



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 November 20, 2014

Location: Iowa State Capitol Room 116
1007 E. Grand Ave
Des Moines, IA 50319

Time: 8:30 a.m. – 4:30 p.m.

Final Agenda

1. Welcome & Introductions
 - a) Committee Members and Staff
 - b) Approval of the minutes
2. Update
 - a) Annual P&T Committee Chairperson and Vice Chairperson Elections
 - b) Preferred Drug List (PDL)
 - c) Medicaid Drug Rebate Issues - CMS removal of non-listed NDCs
 - d) Prior Authorization Criteria/Pro-DUR edits
 - e) Legislation
 - f) IME Updates
 - ProDUR Edits for Antipsychotics
3. Public Comment (**See attachment 1 for Conflict of Interest Disclosure**)
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 and 3 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 4 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 5 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: April 16, 2014 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.

- 1) ACE and Thiazide Combo's
- 2) ACE Inhibitors
- 3) ACE Inhibitors and CA Channel Blockers
- 4) Acne Products: Isotretinoin
- 5) Agents for Fabrys Disease
- 6) Agents for Gaucher Disease
- 7) Agents for Pheochromocytoma
- 8) Alcohol Deterrents
- 9) Alpha-Proteinase Inhibitor
- 10) ALS Drug
- 11) Alzheimer – Cholinomimetics
- 12) Amino Glycosides
- 13) Analgesics – Misc.
- 14) Anaphylaxis Therapy
- 15) Androgens / Anabolics
- 16) Androgens-Topical
- 17) Anorectal – Misc.
- 18) Anthelmintics
- 19) Anti-Infective Combo's – Misc.
- 20) Antianginals
- 21) Antianginals – Isosorbide Nitrate
- 22) Antiarrhythmics
- 23) Antiasthmatic – 5-Lipoxygenase Inhibitors
- 24) Antiasthmatic – Adrenergic Combos
- 25) Antiasthmatic – Anti-Cholinergics
- 26) Antiasthmatic – Anti-Inflammatory Agents
- 27) Antiasthmatic – Beta-Adrenergics
- 28) Antiasthmatic – Leukotriene Receptor Antagonists
- 29) Antiasthmatic – Misc. Respiratory Inhalants
- 30) Antiasthmatic – Mixed Adrenergics
- 31) Antiasthmatic – Mucolytics
- 32) Antiasthmatic – Nasal Misc.
- 33) Antiasthmatic – Steroid Inhalants
- 34) Antiasthmatic – Xanthines
- 35) Antibiotics – Misc.
- 36) Anti-Cataplectic Agents
- 37) Anticoagulants
- 38) Anticonvulsants
- 39) Antidepressants- MAO Inhibitors
- 40) Antidepressants- Selected SSRI'S
- 41) Antidepressants- Tri-Cyclics
- 42) Antidotes
- 43) Antidotes – Chelating Agents
- 44) Antiemetic – 5-HT3 Receptor Antagonists/Substance P Neurokinin

