Division of Workers' Compensation Pharmacy and Therapeutics Committee

April 21, 2021

12:30pm to 2:30pm





Agenda

- Welcome and Introductions
 - George Parisotto, Administrative Director, DWC
- Approval of Minutes from the January 21, 2021 Meeting
 - Dr. Raymond Meister, Executive Medical Director, DWC
- MTUS Drug List and Therapeutic Category Reference Dr. Raymond Meister and Kevin Gorospe, DWC Consultant
- Discussion:
 - Review of January 2021 Recommendations Kevin Gorospe
 - Consolidate Pregabalin Listings
 - Remove salt from Pred Mild
 - MTUS Effect on Drug Utilization
 - COVID 19 Update Dr. Raymond Meister
 - HIV PEP Dr. Julie M. Fuller, Member and Kevin Gorospe
 - Topicals for Pain Control Dr. Julie M. Fuller and Kevin Gorospe
- Public Comments
- Review of Committee Recommendations
- Adjourn



Welcome and Introductions

George Parisotto

Administrative Director, DWC



Approval of Minutes

Dr. Raymond Meister

Executive Medical Director, DWC



MTUS Drug List

Dr. Raymond Meister Executive Medical Director, DWC J. Kevin Gorospe, PharmD DWC Consultant



MTUS Update

- MTUS v9 has not been released
 - Anticipated for late April
 - May include medications associated with ACOEM COVID treatment guidelines
- Next RxCUI update and expanded therapeutic drug categories model will use MTUS v9
- Update on potential online application
- Establishing a primary drug categorization reference source



Online MTUS List Application

- Tied to the revision of drug categorization, is the desire to have a more interactive online application to filter the MTUS list by various data elements
- Would be like e-commerce applications where the user can choose characteristics (e.g. drug category, exempt status, dosage form) to find specific drugs on the MTUS list
- Unfortunately, no near-term solution
 - IT resource issue



MTUS Therapeutic Categories

- Choice of therapeutic category reference
- Publicly available (non-proprietary) listing
- Several categories available through RxNORM
- RxNorm is a normalized naming system for generic and branded drugs and other terminologies
- RxNorm is source of RxCUI and RxCLASS
- RxCLASS contains a variety of drug classifications



RXCLASS

- RxCLASS contains multiple drug classification sources including:
 - ATC Anatomical Therapeutic Chemical (ATC). The ATC classification system divides the drugs into different groups according to the organ or system on which they act and according to their chemical, pharmacological and therapeutic properties.
 - VA Veterans Administration drug classes from the Veterans Administration National Drug Formulary
 - MedRT Drug classifications based on Diseases, Drug Mechanism of Action,
 Drug Chemistry, Drug Physiological Effect and Drug Pharmacokinetics
- Classifications can be complex and are not widely used for formulary management



USPDC

- One public source, which is widely referenced, is the United States Pharmacopeia Drug Classification
- USP was developed as a classification system beyond the Medicare Model Guidelines to assist with formulary support outside of Medicare Part D.
- USPDC is used by states to identify the level of coverage for prescription drugs by health plans in comparison to each state's Essential Health Benefits Benchmark plan.



USPDC Content

- Provides a Category, Class and for some drugs a Pharmacotherapeutic Group
- USP also provides an alignment file that contains drugs by RxCUI
 - RxCUI are at the route, strength, dosage form level
 - Lists both brand name and generic RxCUIs
 - Does not list rolled-up RxCUIs at the ingredient level
 - Non-prescription drugs are not listed



