

The logo for the Washington State Health Care Authority. It features the text "Washington State Health Care Authority" in a dark blue, sans-serif font. The word "Authority" is significantly larger than the other words. A thick, dark red swoosh underline starts under the letter 'A' in "Authority" and curves over the top of the word, extending to the right.

Washington State  
Health Care Authority

## P&T Committee Overview

Donna L. Sullivan, PharmD, MS  
Chief Pharmacy Officer  
January 26, 2017

# Roles & Responsibilities

## HCA Pharmacy Services and Operations

- Donna Sullivan, Pharm D, MS Chief Pharmacy Officer
  - Oversees HCA prescription drug purchasing strategy for Medicaid and PEB
- Ryan Pistoresi, PharmD, MS Assistant Chief Pharmacy Officer
  - Manages PEB pharmacy policy and benefit design
  - WA representative on DERP governance board
- Ray Hanley, Program Director
  - Oversight of P&T Committee and PDL process
  - Manages cost analysis process
- Leta Evaskus, Program Analyst
  - Manages P&T Committee contracts and meeting logistics
  - PDL updates and communication

# Staff Roles & Responsibilities

## Medicaid Pharmacy Policy

- April Philips – Clinical Pharmacist
  - Assists with clinical policy development
- Charles Agte, Medicaid Pharmacy Specialist
  - Assures compliance with rules and regulations
- Allison Campbell, Supplemental Rebate Manager
  - Manages Supplemental Rebate Agreements with manufacturers
  - Assists with data submission for the cost analysis
- Jodie Arneson, Medicaid Program Specialist
  - Assists with program operations
  - Manages Second Opinion Process

# Staff Roles & Responsibilities

## Labor & Industries

- Jaymie Mai, PharmD, Pharmacy Manager
  - L&I Representative to the Prescription Drug Program
- Doug Tuman, PharmD, Pharmacist
  - L&I liaison and backup to the Prescription Drug Program

# Drug Effectiveness Review Project (DERP)

- DERP is a collaborative of 13 state Medicaid and public pharmacy programs that produces evidence-based products that assist policymakers and other decision-makers grappling with difficult drug coverage decisions
- Current DERP Participants
  - Arkansas
  - Colorado
  - Idaho
  - Minnesota
  - Missouri
  - Montana
  - New York
  - North Carolina
  - Oregon
  - Tennessee
  - Texas
  - Washington
  - Wisconsin

# Washington Prescription Drug Program

- In June 2003 the legislature created the Washington State Prescription Drug Program
- Coordinated effort by Health Care Authority's Uniform Medical Plan and Medicaid Fee for Service, as well as Labor & Industries' Workers Compensation Program
- The PDL is a subset of each program's overall formulary/drug list
- Goal: to develop a statewide evidence-based "preferred drug list" to control prescription drug costs without reducing quality of care

# Washington Prescription Drug Program

## Components of the Program:

- Endorsing Practitioner – Therapeutic Interchange Program
- Pharmacy & Therapeutics Committee
- Washington Preferred Drug List (PDL)
- NW Prescription Drug Purchasing Consortium

# Endorsing Practitioner – Therapeutic Interchange Program

- An “endorsing practitioner” is a prescriber who has reviewed the PDL and has agreed to allow therapeutic interchange of a preferred drug for any non-preferred drug, unless otherwise directed.
- Pharmacists will automatically interchange the preferred drug for any non-preferred drug prescribed by these practitioners and notify the prescriber of the change unless:
  - the Rx is for a "refill" of an antipsychotic, antidepressant, antiepileptic, chemotherapy, antiretroviral, or immunosuppressive drug, or treatment for hepatitis C
  - the endorsing practitioner indicates “dispense as written” (DAW) on an Rx for a non-preferred drug
    - In these situations the pharmacist will dispense the non-preferred drug as prescribed (generic first initiative may apply)
- There are about 7200 endorsing practitioners



# Pharmacy & Therapeutics Committee

- Ten Members
  - Membership based on federal Medicaid requirements for DUR Board
  - 4 physicians, 4 pharmacists, 1 physician's assistant, and 1 advanced registered nurse practitioner
- Meets at least quarterly
- Review reports prepared by the Drug Effectiveness Review Project (DERP) that compare the evidence of a drug's safety, efficacy and use in special populations
- Determines which drugs are equally safe and effective, or have advantages in special populations
- Determines appropriateness of therapeutic interchange program within drug classes on PDL

# Drug Utilization Review Board

- Drug Utilization Review Board required by Section 1927 of the Social Security Act
- Extension of the P&T committee in advising on additional utilization controls for drugs within the preferred drug list
- Recommend DUR programs or interventions based on data provided by Medicaid staff or CMO
- Review and approve DUR programs proposed by Medicaid or offer guidance on modifications to the program
- Engage in provider education activities when appropriate

# Washington Preferred Drug List

- The Preferred Drug List is a list of drugs selected by the agencies to be used as the basis for their purchase of prescription drugs
- The PDL currently covers approximately 30 therapeutic drug classes
- Agencies began using the list in January 2004

# DERP Reviews

- Types of reports where new drugs are eligible for inclusion on the PDL
  - New Class Review
  - Update to an existing class review
  - Expanded Scan Reports for an existing Class
  - Single Drug Addendums
    - Review for a single drug not included in an existing Class Review
    - Effectively updates the Class Review to allow inclusion in the PDL
- Literature Scan for an existing drug class
  - Summarizes availability of new evidence in the class
  - Identifies new drugs and indications since last review
  - *New drugs identified in a scan are not eligible for inclusion on the PDL*
  - P&T may approve scan as adequate, or request updated class review