- 45) Antiemetic – Anticholinergic / Dopaminergic
- 46) Antiemetic – Tetrahydrocannabinol (THC) Derivatives
- 47) Antifungals – Assorted
- 48) Antihistamines – Non-Sedating
- 49) Antihistamines – Non-Sedating / Decongestants
- 50) Antihistamines – Other
- 51) Antihistamines/Decongestants
- 52) Antihyperlipidemics
- 53) Antihypertensive Combos
- 54) Antihypertensives – Central
- 55) Antileprotic
- 56) Antimalarial Agents
- 57) Antimycobacterials / Antituberculosis
- 58) Anti-Parkinsonian Drugs
- 59) Antiprotozoal Agents
- 60) Anti-Psoriatics – Non-Biologicals
- 61) Antipsychotics- Atypicals
- 62) Antipsychotics- Special Atypicals
- 63) Antipsychotics- Typical
- 64) Antispasmodics
- 65) Antispasmodics – Long Acting
- 66) Antithyroid Therapies
- 67) Anxiolytics-Benzodiazepines
- 68) Anxiolytics- Long Acting
- 69) Anxiolytics- Misc.
- 70) ARB/CCB
- 71) ARB/CCB Plus Diuretics
- 72) ARB's
- 73) ARB's and Diuretics
- 74) Arthritis – Misc.
- 75) Artificial Saliva / Stimulants
- 76) Beta Blockers – Alpha / Beta
- 77) Beta Blockers – Cardio Selective
- 78) Beta Blockers – Non-Selective
- 79) Beta Blockers and Diuretic Combo's
- 80) Beta – Lactams / Clavulanate Combo's
- 81) Biologic Immunomodulators
- 82) BPH
- 83) Calcium Channel Blockers – Amlodipines
- 84) Calcium Channel Blockers – Diltiazems
- 85) Calcium Channel Blockers – Felodipines
- 86) Calcium Channel Blockers – Isradipines
- 87) Calcium Channel Blockers – Nifedipines
- 88) Calcium Channel Blockers – Nisoldipine
- 89) Calcium Channel Blockers – Verapamils
- 90) Carbapenems
- 91) Cardiac Glycosides
- 92) Carnitine Replenisher – Agents
- 93) CCB / Lipid
- 94) Central Precocious Puberty Agents
- 95) Cephalosporins
- 96) Chelating Agents
- 97) Cholesterol – Bile Sequestrants
- 98) Cholesterol – Fibric Acid Derivatives
- 99) Cholesterol – HMG COA + Absorb Inhibitors
- 100) Cholesterol – HMG COA + Absorb Inhibitors: High Potency Drugs/Combinations
- 101) Cholesterol – HMG COA + Absorb Inhibitors: Low Potency Drugs/Combinations

- 102) Cholinergic
- 103) Compounding Materials
- 104) Contraceptives – Bi-Phasic Combinations
- 105) Contraceptives – Emergency Contraceptives
- 106) Contraceptives – Injectable
- 107) Contraceptives – Monophasic Combination O/C's
- 108) Contraceptives – Multi-Phasic Combinations
- 109) Contraceptives – Patches / Vaginal Products
- 110) Contraceptives – Progestin Only
- 111) Contraceptives – Tri-Phasic Combinations
- 112) Cough / Cold – Antitussive – Expectorant
- 113) Cough / Cold – Systemic Decongestants
- 114) Cox 2 Inhibitors – Selective
- 115) Cystic Fibrosis Agents
- 116) Cyto-Megalovirus Agents
- 117) Dental Products
- 118) Diabetic – AlphaglucoSIDase
- 119) Diabetic – Insulin
- 120) Diabetic – Insulin Penfills
- 121) Diabetic – Meglitinides
- 122) Diabetic – Non-Insulin Injectables
- 123) Diabetic – Oral Biguanides
- 124) Diabetic – Oral Sulfonylureas
- 125) Diabetic – Other
- 126) Diabetic – Sulfonylurea / Biguanide
- 127) Diabetic – Thiazol
- 128) Diabetic – Thiazol / Biguanide Combo
- 129) Diagnostic Biologicals
- 130) Diagnostic Drugs
- 131) Direct Renin Inhibitors
- 132) Diuretics
- 133) Dopamine Receptor Agonists
- 134) Ear
- 135) Electrolytes / NutritionalS
- 136) Erythropoeisis Stimulating Agents
- 137) Estrogen Combo's
- 138) Estrogens – Patches
- 139) Estrogens – Tabs
- 140) Fluoroquinolones
- 141) GI – Anti-Flatulents / GI Stimulants
- 142) GI – Antidiarrheal / Antacid – Misc.
- 143) GI – Antiperistaltic Agents
- 144) GI – Digestive Enzymes
- 145) GI – H2-Antagonists
- 146) GI – Inflammatory Bowel Agents
- 147) GI – Irritable Bowel Syndrome Agents
- 148) GI – Misc.
- 149) GI – Misc. Anti-Ulcer
- 150) GI – Prostaglandins
- 151) GI – Proton Pump Inhibitor
- 152) GI – Proton Pump Inhibitor / NSAID Combo
- 153) GI – Ulcer Anti-Infective
- 154) Glucocorticoids – Corticotropin
- 155) Glucocorticoids – Mineralocorticoids
- 156) Gout
- 157) Granulocyte CSF
- 158) Growth Hormone

