

# STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Earl Ray Tomblin Governor Bureau for Medical Services Office of Pharmacy Services 350 Capitol Street - Room 251 Charleston, West Virginia 25301-3706 Phone: (304) 558-1700 - Fax: (304) 558-1542

Michael J. Lewis, M.D., Ph.D. Cabinet Secretary

# **Pharmaceutical and Therapeutics Committee**

**January 25, 2012** 

Location: Diamond, Rooms B10 and B11 Time: 2:00 PM – 5:00 PM Charleston, WV 25301 (304) 558-1700

#### **MINUTES**

#### **Members Present:**

David Avery, M.D.
James D. Bartsch, R.Ph.
Scott Brown, R.Ph.
Teresa Dunsworth, PharmD
Rodney L. Fink, D.O.
Teresa Frazer, M.D., FAAP
Michael Grome, PA-C
Robert Stanton, PharmD

#### **Members Not Present:**

Jeffrey V. Ashley, M.D. Barbara Koster, N.P. Steven R. Matulis, M.D Harriet Nottingham, R.Ph.

#### **DHHR/BMS Staff Present:**

Peggy King, R.Ph., Pharmacy Director Vicki Cunningham, R.Ph., DUR Coordinator Gail Goodnight, R.Ph., Drug Rebate Director William Hopkins, Pharmacy Operations Manager Lynda Ahmad, Secretary

#### Contract Staff/GHS Staff Present:

Chris Andrews, PharmD Jayesh Sheth, M.D.

#### Other Contract Staff/State Staff Present:

Steve Small, R.Ph., M.S., Director, Rational Drug Therapy Program Eric Sears, R.Ph., Molina

#### I. Call to Order

Mr. Scott Brown, Vice-Chairman, called the meeting to order at 2:12PM.

#### II. Welcome and Introductions

All parties seated at the table introduced themselves.

# III. Housekeeping Items/Updates

# A. Housekeeping Items

Ms. Peggy King discussed housekeeping notes.

# B. Introduction of Magellan Medicaid Administration (MMA)

Chris Andrews, PharmD, gave a presentation on MMA's process and role as PDL vendor. Mrs. King discussed the relationship between the State, the SSDC pool, and MMA

# C. Discussion of the September 28, 2011 Minutes

Some Committee members reported that they had not received the minutes for review. Mrs. King stated that they had been posted online and sent via email. Approval of these minutes was pended until the April P&T meeting.

# D. PDL Compliance/Generic Percent Report Updates

Updated figures were not available for this meeting.

#### IV. Public Comments

Ms. King explained the public comment process.

Dino Delaportes, M.D., (United Hospital Center) spoke in favor of Dificid.

Ganpat Thakker, M.D., (Astra Zeneca) spoke in favor of Brilinta.

Craig Plauschinat, (Novartis) spoke in favor of Arcapta.

Mark Veerman (Johnson & Johnson) spoke in favor of Xarelto and Nucynta ER.

# V. Executive Session

The Committee adjourned to Executive Session at 2:46PM. The Committee returned from Executive Session at 3:30PM.

#### VI. Old Business

# A. Ophthalmic Fluoroquinolones and Macrolides for Bacterial Conjunctivitis

Ms. King provided a report to the Committee on Ophthalmic Fluoroquinolones that was provided by a previous vendor. Since that vendor was not present, Ms. King offered to have the report regenerated by MMA. Dr. Teresa Frazer accepted that offer in order to include additional information. The Committee was provided a copy of the Bureau's DUR Capsules newsletter that was dedicated to the treatment of bacterial conjunctivitis.

#### VII. New Business

# A. New class reviews

1. Antibiotics, GI

MMA recommended that the Antibiotics, GI class be added to the PDL with Alinia, metronidazole tablets, Neo-Fradin, neomycin, and Tindamax listed as preferred. The motion was made and seconded. A comment was made that Alinia may not currently be available from the manufacturer. A vote was taken and the motion was approved.

Preferred	Non-preferred
ALINIA (nitazoxanide) NEO-FRADIN (neomycin) neomycin metronidazole tablet TINDAMAX (tinidazole)	DIFICID (fidaxomicin) FLAGYL (metronidazole) FLAGYL ER (metronidazole ER) metronidazole capsule VANCOCIN (vancomycin)
THE WINDER (HINGUZOIC)	XIFAXIN (rifaximin)

# 2. Antibiotics, Inhaled

MMA recommended that the Antibiotics, Inhaled class be added to the PDL with TOBI listed as preferred. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
TOBI (tobramycin)	CAYSTON (aztreonam)

# 3. Colony Stimulating Factors

MMA recommended that the Colony Stimulating Factors class be added to the PDL with Neupogen and Leukine listed as preferred. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
LEUKINE (sargramostim)	NEULASTA (filgrastim)
NEUPOGEN (filgrastim)	

#### B. New drug reviews

#### 1. Arcapta

MMA recommended that Arcapta be made a non-preferred drug in the Bronchodilators & Respiratory Drugs (Inhalers, Long Acting) category. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
FORADIL (formoterol) SEREVENT (salmeterol)	ARCAPTA (indacaterol maleate)

#### 2. Brilinta

MMA recommended that Brilinta be made a non-preferred drug in the Platelet Aggregation Inhibitors category. The motion was made and seconded. Dr.