USPDC Sample Excerpt

RxCUI	Name	Related BN	USP Category	USP Class	USP Pharmacotherapeutic Group
1000479	1 (PEG-3350 210 GM / potassium chloride 0.74 GM / sodium bicarbonate 2.86 GM / sodium chloride 5.6 GM Powder for Oral Solution) / 1 (bisacodyl 5 MG Delayed Release Oral Tablet) Pack	Not Applicable	Gastrointestinal Agents	Gastrointestinal Agents, Other	No USP PG, Gastrointestinal Agents, Other
1087258	24 HR CALCIUM CARBONATE 200 MG / FOLIC ACID 1 MG / PYRIDOXINE 75 MG / VITAMIN B12 0.012 MG EXTENDED RELEASE ORAL TABLET	Not Applicable	Electrolytes/Minerals/Metals/ Vitamins	Vitamins	No USP PG, Vitamins
1087262	24 HR CALCIUM CARBONATE 200 MG / FOLIC ACID 1 MG / PYRIDOXINE 75 MG / VITAMIN B12 0.012 MG EXTENDED RELEASE ORAL TABLET [FOLBECAL]	FOLBECAL	Electrolytes/Minerals/Metals/ Vitamins	Vitamins	No USP PG, Vitamins
1088805	24 HR CALCIUM CARBONATE 200 MG / FOLIC ACID 1 MG / PYRIDOXINE 75 MG / VITAMIN B12 0.012 MG EXTENDED RELEASE ORAL TABLET [FOLINATAL PLUS B]	FOLINATAL PLUS B	Electrolytes/Minerals/Metals/ Vitamins	Vitamins	No USP PG, Vitamins
242680	abacavir 20 MG in 1 mL Oral Solution	Not Applicable	Antivirals	Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)	No USP PG, Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)
242679	abacavir 300 MG Oral Tablet	Not Applicable	Antivirals	Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)	No USP PG, Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)
307650	abacavir sulfate 300 MG / lamiVUDine 150 MG / zidovudine 300 MG Oral Tablet	Not Applicable	Antivirals	Anti-HIV Combinations	No USP PG, Anti-HIV Combinations
602393	abacavir sulfate 600 MG / lamiVUDine 300 MG Oral Tablet	Not Applicable	Antivirals	Anti-HIV Combinations	No USP PG, Anti-HIV Combinations
984082	ABELCET 100 MG in 20 ML Injection	ABELCET	Antifungals	No USP Class, Antifungals	No USP PG, No USP Class, Antifungals
352307	ABILIFY 10 MG Oral Tablet	ABILIFY	Antidepressants	Antidepressants, Other	No USP PG, Antidepressants, Other
352307	ABILIFY 10 MG Oral Tablet	ABILIFY	Bipolar Agents	Bipolar Agents, Other	No USP PG, Bipolar Agents, Other
352307	ABILIFY 10 MG Oral Tablet	ABILIFY	Antipsychotics	2nd Generation/Atypical	No USP PG, 2nd Generation/Atypical
352308	ABILIFY 15 MG Oral Tablet	ABILIFY	Antidepressants	Antidepressants, Other	No USP PG, Antidepressants, Other
352308	ABILIFY 15 MG Oral Tablet	ABILIFY	Bipolar Agents	Bipolar Agents, Other	No USP PG, Bipolar Agents, Other
352308	ABILIFY 15 MG Oral Tablet	ABILIFY	Antipsychotics	2nd Generation/Atypical	No USP PG, 2nd Generation/Atypical



MTUS List Using USPDC

- Sample MTUS created with two USPDC columns added for comparison to current Category listing
 - Category
 - Class (Pharmacotherapeutic Group)
- Gap is the non-prescription drugs, vitamins, nutraceuticals, bulk chemicals which are not in the USPDC
- Some products are in multiple categories
- Excerpt follows



MTUS Partial Listing Sample

Drug Ingredient	Reference Brand Name	Drug Class	USP Category	USP Class (Pharmacotherapeutic Group)	Reference in ACOEM Guidelines (Copyright Reed Group Ltd.)	Dosage Form	Strength	RxCUI
amoxicillin/clavulanate potassium	te potassium AUGMENTIN Antibiotics (Penicillins) Antibacterials		Beta-lactam, Penicillins	(R, NR) Ankle and Foot Disorders (R) Hand, Wrist, and Forearm Disorders (R) Low Back Disorders	Tablet, Extended Release	1000 MG-62.5 MG	617995	
anakinra	KINERET	Analgesics - Anti-inflammatory	Immunological Agents	Immunological Agents, Other (Interleukin Blockers)	(X) Knee Disorders	Prefilled syringe, 0.67 ML	100 MG/0.67 ML	727711
apixaban	apixaban ELIQUIS Anticoagulants Blood Products and Modifiers		Anticoagulants (Factor Xa Inhibitors, Direct)	(NR) Ankle and Foot Disorders (R) Hip and Groin Disorders (R) Knee Disorders	ALL ORAL DOSAGE FORMS	ALL STRENGTHS	1364432	
aprepitant	tant EMEND Antiemetics Anitemetics Emetogenic Ther		Emetogenic Therapy Adjuncts	(R) Antiemetics	Capsule	40 MG	644088	
aprepitant	EMEND	Antiemetics	Anitemetics	Emetogenic Therapy Adjuncts	(R) Antiemetics	Capsule	80 MG	403810
aripiprazole	ole ABILIFY Antipsychotic/ Antimanic Agents (1) Antidepressants (1) Antidepressants Other (2) Antipsychotics (2) 2nd Generation/Atypical (3) Bipolar Agents (3) Bipolar Agents (3) Bipolar Agents, Other		(2) 2nd Generation/Atypical	(R) Depressive Disorders (NR) Post-Traumatic Stress Disorder	ALL ORAL DOSAGE FORMS	ALL STRENGTHS	1158261	
artificial tears ointments	artificial tears ointments REFRESH PM Ophthalmic Age		Not Applicable	Not Applicable	(R) Eye	Ointment, ophthalmic	42.5% / 57.3%	702008
ascorbic acid VITAMIN C		Vitamins	Not Applicable	Not Applicable	(X, NR) Ankle and Foot Disorders (X) Cervical and Thoracic Spine Disorders (NR) Chronic Pain (X) Low Back Disorders	ALL ORAL DOSAGE FORMS	ALL STRENGTHS	1152950



