

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 letters 'u', 't', 'h', 'o', 'r', 'i', 't', 'y'.

P&T Committee Overview

Donna L. Sullivan, PharmD, MS
Chief Pharmacy Officer
February 24, 2016

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
 - Reports to HCA Chief Medical Officer
- Ryan Pistori, PharmD, MS Assistant Chief Pharmacy Officer
 - Reports to HCA Chief Pharmacy Officer
 - Manages PEB pharmacy policy and benefit design
 - WA representative on DERP governance board
- Ray Hanley, Program Director
 - Reports to HCA Chief Pharmacy Officer
 - Oversight of P&T Committee and PDL Process
 - Manages cost analysis process
- Leta Evaskus, Program Analyst
 - Reports to Prescription Drug Program Director
 - Meeting Logistics
 - PDL updates and communication ²

Staff Roles & Responsibilities

Medicaid Pharmacy Policy

- Charles Agte, Medicaid Pharmacy Administrator
 - Reports to Chief Pharmacy Officer
 - Manages operational aspect of the Medicaid pharmacy benefit
 - Assures compliance with rules and regulations
- Allison Campbell, Supplemental Rebate Manager
 - Reports to Chief Pharmacy Officer
 - Manages Supplemental Rebate Agreements with manufacturers
 - Assists with data submission for the cost analysis
- Jodie Arneson, Medicaid Program Specialist
 - Reports to Chief Pharmacy Officer
 - Assists with program operations
 - Manages Second Opinion Process

Staff Roles & Responsibilities

Labor & Industries

- Jaymie Mai, PharmD, Pharmacy Manager
 - Reports to L&I Medical Director
 - L&I Representative to the Prescription Drug Program
- Doug Tuman, PharmD, Pharmacist
 - Reports to L&I Pharmacy Manager
 - 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

DERP Reviews

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

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:

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

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
- 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

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

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 (Subject to TIP when):
 - Included in New Class report, Updated report, Summary Review, or Single Drug Addendum; and
 - No continuation of therapy in refill protected class; and
 - Allowed by the Committee; and
 - Substitution is allowed by endorsing practitioner
- 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
- Not drug class on the PDL
 - Covered according to program benefit design

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

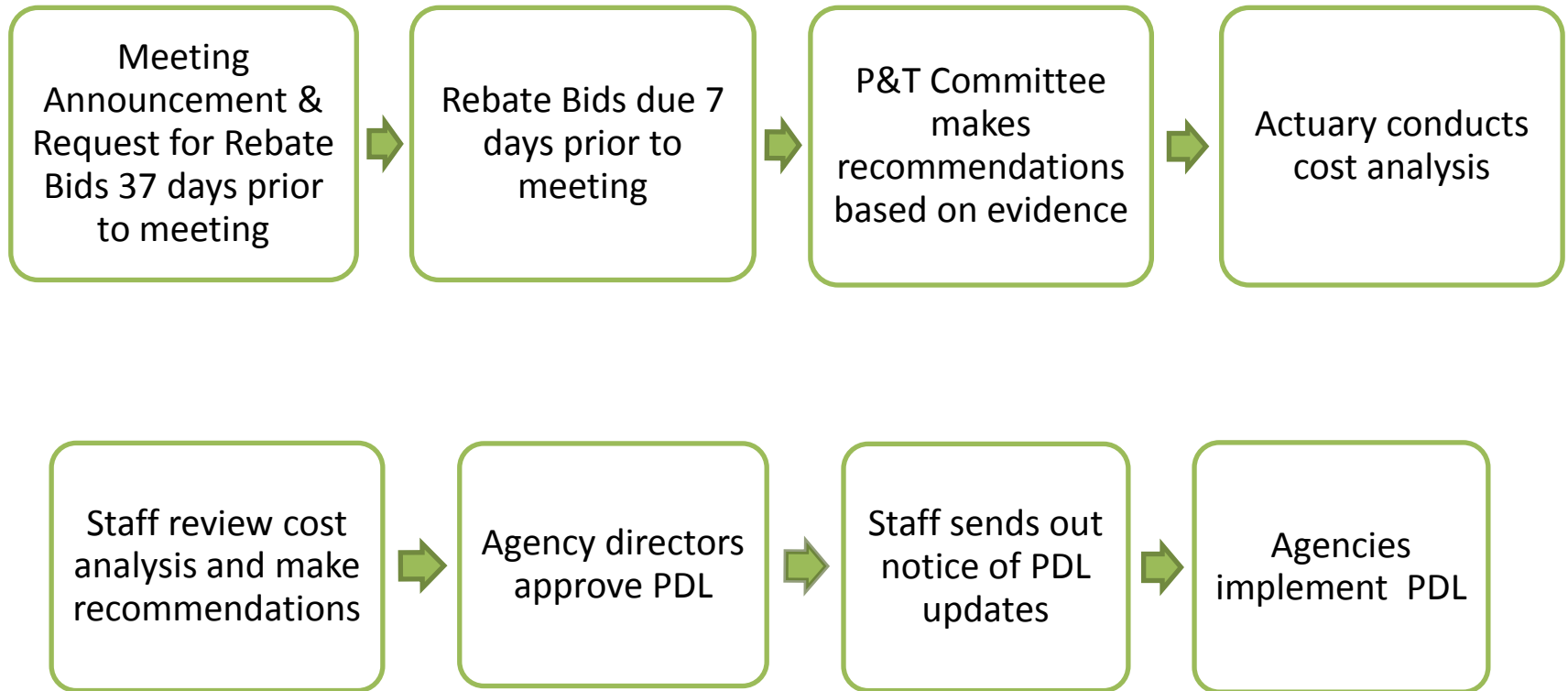
Archived Drug Classes

- 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

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

PDL Selection Process



Questions?

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