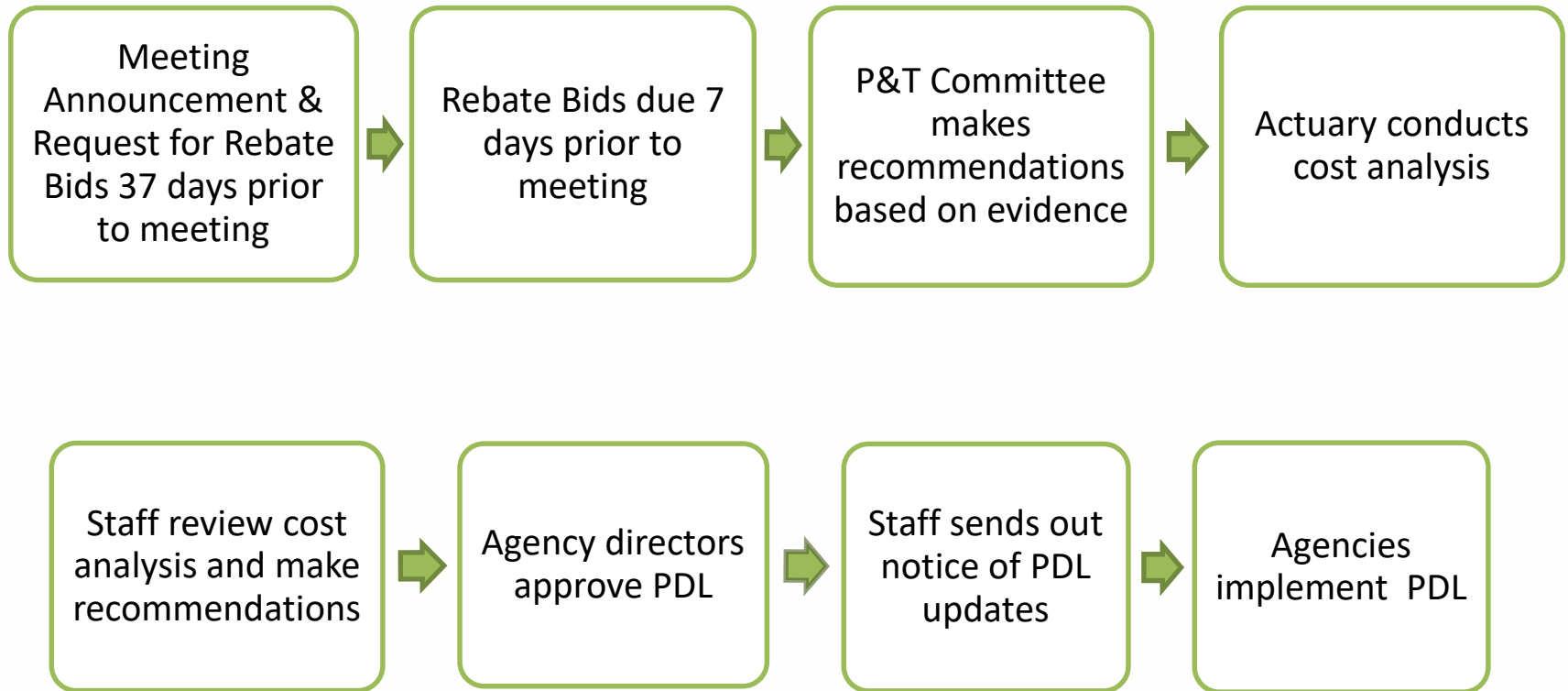
# Categories of Drugs and the PDL

- Preferred on the PDL
  - By definition TIP does not apply
  - May have other restrictions as approved by DUR Board
- Non-Preferred on the PDL are Subject to TIP when all of the following are true: :
  - Included in New Class report, Updated report, Summary Review, or Single Drug Addendum
  - Not continuation of therapy in one of the following classes
    - Antipsychotic, antidepressant, antiepileptic, chemotherapy, antiretroviral, immunosuppressant, or Hepatitis C
  - TIP is Allowed by the Committee; and
  - Substitution is allowed by endorsing practitioner (DAW applies)
- In a PDL class but not included in DERP one of the report types mentioned above
  - Covered according to program benefit design
  - TIP does not apply
  - DAW does not apply
- Drug classes not on the PDL
  - Covered according to program benefit design

# Archived Drug Classes

- HCA recommends drug class to be archived
- The Committee will
  - Review a final scan of the drug class
  - Vote on whether the drug class is appropriate to archive
  - Determine if the therapeutic interchange program and dispense as written rules are appropriate to continue without further clinical review
  - Direct Agencies to change preferred status of drugs based on cost when appropriate without additional review by the committee
- Archived drug classes will remain on PDL
- Committee or PDP workgroup may re-activate an archived class if significant changes are made to the evidence base for the class or its indications

# PDL Selection Process



# Questions?

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# Acronyms

- DAW = Dispensed as written
- DERP= Drug Effectiveness Review Project
- EA = Expedited Authorization, claim is paid when submitted with correct code
- EPC= Evidence Based Practice Center
- Non-Preferred = TIP and DAW apply to endorsing practitioner, non-endorsing practitioner PA required
- OHSU = Oregon Health and Science Center
- PA = Prior Authorization, pharmacist/prescriber must submit information to HCA to get approval
- PDL = Washington Preferred Drug List
- P&T = Pharmacy and Therapeutics
- Preferred Drug = Preferred on PDL, TIP does not apply
- QLL = Quantity Level Limits
- Step Therapy = requires use of one drug prior to another being authorized
- TIP = Therapeutic Interchange, allowed when prescribed by an endorsing practitioner
- UMP = Uniform Medical Plan (State Employees)