two (2) categories.

The selection for committee members will be implemented. Dr. Matthey Hadley, Dr. Hank Simmons, Dr. Jill Johnson, Michele Hazelett, Dr. Sorsby, Dr. Sidney Keisner, and Connie Bennett all have volunteered for the committee.

Dr. Neill inquired if there have been any suggestions of an Oncology Physician to serve on the Committee. Dr. Keisner reports not at this time. Now that the Board has approved the Committee, the selection process will begin. Dr. Keisner reported that UAMS may be able to assist with a recommendation.

Hazelett reported that Dr. Sorsby is the Medical Director for Qual Choice, and serves on the EBD Medical Policy Group.

## **SUMMARY OF DUEC COST-SAVINGS RECOMMENDATIONS:** *by David Keisner, UAMS*

Dr. Keisner reported there is an expected savings of \$18 million in 2014. Topical testosterone was excluded while the injectable form remained covered with a PA. Reference pricing SNRI's had a savings of \$4 million on Cymbalta. Cymbalta became generic in the latter of 2013. However, the price per pill is \$6.99. Previously the price per pill was \$7.70.

There was a significant decrease in per member per month in January, 2014. In addition, there was migration with the Bronze Plan. There was also an increase in pharmacy co-pay. The \$18 million savings had a large impact on the decrease in per member per month decrease. This is the first large decrease in ten (10) years.

Bennett reported that Catamaran is completing a 2013 Plan review. The trend for the plan is 0.5% compared to the book of business with Catamaran is 4%. It was also compared to other industries in state government at 4.8%. In addition, the trend for the specialty plan is 12% compared to other plans at 15%.

Dr. Neill reported that the committee meets once a quarter with a large amount of material to cover. If the committee is not going to meet more often than quarterly, Dr. Neill recommended to establish the agenda a month prior to the meeting and send it to the members. The material and the minutes will be sent to members a week prior to the meeting.

Dr. Kirtley reported the committee will need to set coverage policies in June in order to meet the deadlines of July and August for adopting rates. Dr. Kirtley also thanked Bob Boyd, one of the newest Board Members, for attending.

Dr. Neill reports that the drug Astagraf was tabled at a previous meeting for review at the next meeting.

Dr. Johnson reports that the generic Astagraf may be more cost effective for a thirty (30) day supply. Dr. Johnson recommended a contingency vote.

Dr. Hadley motioned to approve on the contingency of price. If it is less expensive it will be covered. Dickerson seconded. All were in favor.

### **Motion Approved.**

### **EBD REPORT** *by Michele Hazelett, EBD Chief Health Services Officer*

Hazelett thanked the committee for all their hard work. Dr. Neill welcomed Hazelett to the committee.

### **Meeting Adjourned.**

DUEC 10/14/2013 - 1/6/2014

GPI	DRUG NAME	PRICING (AWP)	INDICATION	SIMILAR THERAPIES ON FORMULARY/AWP
581200931003**	Brintellix	\$262/30 days	Tx of major depressive disorder. Dose: 20mg/day	Currently six subclasses of antidepressants for tx of MDD with a majority available in generic formulations
49102030000312	Glycate (glycopyrrolate) 1.5mg tabs	\$9/1.5mg tab	Oral dosage form for the tx of chronic drooling and peptic/duodenal ulcer. Max dose: 6mg/day	Generic glycopyrrolate = \$2/2mg
401340500003**	Adempas(riociguat)	\$9,000/30 days	For treatment of pulomnary hypertension. Dose: 2.5mg tab 3 times a day	Opsumit \$8,000/30 days - similar. Other treatment options for patients with PAH(WHO Group 1) - Adcirca, Remodulin, Tyvaso, Ventavis, Tracleer
401300500003**	Opsumit (macitentan 10mg)	\$8,208/30 days	For treatment of pulomnary hypertension. Dose: 10mg by mouth daily.	Adempas = \$9,000/30 days. Other treatment options for patients with PAH(WHO Group 1) - Adcirca, Remodulin, Tyvaso, Ventavis, Tracleer
903710502040**	Valchlor Gel (mechlorethamine gel)	\$3,480/60gm	For topical tx of Stage IA and IB mycosis fungoides type cutaneous T-cell lymphoma in patients who have received prior skin-directed therapy	
6650007000E520	Actemra inj 162mg/0.9ml	\$858/162mg prefilled syringe	New dosage form of Actemra in a prefilled syringe for subcutaneous inj for tx of moderately to severly active Rawho have had an inadequate resonse to one or more disease-modifying antirheumatic drugs.	Other therpies would include Enbrel, Humira, Remicade, Simponi
661000070001**	Zorvolex (diclofenac)	\$3.00/dose	New dosage form of immediate release formulation( 18mg or 35mg) - for tx of mild/moderate pain	Diclofenac 50mg immediate release tab - \$1.80
49270061068**	Aciphex Sprinkle caps ( 10 and 5mg caps)	\$420/30 days	New dosage form of rabeprazole for tx of GERD	robeprazole 20mg tab = \$30/30 days
392000251001**	Antara (micronized fenofibrate)	\$200/30 days	New dosage formulation - oral lipid lowering agent.	Generic fenofibrate - avg retail for 30 day supply \$25- \$40
581800501070**	Fetzima (levomilnacipran)	\$240/month	SNRI - for adults with major depressive disorder	Duloxetine - retail prices range from \$92 - \$182/30 days Venlafaxine ER - retail prices range \$13 - \$15/30 days
8240152070E5**	Granix inj )TBO-filgrastim)	\$573/syringe	For tx of chemotherapy iinduced neutropenia	Neupogen - \$558. Leukine -\$441. Neulasta \$4,300

