



# 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 8, 2012

**Location:** Iowa State Capitol Room 116  
1007 E. Grand Avenue  
Des Moines, Iowa 50319

**Time:** 8:30 a.m. – 4:30 p.m.

### Tentative Agenda

1. Welcome & Introductions
    - a) Committee Members and Staff
    - b) Approval of the minutes
  2. Update
    - a) Preferred Drug List (PDL)/Recommended Drug List (RDL)
      1. Discussion of step through generic and pill splitting edits to be considered for the antipsychotic drug class
    - b) Medicaid Drug Rebate Issues
    - c) Prior Authorization Criteria/Pro-DUR edits
    - d) Legislation
    - e) IME Updates
  3. Public Comment (**See attachment 1 for Conflict of Interest Disclosure**)
  4. Closed Executive Session
    - a. Economic Review of the Iowa Medicaid Preferred Drug List/Recommended Drug List, Newly Released Drugs, Newly Released Generic Drugs, New Dosage Forms and Strengths, and Contracts.
    - b. Review and discussion of the confidential public comments
- \*Lunch Break 12:30 p.m.-1:15 p.m.\***
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. Recommended Drug List (RDL) discussion and deliberation  
**(See attachment 4 and 5 for order of discussion)**
  8. Final Recommendations by the P & T Committee on the Iowa Medicaid Recommended Drug List
  9. Review of Newly Released Drugs  
**(See attachment 6 for order of discussion)**
  10. Final Recommendations by the P & T Committee on Newly Released Drugs (Open Session)
  11. Review of Newly Released Generic Drugs, New Drug Names, and New Dosage Forms and Strengths  
**(See attachment 7 for order of discussion)**
  12. Final Recommendations by the P & T Committee on Newly Released Generic Drugs, New Drug Names, and New Dosage Forms and Strengths (Open Session)

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

[www.iowaMedicaidPDL.com](http://www.iowaMedicaidPDL.com)

Next scheduled meeting is March 14, 2013

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**

<b>Organization</b> (List additional on the back of the form.)	<b>Role/Relationship</b> (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 – Steriod 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) Antideperssants- 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) Antihypertensive Combos
- 53) Antihypertensives – Central
- 54) Antileprotic
- 55) Antimalarial Agents
- 56) Antimycobacterials / Antituberculosis
- 57) Anti-Parkinsonian Drugs
- 58) Antiprotozoal Agents
- 59) Anti-Psoriatics – Biologicals
- 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) BPH
- 82) Calcium Channel Blockers – Amlodipines
- 83) Calcium Channel Blockers – Diltiazems
- 84) Calcium Channel Blockers – Felodipines
- 85) Calcium Channel Blockers – Isradipines
- 86) Calcium Channel Blockers – Nifedipines
- 87) Calcium Channel Blockers – Nisoldipine
- 88) Calcium Channel Blockers – Verapamils
- 89) Carbapenems
- 90) Cardiac Glycosides
- 91) Carnitine Replenisher – Agents
- 92) CCB / Lipid
- 93) Central Precocious Puberty Agents
- 94) Cephalosporins
- 95) Chelating Agents
- 96) Cholesterol – Bile Sequestrants
- 97) Cholesterol – Fibric Acid Derivatives
- 98) Cholesterol – HMG COA + Absorb Inhibitors
- 99) Cholesterol – HMG COA + Absorb Inhibitors: High Potency Drugs/Combinations
- 100) Cholesterol – HMG COA + Absorb Inhibitors: Low Potency Drugs/Combinations
- 101) Cholinergic
- 102) Compounding Agents
- 103) Contraceptives – Bi-Phasic Combinations
- 104) Contraceptives – Emergency Contraceptives
- 105) Contraceptives – Injectable
- 106) Contraceptives – Monophasic Combination O/C's

