



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

Iowa Medicaid Pharmaceutical and Therapeutics (P & T) Committee Meeting April 21, 2016

Location: Iowa Medicaid Enterprise
100 Army Post Rd
Des Moines, IA 50315

Time: 9:30 a.m. – 4:30 p.m.

Final Agenda

1. Welcome & Introductions
 - a) Committee Members and Staff
 - b) Approval of the minutes
2. Update
 - c) Preferred Drug List (PDL)
 - d) Medicaid Drug Rebate Issues
 - e) Prior Authorization Criteria/Pro-DUR edits
 - f) Legislation
 - g) IME Updates
 - h) Analgesics, Narcotics- Long Acting Therapeutic Class Review
3. Public Comment (**See attachment 1 for Conflict of Interest Disclosure**)
 - a) Review of Public Comment Policy
 - b) Public Comment
4. Closed Executive Session
 - a) Approval of the minutes
 - b) Economic Review of the Iowa Medicaid Preferred Drug List, Newly Released Drugs, Newly Released Generic Drugs, New Dosage Forms, and Contracts
 - c) Review and discussion of the Confidential Public Comments
5. Preferred Drug List (PDL) discussion and deliberation
(**See attachment 2 for order of discussion**)
6. Final Recommendations by the P & T Committee on the Iowa Medicaid Preferred Drug List
7. Review of Newly Released Drugs
(**See attachment 3 for order of discussion**)
8. Final Recommendations by the P & T Committee on Newly Released Drugs (Open Session)
9. Review of Newly Released Generic Drugs, Dosage Forms or Strengths
(**See attachment 4 for order of discussion**)
10. Final Recommendations by the P & T Committee on Newly Released Generic Drugs, Dosage Forms or Strengths
11. Preview of next meeting

****Disclaimer:** Executive Sessions may be necessary during the deliberation process**

www.IowaMedicaidPDL.com

Next scheduled meeting: August 18, 2016 9:30am - 4:30pm

For more information contact Erin Halverson at ehalver@dhs.state.ia.us or (515) 974-3126

Attachment 1

**Iowa Medicaid Pharmaceutical and Therapeutics (P&T) Committee
Speaker Conflict of Interest Disclosure**

The Iowa Medicaid Pharmaceutical and Therapeutics (P&T) Committee and persons speaking or presenting to the Iowa Medicaid P&T Committee are asked to disclose any financial or other affiliation with organizations that may have a direct or indirect interest in the business in front of the Committee. Those persons speaking or presenting at the P&T Committee meetings are asked to disclose potential conflicts on this form. P&T Committee members disclose potential conflicts each year on a separate form.

A financial interest may include, but is not limited to, being a shareholder in the organization, being on retainer with the organization, having research or honoraria paid by the organization, or receiving other forms of remuneration from an organization. An affiliation may include holding a position on an advisory committee or some other role or benefit to a supporting organization.

The existence of such a financial relationships or affiliation does not necessarily constitute a conflict of interest and will not preclude an individual from participating or addressing the P&T Committee. This policy is intended to openly identify any potential conflicts so that the P&T Committee members and the public are able to form their own judgments.

Your responses below will be read out loud before your presentation to the P&T Committee.

Please check the box of the statement that best applies.

Statement of No Conflicts

I do not have a current or recent (within the last 12 months) financial arrangement or affiliation with any organization that may have a direct interest in the business before the Iowa Medicaid P&T Committee.

Disclosures

I have a financial interest, affiliation or am employed by an organization that may have a direct interest in the business before the Iowa Medicaid P&T Committee

I refuse to state my affiliations

Organization (List additional on the back of the form.)	Role/Relationship (List additional on the back of the form.)

(print name)

(signature)

(date)

Attachment 2

Iowa Medicaid Preferred Drug List

Disclaimer: The Iowa P&T Committee reserves the right to re-evaluate all medications within the same therapeutic category as those on the agenda scheduled to be discussed for the PDL Review, New Drug Review, New Generic Drug Review, and New Dosage Forms Review and vote to change the PDL status of other medications currently on the PDL. It is the responsibility of the drug manufacturer to provide representation, if necessary, at the P&T Committee Meeting when a competitor's product is on the agenda for discussion.