215340330001**	Imbruvica (ibrutinib) caps	\$13,120/30 days	For treatment of mantle cell lymphoma(MCL) who have received at least one prior therapy	Velcade and Revlimid
725500600003**	Fycompa tabs	\$682/30 days	For adjunctive therapy for treatment of partial - onset seizures. Dose= 4-12 mg daily	Various other therapies
11407060000620	Noxafil	\$5,371/30 days	New dosage formulation - for the prophylaxis of invasive Aspergillus and Candida infections in patients 13 years of age or older, who are at high risk of developing these infections due to being severely immunocompromised Dose: 300mg daily	Noxafil Suspension 40mg/ml - 300mg/day dosing = \$2,441/30 days
123530771001**	Olysio(simeprevir)	\$66,360/12 weeks	Oral therapy for treatment of Hepatitis C Dose = 150mg/day	Sovaldi - \$84,000/12 weeks
123530800003**	Sovaldi(sofosbuvir tabs)	\$84,000/12 weeks	Oral therapy for treatment of Hepatitis C Dose = 150mg/day	Olysio - \$66,360/12 weeks.
67406080002010	Zomig Spray 2.5mg/spray	\$57/2.5mg spray	Treatment of migraine	zolmitriptan 5mg (generic) tab - \$35/3 tabs retail
4400030123420	Aerospan Inhaler	\$194/inhaler	Treatment of asthma. (replacement for Aerobid)	Asmanex inhaler - \$287 Qvar inhaler = \$209 Flovent HFA inhaler = \$336
66250050000D5**	Otrexup(methotrexate)	\$411/unit	First subcutaneous auto-injector of methotrexate for treatment of severe active RA, polyarticular juvenile idiopathic arthritis, who are intolerant of or had an inadequate response to first-line therapy	
679900030703**	Prodrin (acetaminophen-ismethheptene-caffeien)	\$5.60/capsule	Treatment of headache	
403040150003**	Stendra (avanafil)	\$29/tab	PDE5 inhibitor to treat erectile dysfunction	Cialis = \$38/tab Viagra = \$34/tab Levitra = \$33/tab
59152020001820	Versacloz Susp 50mg/ml (clozapine suspension)	\$8.80/50mg	New dosage formulation - atypical antipsychotic	Clozapine 100mg tab = \$3.32 Clozapine orally disintegrating 100mg tab = \$8.17
90154035103910	Ecoza Aerosol 1% (econazole nitrate foam)	\$343/bottle	Topical antifungal agent (new dosage formulation)	Econazole nitrate 1% topical cream = \$100 for 85Gm tube

2nd review drugs  
Tafinlar  
Astagraf XL

	A	B	C
1	EBRx Cost Savings 2013		
2			
3	<b>Coverage change</b>	<b>date implemented</b>	<b>Estimated Annual cost Savings</b>
4	Topical Testosterone excluded, injectable still covered	5/20/2013	\$1,114,512
5	Lovaza excluded	5/20/2013	\$641,040
6	Glumetza excluded	5/20/2013	\$142,624
7	Nasal steroid reference pricing	5/20/2013	\$471,866
8	Overactive Bladder Reference Pricing	5/20/2013	\$699,432
9	New generics added at same Tier as Brand	5/20/2013	
10	Naprelan excluded	8/1/2013	\$141,000
11	Intuniv excluded	8/1/2013	\$73,000
12	Proton Pump Inhibitor (PPI) reference price update	8/1/2013	\$1,000,000
13	Diabetic test strip quantity limits, can be overridden with PA	8/1/2013	
14	Require PA's on all compounds	1/1/2014	\$1,000,000
15	Moving Diabetic test strips from \$0 copay to the Tier structure	1/1/2014	\$400,000
16	Amphetamine Reference Pricing	1/1/2014	\$300,000
17	SNRI Reference pricing	1/1/2014	\$4,087,483
18	SSRI Reference pricing	1/1/2014	\$773,061
19	ARB reference pricing to losartan	1/1/2014	\$3,399,384
20	Lyrica Reference Pricing	1/1/2014	\$1,178,837
21	Adding Brand Oral contraceptives with no generic available to T3	1/1/2014	\$400,000
22	Excluding Medical foods	1/1/2014	\$194,000
23	update statin Reference price	5/1/2014	\$500,000
24	bisphosphonate reference price	5/1/2014	\$500,000
25	Niaspan exclusion	5/1/2014	\$600,000
26	Fibrate exclusions	5/1/2014	\$325,000
27			
28	<b>Total Annual Savings</b>		<b>\$17,941,239</b>

## Employee Benefits Division (EBD) Prescription Drug Program Trend Analysis (2004 - 2013)