Committee Discussion



Public Comments



Review of Jan 2021 Recommendations

J. Kevin Gorospe, PharmD DWC Consultant



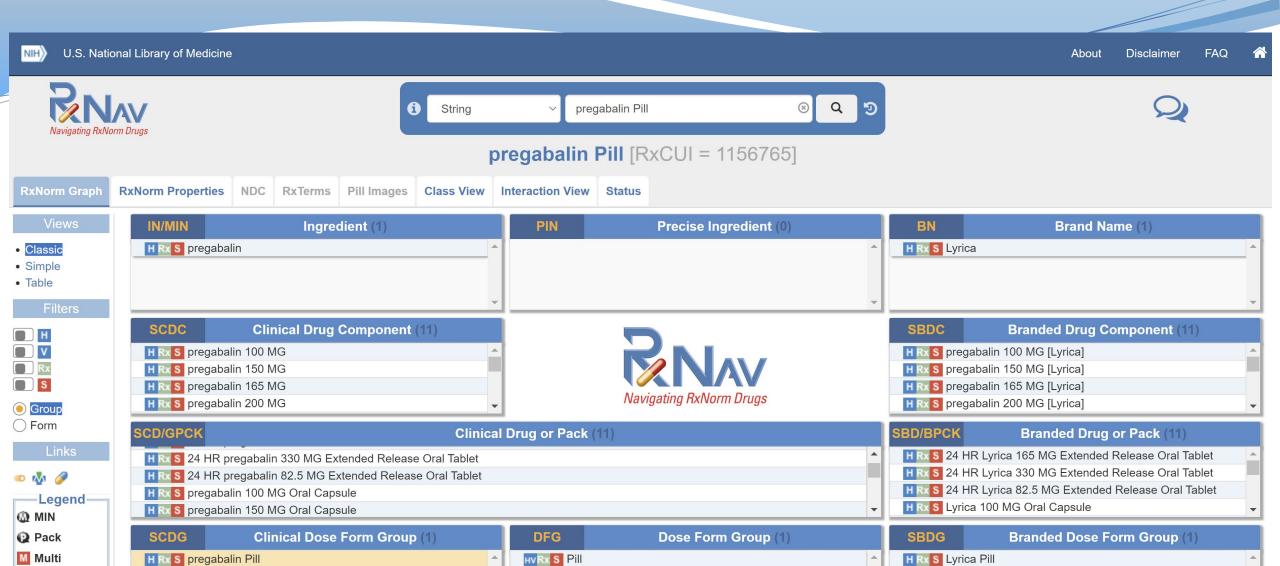
Consolidate Pregabalin

- After review of pregabalin RxCUI and MTUS listing it was not consolidated for the following reasons
 - The controlled release product (CR) has different ACOEM Guideline uses than the non-CR forms
 - RxCUI does not differentiate between CR and non-CR oral products
 - Listing all of the products under a single RxCUI would mislead a prescriber that the CR form has guideline references other than Chronic Pain and Hip and Groin Disorders