- 107) Contraceptives – Multi-Phasic Combinations
- 108) Contraceptives – Patches / Vaginal Products
- 109) Contraceptives – Progestin Only
- 110) Contraceptives – Tri-Phasic Combinations
- 111) Cough / Cold – Antitussive – Expectorant
- 112) Cough / Cold – Systemic Decongestants
- 113) Cox 2 Inhibitors – Selective
- 114) Cystic Fibrosis Agents
- 115) Cyto-Megalovirus Agents
- 116) Dental Products
- 117) Diabetic – Alphaglucosidase
- 118) Diabetic – Insulin
- 119) Diabetic – Insulin Penfills
- 120) Diabetic – Meglitinides
- 121) Diabetic – Non-Insulin Injectables
- 122) Diabetic – Oral Biguanides
- 123) Diabetic – Oral Sulfonylureas
- 124) Diabetic – Other
- 125) Diabetic – Sulfonylurea / Biguanide
- 126) Diabetic – Thiazol
- 127) Diabetic – Thiazol / Biguanide Combo
- 128) Diagnostic Biologicals
- 129) Diagnostic Drugs
- 130) Direct Renin Inhibitors
- 131) Diuretics
- 132) Dopamine Receptor Agonists
- 133) Ear
- 134) Electrolytes / Nutritional
- 135) Erythropoiesis Stimulating Agents
- 136) Estrogen Combo's
- 137) Estrogens – Patches
- 138) Estrogens – Tabs
- 139) Fluoroquinolones
- 140) GI – Anti-Flatulents / GI Stimulants
- 141) GI – Antidiarrheal / Antacid – Misc.
- 142) GI – Antiperistaltic Agents
- 143) GI – Digestive Enzymes
- 144) GI – H2-Antagonists
- 145) GI – Inflammatory Bowel Agents
- 146) GI – Irritable Bowel Syndrome Agents
- 147) GI – Misc.
- 148) GI – Misc. Anti-Ulcer
- 149) GI – Prostaglandins
- 150) GI – Proton Pump Inhibitor
- 151) GI – Proton Pump Inhibitor / NSAID Combo
- 152) GI – Ulcer Anti-Infective
- 153) Glucocorticoids – Corticotropin
- 154) Glucocorticoids – Mineralocorticoids
- 155) Gout
- 156) Granulocyte CSF
- 157) Growth Hormone
- 158) Hemostatic
- 159) Hepatitis B Only
- 160) Hepatitis C Agents
- 161) Hereditary Angioedema Agents
- 162) Hereditary Tyrosinemia Type 1 (HT-1) Treatment – Agents
- 163) Herpes Agents
- 164) Hyperparathyroid Treatment – Vitamin D Analogs
- 165) Hyperparathyroid Treatment – Vitamin D Analogs and Calcimimetics