- 159) Hemostatic
- 160) Hepatitis B Only
- 161) Hepatitis C Agents
- 162) Hereditary Angioedema Agents
- 163) Hereditary Tyrosinemia Type 1 (HT-1) Treatment – Agents
- 164) Herpes Agents
- 165) Hyperparathyroid Treatment – Vitamin D Analogs
- 166) Hyperparathyroid Treatment – Vitamin D Analogs and Calcimimetics
- 167) Immune Serums
- 168) Immunosuppressants
- 169) Influenza Agents
- 170) K Removing Resins
- 171) LHRH/GNRH Agonist Analog Pituitary Suppressants
- 172) Lincosamides / Oxazolidinones / Leprostatics
- 173) Lipodystrophy Agents
- 174) Lithium
- 175) Macrolides / Erythromycin's / Ketolides
- 176) Metabolic Modifiers-Lysosomal Storage Disorder Treatments
- 177) Migraine – Ergotamine Combinations
- 178) Migraine – Ergotamine Derivatives
- 179) Migraine – Selective Serotonin Agonists (5HT) – Injectables
- 180) Migraine – Selective Serotonin Agonists (5HT) – Tabs
- 181) Migraine-Selective Serotonin Agonist-(5HT) Combinations
- 182) Minerals
- 183) Mouth – Anesthetics Topical Oral
- 184) Mouth – Steroids
- 185) Mouth Anti-Infectives
- 186) Mouth Antiseptics
- 187) Mucopolysaccharidosis
- 188) Multiple Sclerosis Agents
- 189) Multiple Sclerosis Agents-Interferons
- 190) Multiple Sclerosis Agents-Non-Interferons
- 191) Muscle Relaxant – Combinations
- 192) Muscle Relaxants
- 193) Narcotic – Antagonists
- 194) Narcotics – Misc.
- 195) Narcotics – Selected
- 196) Narcotics – Long Acting
- 197) Nasal Steroid/Antihistamine Combos
- 198) Nasal Steroids
- 199) Neurologics – Misc.
- 200) Neuromuscular Blocking Agents
- 201) Nicardipines
- 202) Nicotine Replacement Therapy
- 203) Nitro – Ointment / Cap / CR
- 204) Nitro – Patches
- 205) Nitro – Sublingual / Spray
- 206) NSAIDS
- 207) Op. Antiallergics-Antihistamines
- 208) Op. Antiallergics-Mast Cell Stabilizers
- 209) Op. Antibiotics
- 210) Op. Antiinflammatory / Steroids Ophth
- 211) Op. Beta-Blockers
- 212) Op. Carbonic Anhydrase Inhibitors / Combo
- 213) Op. Cycloplegics
- 214) Op. Miotics – Direct Acting
- 215) Op. Misc.

- 216) Op. NSAID's
- 217) Op. Prostaglandins
- 218) Op. Quinolones
- 219) Op. Quinolones-Fourth Generation
- 220) Op. Selective Alpha Adrenergic Agonists
- 221) Osteoporosis
- 222) Oxytocics
- 223) Parkinsons – Anticholinergics
- 224) Parkinsons – COMT Inhibitors
- 225) Parkinsons – Selected Dopamine Agonists
- 226) Peripheral Vasodilators
- 227) Phenylketonuria
- 228) Phosphate Binders
- 229) Phosphodiesterase Inhibitors
- 230) Platelet Aggr. Inhibitors / Combo's – Misc.
- 231) Platelet Aggregation Inhibitors
- 232) Powders
- 233) Pressors
- 234) Progestins
- 235) Psychotherapeutic Combination
- 236) Pulmonary Anti-Hypertensives
- 237) Pulmonary Anti-Hypertensives-Endothelin Receptor Antagonist
- 238) Purine Analog
- 239) Restless Leg Syndrome Agents
- 240) Rheumatoid Arthritis – Non-Biologicals
- 241) RSV Prophylaxis
- 242) Sedative / Hypnotics – Barbiturate
- 243) Sedative / Hypnotics – Benzodiazepines
- 244) Sedative / Hypnotics – Non-Benzodiazepines
- 245) Smoking Cessation (Oral)
- 246) Somatostatic Agents
- 247) Stimulants
- 248) Stimulants- Amphetamines- Long Acting
- 249) Stimulants- Amphetamines- Short Acting
- 250) Stimulants- Methylphenidate
- 251) Stimulants- Methylphenidate- Long Acting
- 252) Stimulants- Other Stimulants/ Like Stimulants
- 253) Tetracyclines
- 254) Thrombopoietin Receptor Agonists
- 255) Thyroid Hormones
- 256) Tissue Plasminogen Activator
- 257) Topical – Acne Preparations
- 258) Topical – Antibiotic
- 259) Topical – Antifungals
- 260) Topical – Antineoplastics
- 261) Topical – Antipruritics
- 262) Topical – Antiseborrheics
- 263) Topical – Antiseptics / Disinfectants
- 264) Topical – Antivirals
- 265) Topical – Astringents / Protectants
- 266) Topical – Burn Products
- 267) Topical – Cauterizing Agents
- 268) Topical – Corticosteroids
- 269) Topical – Emollients
- 270) Topical – Enzymes / Keratolytics / Urea
- 271) Topical – Genital Warts
- 272) Topical – Immunomodulators