The below changes are recommended to maximize cost savings to the program unless otherwise noted:

1. Recommend to change Android to Non-Preferred with Conditions.
2. Recommend to change Testred to Non-Preferred with Conditions.
3. Recommend to change Pradaxa to Preferred. This will be implemented after DUR review regarding removal of prior authorization criteria.
4. Recommend to change Xarelto to Preferred. This will be implemented after DUR review regarding removal of prior authorization criteria.
5. Recommend to change voriconazole oral suspension to Preferred with Conditions and Vfend oral suspension to Non-Preferred with Conditions.
6. Recommend to change Myambutol to Non-Preferred.
7. Recommend to change Migranal to Non-Preferred.
8. Recommend to change fentanyl 25, 50, 75 & 100 mcg patches to Preferred.
9. Recommend to change Kadian 10, 40, 130 & 150 mg capsules to Non-Preferred with Conditions.
10. Recommend to change MS Contin to Non-Preferred with Conditions (generic morphine sulfate er tablets will remain Preferred).
11. Recommend to change Embeda to Preferred.
12. Recommend to change Vigamox to Preferred to allow use of a fourth generation ophthalmic fluoroquinolone.
13. Recommend to change modafinil to Preferred with Conditions and Provigil to Non-Preferred with Conditions.

Attachment 3

Newly Released Drugs

Disclaimer: The Iowa P&T Committee reserves the right to re-evaluate all medications within the same therapeutic category as those on the agenda scheduled to be discussed for the PDL Review, New Drug Review, New Generic Drug Review, and New Dosage Forms Review and vote to change the PDL status of other medications currently on the PDL. It is the responsibility of the drug manufacturer to provide representation, if necessary, at the P & T Committee Meeting when a competitor's product is on the agenda for discussion.

1. Alecensa- Recommend status on the RDL as Non-Recommended with Conditions
2. Coagadex- Recommend status on the RDL as Non-Recommended
3. Cotellic- Recommend status on the RDL as Non-Recommended with Conditions
4. Cresemba- Recommend status on the PDL as Non-Preferred with Conditions
5. Lonsurf- Recommend status on the RDL as Non-Recommended with Conditions
6. Mircera- Recommend status on the PDL as Non-Preferred with Conditions
7. Ninlaro- Recommend status on the RDL as Non-Recommended with Conditions
8. Nucala- Recommend status on the PDL as Non-Preferred
9. Odomzo- Recommend status on the RDL as Non-Recommended with Conditions
10. Priftin- Recommend status on the PDL as Preferred
11. Strensiq- Recommend status on the PDL as Non-Preferred
12. Tagrisso- Recommend status on the RDL as Non-Recommended with Conditions
13. Tresiba Flex- Recommend status on the PDL as Non-Preferred with Conditions
14. Veltassa- Recommend status on the PDL as Non-Preferred

Attachment 4

Newly Released Generic Drugs, New Dosage Forms, New Drug Names, and New drug Strengths

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NEWLY RELEASED GENERIC DRUGS		
Drug Name	Brand Name/Status on PDL/RDL	PDL/RDL Recommendation
Dutasteride	Avodart / Non-Preferred	Non-Preferred
Dutasteride-Tamsulosin	Jalyn / Non-Preferred	Non-Preferred
Imatinib	Gleevec / Preferred with Conditions	Non-Preferred with Conditions
Methyltestosterone	Android / Non-Preferred with Conditions	Preferred with Conditions
Molindone	Moban / Not Available	Non-Preferred
Paliperidone ER	Invega / Non-Preferred Step 3	Non-Preferred Step 3
Pimozide	Orap / Preferred	Non-Preferred
Prednisolone ODT	Orapred / Non-Preferred	Non-Preferred
Tranexamic Acid	Lysteda / Non-Preferred	Non-Preferred

NEW DRUG DOSAGE FORMS/STRENGTHS/COMBINATIONS		
Adynovate	Eloctate / Non-Recommended	Non-Recommended
Aristada	Abilify Maintena / Non-Preferred Step 3	Non-Preferred Step 3
Belbuca	Butrans / Non-Preferred with Conditions	Non-Preferred with Conditions
Enstilar	Taclonex / Non-Preferred	Non-Preferred
Genvoya	Stribild / Non-Preferred	Preferred
Nuwig	Novoeight / Non-Recommended	Non-Recommended
Vivlodex	Meloxicam Tablets / Preferred	Non-Preferred with Conditions