

**Iowa Medicaid Pharmaceutical and Therapeutics Committee
Minutes**

Date: August 21, 2014

Chairperson: Charles Wadle, D.O. (Absent. Meeting conducted by Vice Chairperson Stephen Richards)

Time: 9:25 a.m. to 11:49 a.m.

Location: Capitol Room 116, Des Moines, Iowa

Committee Members Present: Stephen Richards, D.O.; Carole Frier, D.O.; Bruce Alexander, Pharm.D.; Jolene Kelly, PA-C; Holly Randleman, Pharm.D.; Mark Graber, M.D.; and Heidi Price-Eastman, R.Ph.

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

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

Vice-Chairperson Stephen Richards called the meeting to order.

- I. Stephen Richards asked that each committee, DHS staff, and IME staff member introduce themselves to the public and to the newly re-appointed committee member, Mark Graber. The April 17, 2014, open session minutes were reviewed. Bruce Alexander made the motion to approve the minutes. Jolene Kelly seconded the motion. The motion passed with no objections.
- II. PDL and Drug Rebate Issues (Dr. Liles): There were no updates or issues.
- III. PA Criteria/Pro-DUR Edits/Legislation (Dr. Parker): Informational Letters 1361, 1382, and 1398 were reviewed. The topics contained within them included prior authorization criteria for Eliquis, Hepatitis C Protease Inhibitors and Oral Antiviral Agents, Proton Pump Inhibitors, Xyrem, Anti-Diabetics Non-Insulin Agents, Mekinist, Antidepressants, Incivek, and Kalydeco, along with new quantity limits on Albenza, fluocinolone, Stromectol, Transderm Scop, and butalbital-containing products. Providers also received faxed notification when Aldara and Inderal LA became non-preferred. The committee received copies of two letters sent to the Department of Human Services from the Drug Utilization Review Commission, which included recommended criteria for Oral Hepatitis C Antiviral Agents, Antidepressants, Kalydeco, Xolair, Eliquis, and Pradaxa, as well as a recommendation that Evzio not be covered as it is a convenience item and there are other more cost-effective alternatives. The cost of dispensing survey has been completed, resulting in a dispensing fee of \$11.73, approval of which is in process as a State Plan Amendment with CMS. The proposed effective date is August 1, 2014. Once approved, the increase will apply retroactively to all claims submitted since that date.
- IV. IME Updates: Medicaid Director Jennifer Vermeer will be leaving Iowa Medicaid for a position at the University of Iowa effective August 21, 2014. Julie Lovelady will be interim director while a national search is conducted.

V. The public speakers were:

Name	Representing	Drug/Topic
Shane Grivna	Pharmacyclics	Imbruvica
Jodi Tomlonovic	Family Planning Council of Iowa	Ella, Plan B
Carla Schad, MD	Sunovion Pharmaceuticals	Aptiom
Sanjay Mehta, PharmD, MBA	Biogen Idec	Alprolix
Rupa Shah, PharmD	Purdue Pharma	Butrans, Oxycontin
Contessa Fincher, PhD, MPH	Teva Pharmaceuticals	Copaxone 40mg
Lorraine Dansie	Vanda Pharma	Hetlioz
Vince Santucci, PharmD	Celgene	Otezla

At 10:07, motion to go to closed session was made by Jolene Kelly and seconded by Mark Graber. The motion passed with unanimous approval. Open session resumed at 11:20.

- VI. PDL Discussion and Deliberation (Voting Block 1, Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. It was recommended to change Namenda XR to preferred, including an age edit. Immediate release Namenda is pending discontinuation. It was also recommended to change Cayston to preferred including an age edit and quantity limit, and to change Tegretol tablets to preferred (carbamazepine will remain preferred). Additionally, it was recommended to change Daraprim to non-preferred, propranolol er to preferred, and Inderal LA to non-preferred. Bruce Alexander motioned to accept the above recommendations, and Heidi Price-Eastman seconded. The decision was unanimous.
- VII. PDL Discussion and Deliberation (Voting Block 2, Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. It was recommended to change levonorgestrel (emergency contraception) to preferred as the legend brand product (Plan B) is no longer available. It was also recommended to change oral erythromycin products to non-preferred, and to change azithromycin 1gm powder packet to preferred. Additional recommendations included changing Zithromax 600mg tablet to non-preferred, and Biaxin 250mg/5mL suspension to non-preferred. Carole Frier motioned to accept the above recommendations, and Bruce Alexander seconded. The decision was unanimous.
- VIII. PDL Discussion and Deliberation (Voting Block 3, Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. It was recommended to change clarithromycin 250mg and 500mg tablets to preferred, and to change potassium chloride 20 mEq powder packets to non-preferred. It was also recommended to change naloxone, Maxidex ophthalmic suspension, and dexamethasone phosphate ophthalmic solution to preferred. Bruce Alexander motioned to accept the above recommendations, and Holly Randleman seconded. The decision was unanimous.
- IX. PDL Discussion and Deliberation (Voting Block 4, Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. It was recommended to change Durezol to preferred. It was also recommended to change all of the following to non-preferred: fluorometholone ophthalmic suspension, Lotemax, and prednisolone acetate ophthalmic suspension. Additionally, it was recommended to change prednisolone

sodium phosphate ophthalmic solution to preferred. Jolene Kelly motioned to accept the above recommendations, and Heidi Price-Eastman seconded. The decision was unanimous.

