Iowa Medicaid Pharmaceutical and Therapeutics Committee
Minutes

Date: June 14, 2012

Chairperson: Charles Wadle, D.O.

Time: 9:31 a.m. to 11:29 a.m.

Location: Capitol Room 116, Des Moines, Iowa

Committee Members Present: Charles Wadle, D.O.; Hayley L. Harvey, DDS, MS; Carole Frier, D.O.; Jolene Kelly, PA-C; Susan Purcell, R.Ph., CGP; Stephen Richards, D.O.; CoraLynn Trewet, Pharm.D.; and Bruce Alexander, R.Ph., Pharm.D., BCPP.

Iowa DHS Staff Present: Susan Parker, Pharm.D., Pharmacy Consultant

Iowa Medicaid Enterprise (IME) Staff Present: John Grotton, R.Ph..; Laureen Biczak, D.O.; Steve Liles, Pharm.D.; Erin Halverson, R.Ph.; Megan Smith, Pharm.D.; and Melissa Biddle.

Chairperson Chuck Wadle called the meeting to order.

I. Chuck Wadle asked that each committee, DHS staff, and IME staff member introduce themselves to the public. The March 8, 2012 open session minutes were reviewed. Carole Frier made the motion to approve the minutes. Sue Purcell seconded the motion. The motion passed with no objections.

II. PDL and Drug Rebate Issues (Dr. Liles): GHS is working to identify the financial impact of the rebate offsets of line extension drugs. New combination drugs and new formulation drugs such as Tricor and Trilipix, will pose the largest threat to the budget. Though there are approximately 1200 medications that have been classified as line extension formulations, 85% of them are older or not commonly used. Though it is still too early to predict a possible dollar amount, due to CMS' interpretation of the rules, it appears the financial losses will not be as great as originally anticipated.

III. PA Criteria/Pro-DUR Edits/Legislation (Susan Parker): Informational Letter 1110 listed changes to the Preferred Drug List effective April 9, 2012, along with new PA criteria for Bystolic and Viibryd. Informational Letter 1136 explained the pharmacy reimbursement changes, and the timeline leading up to average acquisition cost implementation on January 1, 2013. An April 5th letter from the DUR Commission recommended that triazolam be changed to non-preferred on the PDL, as it is only approved for short-term use, and 78 members were found to have been using it regularly for more than 90 days. A letter to DHS from the DUR Commission dated April 5, 2012, recommended changes to the PA criteria for Erythropoiesis Stimulating Agents and Benzodiazepines, and new quantity limits on Risperidone, Zyprexa, and Latuda. A letter to DHS from the DUR Commission dated June 6, 2012, recommended changes to the PA criteria for: Chronic Pain Syndromes, Sedative/Hypnotics Non-Benzodiazepines,

Kalydeco, and Xalkori. It also explained recommended changes to the criteria for overrides on lost, stolen, or destroyed medications.

IV. IME Updates (Dr. Kessler): CMS has approved a State Plan Amendment (SPA) for Iowa Medicaid to create health homes for people with chronic conditions. Interested providers are being allowed to enroll health homes, and can now also enroll members as of June 1st with payments to begin on July 1st. The IME is currently working with Magellan on a second SPA targeting people with serious and persistent mental illness and serious emotional disturbances. The IME has written a proposal, currently posted on the IME website for public comment, to share savings with CMS for dual eligible members. Savings will be generated in multiple ways over the next three years beginning in January of 2013, by use of the health homes, expansion of the disease management programs, and focusing on home and community based programs over institutional care.

V. The public speakers were:

SPEAKER	SUBJECT
Jessica McKeon from Novo Nordisk	Norditropin
Rachel Anhorn from Boehringer-Ingelheim	Jentadueto
Sandra Dean from Genentech	Erivedge
Kristin Crouch from Vertex Pharmaceuticals	Kalydeco

At 10:13, motion to go to closed session was made by Carole Frier and seconded by Jolene Kelly. The motion passed with unanimous approval. Open session resumed at 11:08.

VI. PDL Discussion and Deliberation: All following recommendations were made to maximize cost savings to the program. Butisol will be changed to non-preferred, for diagnosis and treatment duration verification. Legend ibuprofen 100mg/5ml suspension will become non-preferred. Olanzapine will switch to preferred, and Zyprexa to non-preferred. Legend polyethylene glycol will be preferred, and Seroquel will change to non-preferred. Bruce Alexander commented that although the Committee's focus tends to center on financials, the therapeutic issues should be taken into consideration as well. He added that although olanzapine and quetiapine are decreasing in price, that does not mean that use of those drugs should be liberalized, especially at high doses that have come under scrutiny as being inappropriate. Triazolam will become non-preferred with conditions, as recommended by the DUR Commission. Carole Frier motioned to accept the above recommendations, and CoraLynn Trewet seconded. The decision was unanimous.

VII. RDL Discussion and Deliberation: It was recommended to change Advate to recommended to maximize cost savings to the program. Bruce Alexander motioned to accept the above recommendations, and Stephen Richards seconded. The decision was unanimous.

VIII. Newly Released Drugs: All following recommendations were made to maximize cost savings to the program. Erivedge and Inlyta will be non-recommended. Kalydeco, Picato, and Zioptan will all be non-preferred. Hayley Harvey motioned to accept all of these recommendations. Sue Purcell seconded, and the vote was unanimous.

IX. Newly Released Generic Drugs: All following recommendations were made to maximize cost savings to the program. Escitalopram, fluocinolone acetonide oil, fluvastatin, ibandronate, progesterone capsule, tinidazole, and ziprasidone will all be non-preferred. Irbesartan, irbesartan/HCTZ, methylphenidate ER capsule, and modafinil will all be non-preferred with conditions. Lamivudine/zidovudine will be non-recommended, and quetiapine will be preferred. Sue Purcell motioned to accept the above recommendations. Bruce Alexander seconded the motion, and all members were in favor.

X. New Dosage Forms: All following recommendations were made to maximize cost savings to the program. Bydureon, Intermezzo, Janumet XR, and Oxecta will all be non-preferred with conditions. Stephen Richards motioned to accept these recommendations, and CoraLynn Trewet seconded. All members were in favor.

XI. New Drug Names/Combinations: All following recommendations were made to maximize cost savings to the program. Dutoprol and Gammaked will be non-preferred. Edarbyclor and Jentadueto will be non-preferred with conditions. CoraLynn Trewet motioned to accept these recommendations, and Hayley Harvey seconded. All members were in favor.

A motion was made by Bruce Alexander to adjourn the meeting. Sue Purcell seconded the motion. All in attendance approved. The meeting adjourned at 11:29 a.m. The next scheduled meeting will be September 13, 2012.