- 166) Immune Serums
- 167) Influenza Agents
- 168) K Removing Resins
- 169) Lincosamides / Oxazolidinones / Leprostatics
- 170) Lithium
- 171) Macrolides / Erythromycin's / Ketolides
- 172) Migraine – Ergotamine Combinations
- 173) Migraine – Ergotamine Derivatives
- 174) Migraine – Selective Serotonin Agonists (5HT) – Injectables
- 175) Migraine – Selective Serotonin Agonists (5HT) – Tabs
- 176) Migraine-Selective Serotonin Agonist-(5HT) Combinations
- 177) Minerals
- 178) Mouth – Anesthetics Topical Oral
- 179) Mouth – Steroids
- 180) Mouth Anti-Infectives
- 181) Mouth Antiseptics
- 182) Mucopolysaccharidosis
- 183) Multiple Sclerosis Agents-Interferons
- 184) Multiple Sclerosis Agents-Non-Interferons
- 185) Muscle Relaxant – Combinations
- 186) Muscle Relaxants
- 187) Narcotic – Antagonists
- 188) Narcotics – Misc.
- 189) Narcotics – Selected
- 190) Narcotics – Long Acting
- 191) Nasal Steroid/Antihistamine Combos
- 192) Nasal Steroids
- 193) Neurologics – Misc.
- 194) Neuromuscular Blocking Agents
- 195) Nicardipines
- 196) Nicotine Replacement Therapy
- 197) Nitro – Ointment / Cap / CR
- 198) Nitro – Patches
- 199) Nitro – Sublingual / Spray
- 200) NSAIDS
- 201) Op. Antiallergics-Antihistamines
- 202) Op. Antiallergics-Mast Cell Stabilizers
- 203) Op. Antibiotics
- 204) Op. Antiinflammatory / Steroids Ophth
- 205) Op. Beta-Blockers
- 206) Op. Carbonic Anhydrase Inhibitors / Combo
- 207) Op. Cycloplegics
- 208) Op. Miotics – Direct Acting
- 209) Op. Misc.
- 210) Op. NSAID's
- 211) Op. Prostaglandins
- 212) Op. Quinolones
- 213) Op. Quinolones-Fourth Generation
- 214) Op. Selective Alpha Adrenergic Agonists
- 215) Osteoporosis
- 216) Oxytocics
- 217) Parkinsons – Anticholinergics
- 218) Parkinsons – COMT Inhibitors
- 219) Parkinsons – Selected Dopamine Agonists
- 220) Peripheral Vasodilators
- 221) Phenylketonuria
- 222) Phosphate Binders
- 223) Phosphodiesterase Inhibitors
- 224) Platelet Aggr. Inhibitors / Combo's – Misc.

- 225) Platelet Aggregation Inhibitors
- 226) Powders
- 227) Pressors
- 228) Progestins
- 229) Psychotherapeutic Combination
- 230) Pulmonary Anti-Hypertensives
- 231) Pulmonary Anti-Hypertensives-Endothelin Receptor Antagonist
- 232) Purine Analog
- 233) Restless Leg Syndrome Agents
- 234) Rheumatoid Arthritis – Biologicals
- 235) Rheumatoid Arthritis – Non-Biologicals
- 236) RSV Prophylaxis
- 237) Sedative / Hypnotics – Barbiturate
- 238) Sedative / Hypnotics – Benzodiazepines
- 239) Sedative / Hypnotics – Non-Benzodiazepines
- 240) Smoking Cessation (Oral)
- 241) Somatostatic Agents
- 242) Stimulants
- 243) Stimulants- Amphetamines- Long Acting
- 244) Stimulants- Amphetamines- Short Acting
- 245) Stimulants- Methylphenidate
- 246) Stimulants- Methylphenidate- Long Acting
- 247) Stimulants- Other Stimulants/ Like Stimulants
- 248) Tetracyclines
- 249) Thrombopoietin Receptor Agonists
- 250) Thyroid Hormones
- 251) Tissue Plasminogen Activator
- 252) Topical – Acne Preparations
- 253) Topical – Antibiotic
- 254) Topical – Antifungals
- 255) Topical – Antineoplastics
- 256) Topical – Antipruritics
- 257) Topical – Antiseborrheics
- 258) Topical – Antiseptics / Disinfectants
- 259) Topical – Antivirals
- 260) Topical – Astringents / Protectants
- 261) Topical – Burn Products
- 262) Topical – Cauterizing Agents
- 263) Topical – Corticosteroids
- 264) Topical – Emollients
- 265) Topical – Enzymes / Keratolytics / Urea
- 266) Topical – Genital Warts
- 267) Topical – Immunomodulators
- 268) Topical – Local Anesthetics
- 269) Topical – Nasal Antibiotics
- 270) Topical – Scabicides and Pediculicides
- 271) Topical – Steroid Combinations
- 272) Topical – Steroid Local Anesthetics
- 273) Topical – Retinoids
- 274) Topical – Wound / Decubitus Care
- 275) Urea Cycle Disorder – Agents
- 276) Urological – Misc.
- 277) Vaginal – Antifungals
- 278) Vaginal – Antibacterials
- 279) Vaginal – Estrogens
- 280) Vaginal – Other
- 281) Vasopressins
- 282) Vitamins
- 283) Vitamins – Misc.