- X. PDL Discussion and Deliberation (Voting Block 5, Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. It was recommended to change all of the following to preferred: Vexol, Pred-G, Zylet, Blephamide S.O.P, and Maxitrol. Bruce Alexander motioned to accept the above recommendations, and Carole Frier seconded. The decision was unanimous.
- XI. PDL Discussion and Deliberation (Voting Block 6, Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. It was recommended to change neomycin-polymyxin-hc ophthalmic suspension to non-preferred, amphetamine salt combo to preferred with conditions, and Adderall to non-preferred with conditions. It was also recommended to change tetracycline and Aldara to non-preferred, and X-Viate 40% cream and imiquimod to preferred. Carole Frier motioned to accept the above recommendations, and Bruce Alexander seconded. The decision was unanimous.
- XII. RDL Discussion and Deliberation (Voting Block 1, Dr. Biczak): It was recommended to change the Immunosuppressant category from the RDL to the PDL. All existing members will be grandfathered on established therapies. All following recommendations were made to maximize cost savings to the program unless otherwise noted. Cyclosporine was recommended to change from non-recommended to preferred. Sandimmune was recommended to change from recommended to preferred. Cyclosporine modified was recommended to change from recommended to preferred. Gengraf was recommended to change from non-recommended to preferred. Neoral was recommended to change from non-recommended to non-preferred. Heidi Price-Eastman motioned to accept the above recommendations, and Bruce Alexander seconded. The decision was unanimous.
- XIII. RDL Discussion and Deliberation (Voting Block 2, Dr. Biczak): It was recommended to change the Immunosuppressant category from the RDL to the PDL. All existing members will be grandfathered on established therapies. All following recommendations were made to maximize cost savings to the program unless otherwise noted. Cellcept tablets and capsules were recommended to change from non-recommended to non-preferred. Cellcept Oral Suspension was recommended to change from recommended to preferred. Mycophenolate mofetil was recommended to change from recommended to preferred. Mycophenolate sodium was recommended to change from non-recommended to non-preferred. Myfortic was recommended to change from recommended to preferred. Bruce Alexander motioned to accept the above recommendations, and Carole Frier seconded. The decision was unanimous.
- XIV. RDL Discussion and Deliberation (Voting Block 3, Dr. Biczak): It was recommended to change the Immunosuppressant category from the RDL to the PDL. All existing members will be grandfathered on established therapies. All following recommendations were made to maximize cost savings to the program unless otherwise noted. Zortress was recommended to change from non-recommended to non-preferred. Rapamune was recommended to change from recommended to preferred. Sirolimus was recommended to change from non-recommended to preferred. Astagraf XL was recommended to change from non-recommended to non-preferred with conditions. Prograf was recommended to change from recommended to non-preferred.

Tacrolimus was recommended to change from non-recommended to preferred. Heidi Price-Eastman motioned to accept the above recommendations, and Holly Randleman seconded. The decision was unanimous.

XV. Newly Released Drugs (Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. Dr. Biczak reviewed the new drugs, and then the committee voted unanimously in favor of all the recommendations. Below is the breakdown of the individual motions that preceded each committee vote. Mark Graber motioned to make Anoro Ellipta non-preferred, and Bruce Alexander seconded. Mark Graber motioned to make Aptiom non-preferred, and Jolene Kelly seconded. Carole Frier motioned to make Ella preferred as studies have shown that levonorgestrel is not as effective in women who have a BMI greater than 25 and it's the only product effective for up to 5 days; Bruce Alexander seconded. Mark Graber motioned to make Farxiga non-preferred with conditions, and Bruce Alexander seconded. Mark Graber motioned to make Hetlioz non-preferred with conditions to verify diagnosis, and Bruce Alexander seconded. Carole Frier motioned to make Imbruvica non-recommended as it is not intended as a first-line treatment option, and Jolene Kelly seconded. Mark Graber motioned to make Myalept non-preferred to verify diagnosis, and Jolene Kelly seconded. Mark Graber motioned to make Otezla non-preferred with conditions, and Bruce Alexander seconded. Mark Graber motioned to make Velphoro non-preferred, and Holly Randleman seconded. Heidi Price-Eastman motioned to make Zohydro ER non-preferred with conditions, and Carole Frier seconded. Holly Randleman motioned to make Zykadia non-recommended, and Jolene Kelly seconded.

XVI. Newly Released Generic Drugs (Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. Capecitabine and lomustine were both recommended to be non-recommended. Eszopiclone, hydromorphone er, telmisartan/hct, and zolmitriptan were all recommended to be non-preferred with conditions. These remaining new generics were all recommended to be non-preferred: amoxicillin/clarithromycin/lansoprazole, atovaquone, budesonide nasal, calcipotriene/betamethasone ointment, cycloserine, doxercalciferol, moxifloxacin, omega-3-acid 1gm, raloxifene, sevelamer, and xulane. Holly Randleman motioned to accept the above recommendations. Carole Frier seconded the motion, and all members were in favor.

XVII. New Dosage Forms/Strengths (Dr. Biczak): All following recommendations were made to maximize cost savings to the program unless otherwise noted. Bruce Alexander motioned to accept the following recommendations: Aerospan, preferred; Alprolix, non-recommended; Aveed, non-preferred with conditions; Copaxone 40mg injection, non-preferred; Granix, non-preferred with conditions; Hemangeol, non-preferred; Lupaneta, non-preferred; Orenitram, non-preferred with conditions; Otrexup, non-preferred with conditions; and Xartemis XR, non-preferred with conditions. Jolene Kelly and Holly Randleman both seconded the motion, and all members were in favor.

A motion was made by Carole Frier to adjourn the meeting. Bruce Alexander seconded the motion. All in attendance approved. The meeting adjourned at 11:49 a.m. The next scheduled meeting is tentatively set for November 20, 2014.