

Wisconsin Department of Health Services State Disaster Medical Advisory Committee (SDMAC) Therapeutics Subcommittee DRAFT Discussion and Action Items

Date: Tuesday, December 8, 2020 Time: 12:00 to 1:00 PM Remote Link: https:/dhswi.zoom.us/j/84993366781 Toll-Free Audio: 646-558-8656

## Therapeutics Subcommittee December 8 Meeting Recording must use Edge or Chrome

## Meeting Invitees:

x	<b>Alyson Capp, PhD</b> (co-chair) Director of Ethics Advocate Aurora Health	x	Helen Marks Dicks, JD State Issues Advocacy Director AARP Wisconsin	x	Steven R Leuthner, MD, MA Neonatal-Perinatal Medicine and Center of Bioethics and Medial Humanities MCW& Children's Wisconsin	Х	<b>J. Njeri Wainaina, MD</b> Associate Professor Medical College of Wisconsin	
x	Sarah Sorum, PharmD (co-chair) Executive Vice President & CEO Pharmacy Society of Wisconsin	x	<b>J. Paul Kelleher, PhD</b> Associate Professor UW-Madison	x	<b>Eric Marty, MD</b> Director of Palliative Care Agrace	Х	<b>Margret Nolan, MD, MS</b> Physician Scientist UW Madison	
x	Dennis Brierton, Pharm D, BCPS, FASHP System Director, Clinical Pharmacy Advocate Aurora Health	x	Mohammad (Mo) Kharbat - MBA, BPharm, R.Ph., BCPS Regional VP of Pharmacy Services SSM Health	x	<b>Sridevi Mohan, MPH, MA</b> Epidemiologist Public Health Madison & Dane County	х	M. Preston Leavitt SDMAC Therapeutics Subcommittee PM Support American Family Insurance	
x	Gina Dennik-Champion, MSN, RN, MSHA Executive Director Wisconsin Nursing Association	x	Elizabeth (Liz) Laubach, PharmD, BCPS Regional Director of Pharmacy Ascension Wisconsin		<b>Carlo Nevicosi, APSW</b> deputy director Walworth County Health & Human Services	х	Kathleen Caron SDMAC PM SupportLead WI Department of Health Services Division of Public Health	

## Agenda:

Time:	Topic:	Lead:	Follow-up Items:
12:00 to 12:05 PM	Opening and roll call	Preston Leavitt	<ul> <li>12 of 13 committee members were present and a quorum was attained for the meeting to proceed</li> </ul>
12:05 to 12:08 PM	Review and approval of minutes from December 4, 2020 meeting	Preston Leavitt	<ul> <li>Paul Kelleher moved to approve the minutes, Njeri Wainaina second. Minutes approved.</li> </ul>
12:08 to 12:25 PM	Review ofany new public comment on the General Therapeutics Framework	Aly Capp	<ul> <li>Discussion on the logistics and timing of the groups remaining tasks, specifically the reviewing of public comments and finalization of the General Therapeutics Framework.</li> <li>It was proposed that the final review be moved to the final week of December (the 29<sup>th</sup>) and have the subcommittee recess the week of the 21<sup>st</sup>. This proposal was accepted by the committee and will be noted for future scheduling purposes.</li> </ul>
12:45 to 1:00 PM	Allocation of monoclonal antibody products with EUA	Aly Capp	<ul> <li>It was broughtforward that the allocation challenges of monoclonal antibody therapeutics has practically been more in logistics than ethics.</li> <li>These challenges, it was said, almost forces a "first come, first serve" allocation approach, just to ensure that the drug is being used.</li> </ul>



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Time:	Topic:	Lead:	Follow-up Items:
			<ul> <li>It was broughtforward that the drug is being used by some health systems, but that others are still struggling enough with the logistics that the drug has still not been used.</li> <li>Discussion went deeply into various allocation approaches taken by the various health care systems. These include additional eligibility criteria added to reduce the population of potential patients, making the distribution and randomization less onerous.</li> <li>A question was posed regarding ongoing research and data collection as to drug use and effectiveness         <ul> <li>A discussion ensued regarding non-scientific "research", or drug outcome tracking, to review outcomes and adverse effects of the drugs being allocated. This plays more of a role of "quality assurance" than scientific analysis that may change the eligibility criteria for the drug's use.</li> </ul> </li> <li>The final problem that was broughtforward that, in drafting the monoclonal antibody allocation paper, the issue or reimbursement was not considered. This has impacted the hospitals ability and/or willingness to utilize the drug.</li> <li>This is complicated by the fact that some of these drugs can be very expensive while the data that supports the drugs efficacy can be limited or even contradictory.</li> <li>Plans were made for Friday's meeting; the topic will shift to reviewing the additions of Skilled Nursing Facilities (SNFs) to the allocation framework for Monoclonal Antibodies.</li> </ul>
12:57 PM	Adjourn		The meeting was adjourned at 12:57