pregabalin	LYRICA	Non-Exempt	Not Applicable	Not Applicable	Anticonvulsants	(NR) Cervical and Thoracic Spine Disorders (R) Chronic Pain (NR) Hip and Groin Disorders (R, NR) Low Back Disorders (R, X, NR) Shoulder	Capsule
pregabalin	LYRICA	Non-Exempt	Not Applicable	Not Applicable	Anticonvulsants	(NR) Cervical and Thoracic Spine Disorders (R) Chronic Pain (NR) Hip and Groin Disorders (R, NR) Low Back Disorders (R, X, NR) Shoulder	Capsule
pregabalin	LYRICA	Non-Exempt	Not Applicable	Not Applicable	Anticonvulsants	(NR) Cervical and Thoracic Spine Disorders (R) Chronic Pain (NR) Hip and Groin Disorders (R, NR) Low Back Disorders (R, X, NR) Shoulder	Solution
pregabalin (once-daily)	LYRICA CR	Non-Exempt	Not Applicable	Not Applicable	Anticonvulsants	(X) Chronic Pain (X) Hip and Groin Disorders	Tablet, Extended Release
pregabalin (once-daily)	LYRICA CR	Non-Exempt	Not Applicable	Not Applicable	Anticonvulsants	(X) Chronic Pain (X) Hip and Groin Disorders	Tablet, Extended Release
pregabalin (once-daily)	LYRICA CR	Non-Exempt	Not Applicable	Not Applicable	Anticonvulsants	(X) Chronic Pain (X) Hip and Groin Disorders	Tablet, Extended Release







Download

Committee Discussion



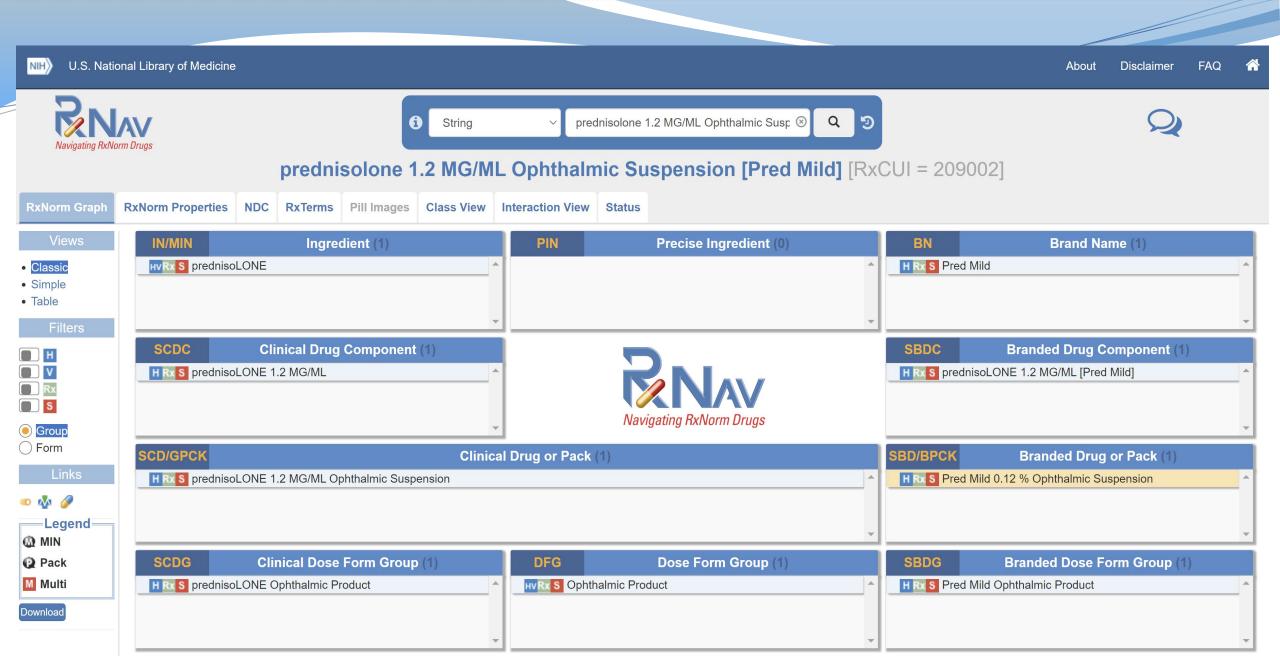
Public Comments



Remove Salt (acetate) from Pred Mild

- Reviewed the FDA Orange Book: Approved Drug Products with Therapeutic Equivalence Evaluations and various internet sites
 - Some websites list Pred Mild as just prednisolone
 - RxNav lists Pred Mild as prednisolone
 - Pred Mild is listed as prednisolone acetate in the Orange Book
 - Image of product shows prednisolone acetate
- Salt form (acetate) will remain on the list