### Attachment 3

#### Preferred Drug List Changes

- 1) Recommend to change Androgel to Non-Preferred to maximize cost savings to the program.
- 2) Recommend to change Testim to Preferred to maximize cost savings to the program.
- 3) Recommend to remove AccuNeb from the PDL since it has been discontinued from the manufacturer.
- 4) Recommend to change albuterol sulfate 0.63mg/3ml to Preferred for members less than 2 years of age to maximize cost savings to the program.
- 5) Recommend to change Ventolin HFA to Non-Preferred to maximize cost savings to the program.
- 6) Recommend to change Pulmicort Flexhaler to Preferred to maximize cost savings to the program.
- 7) Recommend to change Asmanex to Non-Preferred to maximize cost savings to the program.
- 8) Recommend to change fondaparinux to Preferred with Conditions and Arixtra to Non-Preferred with Conditions to maximize cost savings to the program.
- 9) Recommend to change Coumadin 6mg, 7.5mg, & 10mg to Preferred to maximize cost savings to the program (lower strengths currently Preferred).
- 10) Recommend to change Tegretol XR to Preferred to maximize cost savings to the program.
- 11) Recommend to change Emend to Non-Preferred with Conditions to maximize cost savings to the program.
- 12) Recommend to change Clarinex to Non-Preferred with Conditions to maximize cost savings to the program.
- 13) Recommend to change Astelin to Preferred to maximize cost savings to the program.
- 14) Recommend to change Patanase to Preferred to maximize cost savings to the program.
- 15) Recommend to change Parcopa to Non-Preferred to maximize cost savings to the program.
- 16) Recommend to change Dovonex to Non-Preferred to maximize cost savings to the program.
- 17) Recommend to change Tazorac to Preferred with Conditions to maximize cost savings to the program.
- 18) Recommend to change Abilify to Non-Preferred to maximize cost savings to the program.
- 19) Recommend to change Latuda to Preferred to maximize cost savings to the program.
- 20) Recommend to change Vytorin to Preferred to maximize cost savings to the program.
- 21) Recommend to change Levemir to Preferred to maximize cost savings to the program.
- 22) Recommend to change all Humalog prefilled insulin pens to Non-Preferred with Conditions to maximize cost savings to the program.
- 23) Recommend to change Jentadueto to Preferred with Conditions to maximize cost savings to the program.
- 24) Recommend to change Valtorna to Non-Preferred with Conditions to maximize cost savings to the program.
- 25) Recommend to change Ciprodex to Preferred for members less than 8 years of age to maximize cost savings to the program.
- 26) Recommend to change Cubicin to Non-Preferred to maximize cost savings to the program.
- 27) Recommend to change sumatriptan nasal spray to Non-Preferred with Conditions to maximize cost savings to the program (Imitrex remains Preferred).
- 28) Recommend to change Relpax to Preferred with Conditions to maximize cost savings to the program.



- 29) Recommend to change Maxalt and Maxalt-MLT to Non-Preferred with Conditions to maximize cost savings to the program.
- 30) Recommend to change Rebif to Non-Preferred to maximize cost savings to the program (grandfather existing users).
- 31) Recommend to change Betaseron to Non-Preferred to maximize cost savings to the program (grandfather existing users).
- 32) Recommend to change Avinza to Non-Preferred to maximize cost savings to the program.
- 33) Recommend to change Lumigan to Non-Preferred to maximize cost savings to the program.
- 34) Recommend to change Moxeza to Preferred to maximize cost savings to the program.
- 35) Recommend to change Fosrenol to Non-Preferred to maximize cost savings to the program.
- 36) Recommend to change Renvela to Non-Preferred to maximize cost savings to the program.
- 37) Recommend to change Differin 0.3% Gel to Non-Preferred with Conditions to maximize cost savings to the program.
- 38) Recommend to change clobetasol propionate shampoo to Non-Preferred to maximize cost savings to the program.
- 39) Recommend to change Natroba to Preferred with Conditions (requires step through preferred permethrin trial) to maximize cost savings to the program.

