

## Arkansas Medicaid DRC Meeting Minutes

<b>Date / Time:</b>	February 9, 2022 9:03 – 10:23 AM Central	<b>Location:</b>	ZOOM webinar	
<b>Chair:</b>	Cindi Pearson, Pharm.D.	<b>Reports:</b>	Lynn Boudreaux, Pharm.D. Magellan	
	<b>Panelist (voting members)</b>		<b>Panelist (non-voting members)</b>	<b>Organization</b>
	X Melissa Max, Pharm.D.	X	Barry Fielder, Pharm.D.	ATC
	X Laurence Miller, M.D.	X	Tyler Earley, Pharm.D.	Empower
	X Daniel Pace, M.D.	X	Lauren Jimerson, Pharm.D.	Summit
	Chad Rodgers, M.D.	X	Turkesia Robertson-Jones, Pharm. D.	CareSource
	Vacant Pharm.D. position		Elizabeth Pitman	DHS Director
	Vacant Pharm.D. position	X	Cindi Pearson, Pharm.D.	DHS, DRC Chair
	Vacant Pharm.D. position		Cynthia Neuhofel, Pharm.D.	DHS pharmacy
		X	Karen Evans, P.D.	Magellan
		X	Lynn Boudreaux, Pharm.D.	Magellan
		X	Lesley Irons, Pharm.D.	Magellan
<b>Call to order</b>	Meeting held virtually by ZOOM webinar. A quorum was present, and the chair called the meeting to order at 9:03am.			
<b>Public comments</b>	<ol style="list-style-type: none"> <li>1. Carla Schad, MSL—Zogenix for Fintepla®</li> <li>2. Gregory Johnson, PhD—Neurelis for Valtoco®</li> <li>3. Kendra Davies, Pharm.D.—Jazz Pharmaceuticals for Epidiolex®</li> </ol>			
<b>Announcements</b>	<ol style="list-style-type: none"> <li>1. There were no conflicts of interest by any voting committee member, Dr. Pearson, or Dr. Boudreaux.</li> <li>2. Format for the May 2022 meeting has not been established</li> <li>3. Preferred Drug List changes effective January 1, 2022</li> <li>4. DUR PA manual review drugs from January 19, 2022 DUR meeting</li> <li>5. POS edits from January 19, 2022 DUR meeting</li> <li>6. Chair provided the schedule of future DRC meeting dates</li> </ol>			
<b>Minutes</b>	Motion to approve November 2021 meeting minutes was made by Dr. Pace, seconded by Dr. Max. All voting members present voted to approve the minutes as written. Motion passed.			
<b>Class Reviews</b>	<ol style="list-style-type: none"> <li>1. <b>ANTICONVULSANTS</b> Anticonvulsant agent’s class will be a new class for the PDL. Anticonvulsants were reviewed during the July 21, 2021 DUR Board meeting for maximum quantity edits. The Board approved quantity edits will be effective April 1, 2022. Chair provided information on uses for anticonvulsants and current PA requirements for all agents in the class. Dr. Boudreaux presented a PowerPoint with the following information. <ol style="list-style-type: none"> <li>a) FDA approved indications for Anticonvulsants</li> <li>b) Overview of epilepsy</li> <li>c) Overview of Lennox-Gastaut Syndrome</li> <li>d) Overview of Dravet Syndrome</li> <li>e) Anticonvulsants therapeutic spectrum</li> <li>f) Mechanism of action for seizure medications</li> <li>g) Treatment recommendations</li> <li>h) Claims summary from 1/1/2021-12/31/2021</li> </ol> </li> </ol>			

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### **DISCUSSION:**

The Chair suggested that we have preferred options with each mechanism of action. Dr. Max asked if we need to make different approvals by age, specifically Fintepla and Epidiolex. Dr. Boudreaux stated that we can look at that further. The Chair stated that Magellan system has the capability to limit the age based on the package insert regardless of PA status. Dr. Max wanted to look at the drugs by indication. The committee reviewed by indication with the following mentioned—phenobarbital, phenytoin, Valtoco, Diastat, carbamazepine, divalproex DR, lamotrigine, Keppra, gabapentin, pregabalin, topiramate, Sabril, and stiripentol. Dr. Max felt that Valtoco and Diastat were important due to the age availability. Chair discussed the rationale for change in criteria for the rescue medications. Dr. Pace asked if the nasal sprays were more expensive. The chair confirmed that the nasal sprays are more expensive than the rectal gel. The recommendation was to keep the rectal gel as preferred and a nasal spray as preferred. Dr. Miller stated that we usually expect patients to start regular released products before moving to extended release options. Dr. Boudreaux stated that we can make an extended release preferred if desired. Currently, Epidiolex and Fintepla have criteria and are manually reviewed. The chair summarized a motion to recommend the products mentioned specifically during the discussion and any other products that make sense based on cost

### **ACTION:**

Motion was made by Dr. Miller to accept the recommended motion; seconded by Dr. Pace; Approved by Dr. Max. Motion passed.

## **2. IMMUNOGLOBULIN**

Immunoglobulin class will be a new class for the PDL. The immunoglobulin class was reviewed by the DUR Board on July 20, 2021. The POS edits established will be effective April 1, 2022. Chair provided general information on immunoglobulins, clinical uses of IVIG, POS approval criteria, and list of POS indications. Dr. Boudreaux presented a PowerPoint with the following information.

- a) FDA approved indications for Immunoglobulins
- b) Overview of immunodeficiencies
- c) Information on immunoglobulins
- d) Route, sugar content, and sodium content for each product
- e) American Academy of Allergy, Asthma, and Immunology recommendations providing frequency of treatment, dose, IgG trough levels, site of care, route and product
- f) Claims summary from 1/1/2021-12/31/2021

### **DISCUSSION:**

The chair noted that this was a difficult class to review both in the DUR Board meeting and now. The chair commented that for the best care of the patient, we should use continuation criteria to allow the patient to continue their current product. Dr. Boudreaux stated the discrepancy with the cost in these products should be taken into consideration. Dr. Boudreaux and the Chair clarified that if the patient is ordered a preferred product and has a billed diagnosis voted on by the DUR Board, the claim will process without a PA. Dr. Pace asked if any of these products are restricted to a specialty. Dr. Boudreaux responded that there was no restriction at this point. There was discussion if the RhoGAM products should be non-preferred. Dr. Max was concerned about limiting products since there are different indications. The DUR Board voted to allow all preferred products to process at POS

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	<p>with any of the typical indications and diagnoses supported on the Compendia. Dr. Boudreaux stated there are no clinical trials for comparison between the products. Dr. Max asked if we could accept preferred options that are given by each route of administration and best overall cost for the State as reviewed by DCC.</p> <p><b>ACTION:</b> Motion was made by Dr. Max; seconded by Dr. Miller; approved by Dr. Pace. Motion passed.</p>
<b>Adjourn</b>	Meeting adjourned at 10:23am.