FDA Orange Book

RX	PREDNISOLONE ACETATE	OMNIPRED	N017469	SUSPENSION/D ROPS	OPHTHALMIC	1%	АВ	RLD	RS	NOVARTIS PHARMACEUTICALS CORP
RX	PREDNISOLONE ACETATE	PRED FORTE	N017011	SUSPENSION/D ROPS	OPHTHALMIC	1%	АВ	RLD	RS	ALLERGAN PHARMACEUTICAL
RX	PREDNISOLONE ACETATE	PRED MILD	N017100	SUSPENSION/D ROPS	OPHTHALMIC	0.12%	Not Applicable	RLD	RS	ALLERGAN PHARMACEUTICAL









Committee Discussion



Public Comments



MTUS Effect on Drug Utilization

- Do not have any new reports from DIR data review
- Worker's Compensation Insurance Rating Bureau (WCIRB) released a report in February 2021
- The report is accessible at https://www.wcirb.com/news/wcirb-analyzes-cost-impact-california%E2%80%99s-drug-formulary
- They also have posted their webinar presentation on the report at https://www.wcirb.com/webinars#Forums



WCIRB Findings

- While pharmaceutical costs had been declining sharply prior to implementation of the formulary, the decline accelerated in 2018 and continued at a somewhat slower rate through 2019 and the pre-COVID-19 period in 2020.
- The share of prescriptions for drugs not subject to prospective UR in accordance with the formulary continued to increase in 2019 and early 2020, while that of drugs subject to UR continued to decline.
- The share of pharmaceutical payments for opioids, compounds and brand name drugs with generic alternatives dropped sharply in 2018 and continued to drop at a similar rate in 2019 and early 2020.
- While the share of pharmaceutical payments for physician dispensed drugs started to increase slightly toward the end of 2019, on an annual basis, the share of payments to these drugs continued to decline during the two years of the formulary implementation.
- The continued downward trend in pharmaceutical costs through early 2020, as well as the continued decreases in the proportion of drugs not subject to UR, opioids, compounds, physician-dispensed drugs and brand name drugs with generic equivalents suggest the formulary is achieving its intended effects.



Committee Discussion



Public Comments



COVID-19 Update

Dr. Raymond Meister



COVID-19

TOTAL FROI CLAIMS AND DENIALS vs. COVID19 CLAIMS AND DENIALS

FOR THE PERIOD: 1 JAN 2020 - 24 FEB 2021 (RUN DATE: 02/25/2021)

MONTH/YEAR	# Total Claims	# Total Denied Claims	# COVID-19 FROIs	# COVID-19 Denials
01/2020	54,040	6,861	77	34
02/2020	52,494	6,786	157	57
03/2020	47,255	9,181	3,092	1,335
04/2020	33,740	5,271	4,365	1,393
05/2020	41,694	5,869	5,031	1,553
06/2020	56,712	8,914	12,233	3,640
07/2020	60,844	10,087	15,176	4,886
08/2020	53,221	7,241	6,752	2,372
09/2020	50,735	6,187	4,530	1,523
10/2020	52,256	6,285	5,252	1,974
11/2020	54,520	8,397	16,122	5,463
12/2020	74,557	14,183	39,433	12,448
01/2021	51,750	5,456	18,612	4,364
02/2021	19,551	506	1,881	201
TOTAL	703,369	101,224	132,713	41,243



3.56 M

Total Covid-19 in CA

51,884

Covid-19 Death in CA

132,713

Covid-19 in Workers' Comp

700

Covid-19 death in Workers' Comp

570,656

Non-Covid-19 in Workers' Comp

576

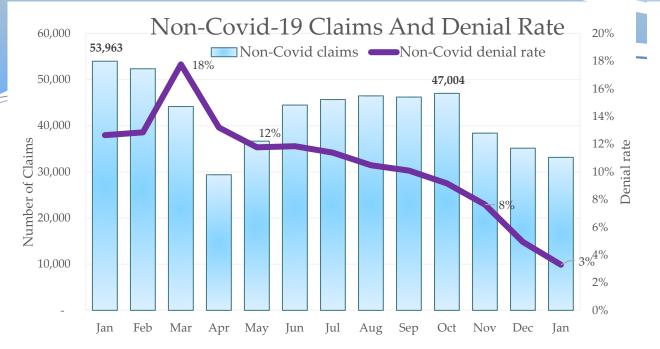
Non-Covid-19 death in Workers' Comp

- Current death rate of Covid-19 in CA is 1.48%.
- Current death rate of Covid-19 claims in workers' comp is 0.53%
- Current death rate of non-Covid-19 claims in workers' comp is 0.1%.