## Attachment 4

### Iowa Medicaid Recommended 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) Antihemophilic Agents
- 2) Antineoplastics – Alkylating Agents
- 3) Antineoplastics – Androgen Biosynthesis Inhibitor
- 4) Antineoplastics – Antiadrenals
- 5) Antineoplastics – Antiandrogens
- 6) Antineoplastics – Antibiotics
- 7) Antineoplastics – Antiestrogens
- 8) Antineoplastics – Antimetabolites
- 9) Antineoplastics – Aromatase Inhibitors
- 10) Antineoplastics – Cardiac Protective Agents
- 11) Antineoplastics – Combinations
- 12) Antineoplastics – Estrogen Receptor Antagonist
- 13) Antineoplastics – Estrogens
- 14) Antineoplastics – Folic Acid Antagonists Rescue Agents
- 15) Antineoplastics – Imidazotetrazines
- 16) Antineoplastics – Interleukins
- 17) Antineoplastics – LHRH Analogs
- 18) Antineoplastics – Misc.
- 19) Antineoplastics – Mitotic Inhibitors
- 20) Antineoplastics – Nitrogen Mustards
- 21) Antineoplastics – Nitrosoureas
- 22) Antineoplastics – Progestins
- 23) Antineoplastics – Protein-Tyrosine Kinase Inhibitors
- 24) Antineoplastics – Selective Retinoid X Receptor Agonists
- 25) Antineoplastics – Topoisomerase I Inhibitors
- 26) Antineoplastics – Urinary Tract Protective Agents
- 27) Antiretrovirals
- 28) Antiretroviral Combinations
- 29) Antiretrovirals – Fusion Inhibitors
- 30) Antiretrovirals – Protease Inhibitors
- 31) Antiretrovirals – RTI-Non-Nucleoside Analogues
- 32) Antiretrovirals-RTI-Nucleoside Analogues-Purines
- 33) Antiretrovirals-RTI-Nucleoside Analogues-Pyrimidines
- 34) Antiretrovirals-RTI-Nucleoside Analogues-Thymidines
- 35) Antiretrovirals-RTI-Nucleotide Analogues
- 36) Immunosuppressants

**Attachment 5**  
**Recommended Drug List Changes**

- 1) Recommend to change Norvir Tablets to Non-Recommended with PA required to maximize cost savings to the program (Norvir capsules remain Recommended).

**Attachment 6**  
**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. Neupro- Recommend status on the PDL as Non-Preferred
  
2. Stribild- Recommend status on the PDL as Non-Recommended

**Attachment 7**

**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.

<b>NEWLY RELEASED GENERIC DRUGS</b>		
<b>Drug Name</b>	<b>Brand Name/Status on PDL/RDL</b>	<b>PDL/RDL Recommendation</b>
Pioglitazone	Actos / Preferred	Non-Preferred
Pioglitazone/Metformin	Actoplus Met / Non-Preferred	Non-Preferred
Spinosad	Natroba / Non-Preferred (Recommend to change to Preferred with generic step edit)	Non-Preferred

<b>NEW DRUG DOSAGE FORMS</b>		
Binosto	Alendronate / Preferred	Non-Preferred with Conditions
Rayos	Prednisone / Preferred	Non-Preferred with Conditions

<b>NEW DRUG NAMES / COMBINATIONS</b>		
OmeClamox Pak	Omeprazole / Preferred Amoxicillin / Preferred Clarithromycin / Non-Preferred	Non-Preferred

<b>NEW DRUG STRENGTHS</b>		
Kadian 40mg, 70mg, 130mg, & 150mg	Kadian (various strengths) / Preferred	Non-Preferred
Viokace	Creon / Preferred Zenpep / Preferred	Non-Preferred