- 273) Topical – Local Anesthetics
- 274) Topical – Nasal Antibiotics
- 275) Topical – Scabicides and Pediculicides
- 276) Topical – Steroid Combinations
- 277) Topical – Steroid Local Anesthetics
- 278) Topical – Tretinoids
- 279) Topical-Wound/Decubitis Care
- 280) Urea Cycle Disorder – Agents
- 281) Urological – Misc.
- 282) Vaccines
- 283) Vaginal – Antifungals
- 284) Vaginal – Antibacterials
- 285) Vaginal – Estrogens
- 286) Vaginal – Other
- 287) Vasopressins
- 288) Vitamins
- 289) Vitamins – Misc.

Attachment 3
Iowa Medicaid Preferred Drug List Changes

1. Recommend to change Zavesca to Non-Preferred to maximize cost savings to the program
2. Recommend to change Depo-Testosterone to Non-Preferred with Conditions to maximize cost savings to the program (generic testosterone cypionate will remain Preferred with conditions).
3. Recommend to change albuterol tablets to Non-Preferred to maximize cost savings to the program.
4. Recommend to change ProAir HFA to Preferred to maximize cost savings to the program.
5. Recommend to change metaproterenol tablets and syrup to Non-Preferred due to its unfavorable side effect profile.
6. Recommend to change enoxaparin syringes to Preferred and Lovenox syringes to Non-Preferred to maximize cost savings to the program.
7. Recommend to change fondaparinux to Non-Preferred to maximize cost savings to the program.
8. Recommend to change gabapentin 600mg and 800mg tablets to Preferred to maximize cost savings to the program.
9. Recommend to change calcipotriene to Preferred to maximize cost savings to the program.
10. Recommend to change Dovonex Cream to Non-Preferred to maximize cost savings to the program.
11. Recommend to change cephalexin 750mg capsules to Preferred to maximize cost savings to the program.
12. Recommend to change cephalexin tablets to Non-Preferred to maximize cost savings to the program (capsules will remain Preferred).
13. Recommend to change cefaclor 250mg/mL oral suspension to Non-Preferred to maximize cost savings to the program.
14. Recommend to change Suprax 100mg/5mL and 200mg/5mL to Preferred to maximize cost savings to the program.

15. Recommend to change fenofibrate tablets to Preferred and Tricor to Non-Preferred to maximize cost savings to the program.
16. Recommend to change Niaspan to Non-Preferred due to a recommendation from the Drug Utilization Review (DUR) Commission (grandfather existing users).
17. Recommend to change Simcor to Non-Preferred due to a recommendation from the DUR Commission (grandfather existing users).
18. Recommend to change Coly-Mycin S to Non-Preferred to maximize cost savings to the program.
19. Recommend to change Cortisporin-TC to Non-Preferred to maximize cost savings to the program.
20. Recommend to change Genotropin to Non-Preferred with Conditions to maximize cost savings to the program.
21. Recommend to change Nutropin AQ to Preferred with Conditions to maximize cost savings to the program.
22. Recommend to change Omnitrope to Non-Preferred with Conditions to maximize cost savings to the program.
23. Recommend to change acyclovir oral suspension to Non-Preferred to maximize cost savings to the program (brand Zovirax suspension will remain Preferred).
24. Recommend to change Rebif to Non-Preferred to maximize cost savings to the program (grandfather existing users).
25. Recommend to review status of Copaxone 20mg as the manufacturer did not execute the supplemental rebate agreement in a timely manner after submitting an offer for calendar year 2015.
26. Recommend to change Gilenya to Preferred with electronic step edit of one preferred injectable required to maximize cost savings to the program.
27. Recommend to change hydromorphone injection to Non-Preferred with Conditions to maximize cost savings to the program.
28. Recommend to change Zubsolv to Non-Preferred with Conditions to maximize cost savings to the program.
29. Recommend to change butalbital-apap-caff w/codeine 50-300-40-30 capsules to Non-Preferred with Conditions to maximize cost savings to the program.