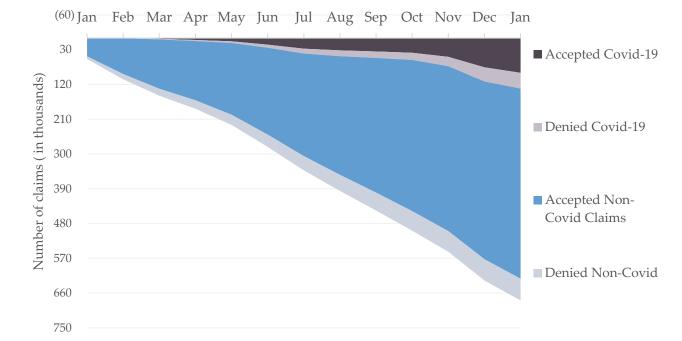
Data source: Total Covid-19 in CA is from CDPH Feb 25,2021. Workers' Comp data is from WCIS with run date Feb 24th ,2021.

Time period: From 1/1/2020 to 2/24/2021.

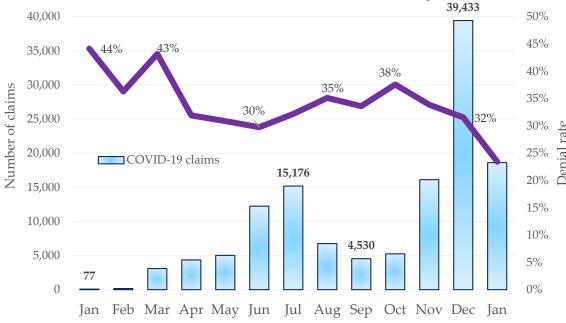




Cumulative Covid-19 & Non-Covid-19 Claims and Denials

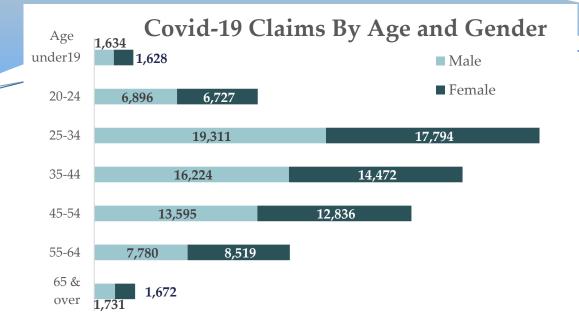


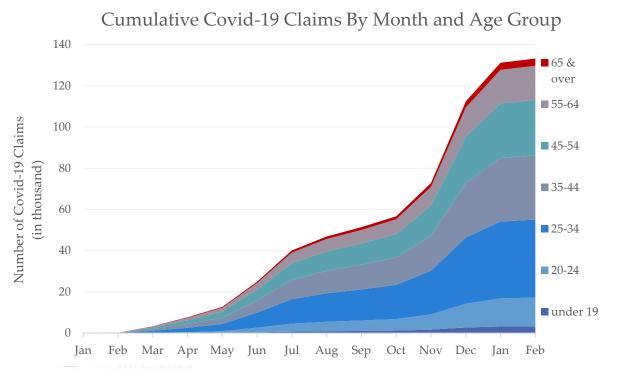
Covid-19 Claims and Denial Rate by month

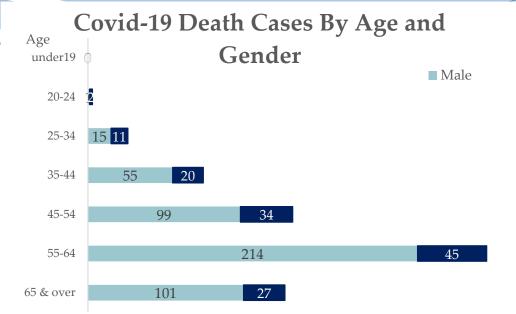


- Average denial rate for non-Covid-19 claims from last January to present is 10.5 %. Highest non-Covid-19 denial rate was 18% in last March and normally maintain a rate under 12%.
- Average denial rate for Covid-19 claims from January to present is 31%. The highest denial rate is the start of pandemic 43%-44%, the denial rate dropped in last April and ranged between 30% and 35%, except Oct.

Date source: WCIS data from 1/1/2020 to 2/24/2021.







- Covid-19 claims are equally distributed among female and male workers in different age groups. However the data shows more deaths among male workers than female workers, especially for the age group 55-64.
- The 25-34 year old age group has the highest number of workers' comp Covid-19 claims and the 55-64 year old age group has the highest number of Covid-19 death claims.
- The portion of Covid-19 claims of each age group among all cases remained stable from last January to current.