David Avery and James Bartsch noted the cost of Brilinta as a contributing factor. A vote was taken and the motion was approved.

Preferred	Non-preferred
AGGRENOX (dipyridamole/ASA) cilostazol	BRILINTA (ticagrelor) dipyridamole
PLAVIX (clopidogrel)	EFFIENT (prasugrel) PERSANTINE (dipyridamole)
	PLETAL (cilostazol) TICLID (ticlopidine)
	ticlopidine

# 3. Conzip and Nucynta ER

MMA recommended that Conzip be made a non-preferred drug in the Analgesics, Narcotic – Long-Acting category. It was suggested that Nucynta ER be moved up in the agenda since it is in the same therapeutic category. MMA recommended that Nucynta ER be made a non-preferred drug in the same category. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
fentanyl transdermal	AVINZA (morphine)
KADIAN (morphine) 10mg, 20mg,	BUTRANS (buprenorphine) <sup>CL</sup>
30mg, 50mg, 60mg, 100mg	CONZIP ER (tramadol)
methadone	DOLOPHINE (methadone)
morphine ER tablets	DURAGESIC (fentanyl)
OPANA ER (oxymorphone)	EXALGO ER (hydromorphone)
	EMBEDA (morphine/naltrexone)
	KADIAN (morphine) 80mg,
	200mg
	morphine ER capsules
	MS CONTIN (morphine)
	NUCYNTA ER (tapentadol)
	ORAMORPH SR (morphine)
	oxycodone ER
	OXYCONTIN (oxycodone)
	oxymorphone ER
	RYZOLT ER (tramadol)
	tramadol ER
	ULTRAM ER (tramadol)

#### 4. Lorzone

MMA recommended that Lorzone be made a non-preferred drug in the Muscle Relaxants (Acute Musculoskeletal Relaxant Agents) category. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred Non-preferred
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chlorzoxazone	AMRIX (cyclobenzaprine)
cyclobenzaprine	carisoprodol
methocarbamol	carisoprodol/ASA
	carisoprodol/ASA/codeine
	cyclobenzaprine ER
	FEXMID (cyclobenzaprine)
	FLEXERIL (cyclobenzaprine)
	LORZONE (chlorzoxazone)
	metaxalone
	methocarbamol/ASA
	orphenadrine
	orphenadrine/ASA/caffeine
	PARAFON FORTE DSC
	(chlorzoxazone)
	ROBAXIN (methocarbamol)
	SKELAXIN (metaxalone)
	SOMA (carisoprodol)
	SOMA COMPOUND
	(carisoprodol /ASA)
	SOMA COMP w/ COD
	(carisoprodol/ASA/ codeine)

# 5. <u>Lycelle</u>

MMA recommended that Lycelle be made a non-preferred drug in the Pediculocides/Scabicides (topical) category. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
OVIDE (malathion) permethrin (Rx and OTC)	EURAX (crotamiton) lindane
pyrethrins-piperonyl butoxide	LYCELLE (topical gel)
	malathion 0.5% lotion NATROBA (spinosad)
	ULESFIA 5% LOTION (benzyl alcohol)

# 6. Phoslyra

MMA recommended that Phoslyra be made a preferred drug in the Phosphate Binders category. The motion was made and seconded. A vote was taken and the motion was approved. Dr. Andrews noted that calcium acetate will be moved to preferred status because PhosLo tablets are not currently available.

Preferred	Non-preferred
calcium acetate	ELIPHOS (calcium acetate)
FOSRENOL (lanthanum)	PHOSLYRA (calcium acetate)
RENAGEL (sevelamer)	

RENVELA (sevelamer carbonate)	

# 7. Xarelto

MMA recommended that Xarelto be made a preferred drug in the Anticoagulants (Oral) category with an auto-PA for the atrial fibrillation diagnosis and a clinical PA for the DVT prophylaxis indication that limits treatment to 35 days for hip replacements and 12 days for knee replacements. The motion was made and seconded. Mr. Bartsch mentioned that PEIA, among other formularies, does not place restrictions on Xarelto. A vote was taken and the motion was approved.

Preferred	Non-preferred
PRADAXA (dabigatran) <sup>AP</sup>	
warfarin	
XARELTO (rivaroxaban) AP	

## VIII. Next Meeting

The next P&T meeting is scheduled for April 25, 2012, at 2PM in the Diamond Building, Charleston, WV.

#### IX. Other Business

Mr. Brown asked Dr. Andrews to clarify the MMA review process for products that were not yet available in pharmacies. Dr. Andrews explained that MMA considers products that have appeared in First DataBank to be available and eligible for P&T Committee review.

## X. Adjournment

The meeting was adjourned at 3:54PM.