30. Recommend to change butalbital-apap-caff w/codeine 50-325-40-30 capsules to Preferred to maximize cost savings to the program.
31. Recommend to change Methadose oral concentrate to Preferred to maximize cost savings to the program.
32. Recommend to change Kadian to Preferred to maximize cost savings to the program.
33. Recommend to change MS Contin to Preferred to maximize cost savings to the program (generic will remain co-preferred).
34. Recommend to change Avinza to Non-Preferred with Conditions to maximize cost savings to the program (grandfather existing users).
35. Recommend to change Opana ER to Non-Preferred with Conditions to maximize cost savings to the program (grandfather existing users).
36. Recommend to change Alphagan P 0.1% to Non-Preferred to maximize cost savings to the program (Alphagan P 0.15% will remain Preferred).
37. Recommend to change Megace ES to Non-Preferred to maximize cost savings to the program.
38. Recommend to change econazole to Non-Preferred to maximize cost savings to the program.
39. Recommend to change hypercare solution to Preferred as Drysol is no longer covered due to the CMS removal of non listed NDCs.
40. Recommend to change clobetasol propionate cream, gel and ointment to Non-Preferred and Temovate to Preferred to maximize cost savings to the program (clobetasol propionate solution will remain Preferred).
41. Recommend to change halobetasol propionate to Non-Preferred and Ultravate to Preferred to maximize cost savings to the program.
42. Recommend to change generics for Nephrocaps to Preferred with Conditions as Dialyvite is no longer covered due to the CMS removal of non listed NDCs.

Attachment 4
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. Cerdelga- Recommend status on the PDL as Non-Preferred
2. Grastek- Recommend status on the PDL as Non-Preferred with Conditions
3. Harvoni- Recommend status on the PDL as Non-Preferred with Conditions
4. Jardiance- Recommend status on the PDL as Non-Preferred with Conditions
5. Jublia- Recommend status on the PDL as Non-Preferred
6. Ragwitek- Recommend status on the PDL as Non-Preferred with Conditions
7. Sivextro- Recommend status on the PDL as Non-Preferred
8. Striverdi Respimat- Recommend status on the PDL as Non-Preferred
9. Tanzeum- Recommend status on the PDL as Non-Preferred with Conditions
10. Zontivity- Recommend status on the PDL as Non-Preferred with Conditions
11. Zydelig- Recommend status on the RDL as Non-Recommended

Attachment 5

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

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.

NEWLY RELEASED GENERIC DRUGS		
Drug Name	Brand Name/Status on PDL/RDL	PDL/RDL Recommendation
Diclofenac 1.5% Solution	Pennsaid / Non-Preferred with Conditions	Non-Preferred with Conditions
Entecavir	Baraclude / Preferred	Non-Preferred
Methoxsalen	Oxsoralen Ultra / Preferred	Non-Preferred
Testosterone Gel	Testim / Preferred with Conditions	Non-Preferred with Conditions
Valsartan	Diovan/ Preferred with Conditions	Non-Preferred with Conditions

NEW DRUG DOSAGE FORMS/STRENGTHS/COMBINATIONS		
Amoxicillin 775mg ER Tab	Amoxicillin 500mg & 875mg Tab / Preferred	Non-Preferred
Eloctate	Advate / Recommended	Non- Recommended
Invokamet	Metformin / Preferred Invokana / Non-Preferred with Conditions	Non-Preferred with Conditions
Qudexy XR	Topiramate / Preferred	Non-Preferred with Conditions
Revatio Suspension	Sildenafil Tablets / Preferred with Conditions	Non-Preferred with Conditions
Sitavig	Acyclovir Capsules / Preferred	Non-Preferred with Conditions
Topiramate ER	Topiramate / Preferred	Non-Preferred with Conditions
Triumeq	Abacavir / Non-Recommended Lamivudine / Non-Recommended Tivicay / Non-Recommended	Non-Recommended
Vogelxo	Testim / Preferred with Conditions	Non-Preferred with Conditions