Date source: WCIS data from 1/1/2020 to 2/24/2021.



California COVID-19 Workers' Compensation Claims

click here for more info

Statewide Summary

Claims with injuries through Feb 2021

138,657

Claims reported through 3/22/21:

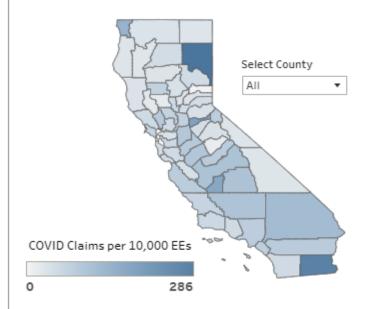
139,203

Deaths reported through 3/22/21:

804

COVID Claims Per 10K Employees

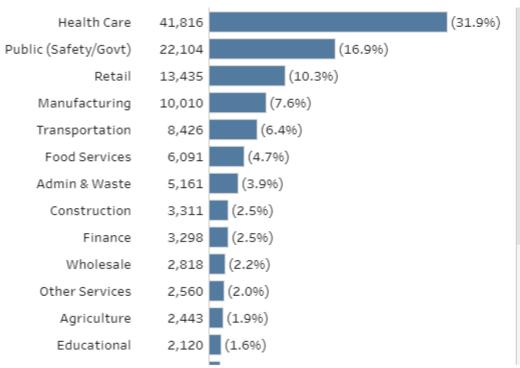
Insured and Self-Insured Select County on map or drop-down menu to filter exhibits

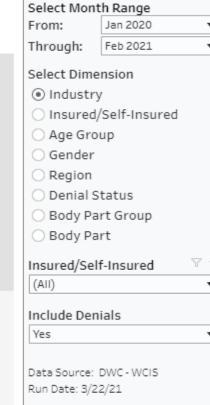


Note: The Insured/Self-Insured Filter does not apply to this map.

COVID Claims by Industry

Counts & Proportions Exclude Unknown Values







COVID Claims per 10,000 Employees

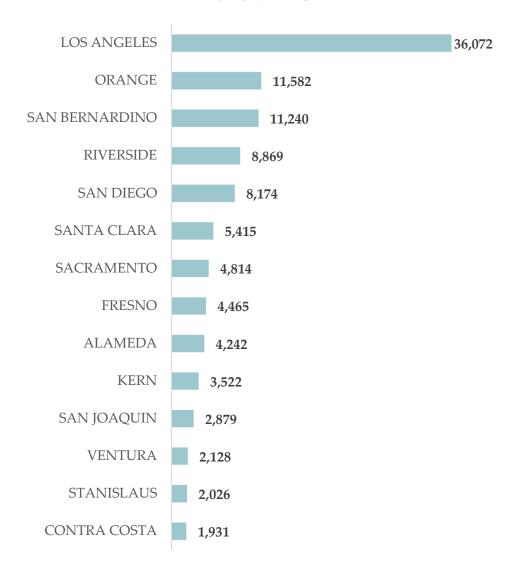


COVID Claims per 10,000 EEs





Top 15 counties with COVID-19 claims



39

Newsline No.: 2021-37 **Date:** April 6, 2021

DWC Issues Notice of Conference Call Public Hearing on May 14 for Proposed Evidence-Based Update to the Medical Treatment Utilization Schedule

The Division of Workers' Compensation (DWC) has issued a notice of conference call public hearing for a proposed evidence-based update to the Medical Treatment Utilization Schedule (MTUS), which can be found at California Code of Regulations, title 8, section 9792.24.7.

The conference call public hearing is scheduled for Friday, May 14, at 10 a.m. and members of the public may attend by calling 866-390-1828 and using access code 5497535#. Members of the public may review and comment on the <u>proposed updates</u> no later than May 14.

The proposed evidence-based update to the MTUS incorporates by reference the latest published guideline from American College of Occupational and Environmental Medicine (ACOEM) for the following:

Coronavirus (COVID-19) Guideline (ACOEM March 29, 2021)

The proposed evidence-based update to the MTUS regulations are exempt from Labor Code sections 5307.3 and 5307.4 and the rulemaking provisions of the Administrative Procedure Act. However, DWC is required under Labor Code section 5307.27 to have a 30-day public comment period, hold a public hearing, respond to all the comments received during the public comment period and publish the order adopting the update online.





COVID-19: Vaccine Dashboard

Statewide

20,267,689 (77.6%) Doses administered 360,360 Average doses per day



5,994,250 (18.5%) People partially vaccinated 7,526,403 (23.3%) People fully vaccinated



2,548,675 Doses on hand (7 days of inventory)



26,126,320 Doses Delivered 4,497,070 CDC Pharmacy Doses Delivered

Doses Administered by County of Residence

County	Los Angeles	5,052,476
(All) •	San Diego	1,867,213
	Orange	1,648,600
	Santa Clara	1,024,280
	Alameda	1,004,319
9	Riverside	1,003,304
72	San Bernardino	787,944
423	Contra Costa	727,863
THE STATE OF THE S	Sacramento	702,578
	San Francisco	600,884
	San Mateo	497,779
	Ventura	457,597
	Fresno	445,123
	Sonoma	322,894
	Kern	321,055
	San Joaquin	313,739

See Data Dictionary for Details.

Data: 4/5/2021 11:59pm | Posted: 4/6/2021

4+ ableau



Committee Discussion



Public Comments



HIV PEP

J. Kevin Gorospe, PharmD, DWC Consultant Dr. Julie M. Fuller, Member



HIV Exposure

- HIV infection following inadvertent exposure varies widely depending upon the type of exposure.
 - Risk is increased when the source has a high viral load, the volume is large, and the exposure is deep.
 - All known seroconversions have occurred with exposure to blood, bloody fluids, or viral cultures.
 - Health care personnel (HCP) at highest risk of transmission are those who have been inoculated percutaneously with blood from a source patient with HIV who is not on suppressive antiretroviral therapy and/or has a detectable viral load.



HIV Post Exposure Prophylaxis

- Preferred therapies
 - Tenofovir disoproxil fumarate-emtricitabine (300/200 mg once daily) plus dolutegravir (50 mg once daily)
 - Tenofovir disoproxil fumarate-emtricitabine (300/200 mg once daily) plus raltegravir (400 mg twice daily) (most used)
- Issue:
 - Some prescribers have received retroactive denials
 - Time-sensitive treatment
- Suggested: Make a 1-week supply of HIV PEP meds exempt



Committee Discussion



Public Comments



Topicals for Pain Control

J. Kevin Gorospe, PharmD, DWC Consultant

Dr. Julie M. Fuller, Member



Topicals for Pain Control

- Topicals that contain camphor and menthol are useful for pain control
- Products as listed in MTUS v8

Drug Ingredient	Reference Brand Name	Exempt/Non- Exempt*	Special Fill	Peri-Op	Drug Class	Reference in ACOEM Guidelines (Copyright Reed Group Ltd.)
camphor	BENGAY ULTRA	Non-Exempt	Not Applicable	Not Applicable	Dermatologicals	 (NR) Cervical and Thoracic Spine Disorders (NR) Chronic Pain (R) Hand, Wrist, and Forearm Disorders (X) Hip and Groin Disorders (NR) Low Back Disorders (NR) Shoulder
menthol	BENGAY ULTRA, BIOFREEZE	Non-Exempt	Not Applicable	Not Applicable	Dermatologicals	(NR) Ankle and Foot Disorders (NR) Cervical and Thoracic Spine Disorders (NR) Chronic Pain (R) Hand, Wrist, and Forearm Disorders (X) Hip and Groin Disorders (NR) Low Back Disorders (NR) Shoulder
methyl salicylate	BENGAY ULTRA	Non-Exempt	Not Applicable	Not Applicable	Dermatologicals	(NR) Cervical and Thoracic Spine Disorders (NR) Chronic Pain (R) Hand, Wrist, and Forearm Disorders (X) Hip and Groin Disorders (NR) Low Back Disorders (NR) Shoulder



Ingredients/Reference Brands

- Reference brand drugs
 - Ben Gay Ultra combination of camphor, menthol and methylsalicylate
 - Biofreeze menthol only
- Previously discussed if ingredients should be updated to reflect contents, i.e. the combination listed with Ben Gay Ultra and menthol only reflecting Biofreeze.
- Restructuring ingredients and reference brands must be coordinated with ACOEM MTUS Guidelines maintenance (work in progress)



Suggestion for Discussion

- Make products containing menthol and camphor exempt.
 - Many patients benefit from use
 - Useful for those that cannot take typical oral analgesics or antiinflammatories or who refuse opioids



Committee Discussion



Public Comments



Review of Recommendations



Adjournment

