



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Earl Ray Tomblin  
Governor

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

## Pharmaceutical and Therapeutics Committee

April 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. (phone)  
James D. Bartsch, R.Ph.  
Scott Brown, R.Ph.  
Teresa Dunsworth, Pharm.D. (phone)  
Teresa Frazer, M.D., FAAP  
Michael Grome, PA-C  
Brian J. Loshbough, MS, FNP  
Steven R. Matulis, M.D.  
Robert Stanton, Pharm.D.

**Members Not Present:**

Jeffrey V. Ashley, M.D.  
Rodney L. Fink, D.O.  
Harriet Nottingham, R.Ph.

**DHHR/BMS Staff Present:**

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

**Contract Staff/MMA Staff Present:**

Chris Andrews, Pharm.D.  
Giovannino Perri, M.D.

**Other Contract Staff/State Staff Present:**

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

## **I. Call to Order**

Dr. Steven Matulis, Chairperson, called the meeting to order at 2:07PM.

## **II. Welcome and Introductions**

All parties seated at the table introduced themselves.

## **III. Housekeeping Items/Updates**

### **A. Housekeeping Items**

Mrs. Peggy King introduced Brian Loshbough, a new P&T Committee member.

Approval of January 25, 2012 P&T meeting minutes was tabled until following the executive session.

### **B. PDL Compliance/Generic Percent Report Updates**

Discussion of PDL compliance reports and generic percent reports was tabled until the August P&T meeting.

## **IV. Public Comments**

Mrs. King explained the public comment process.

Rebecca Richmond, Pharm.D. (Charleston Area Medical Center renal transplant pharmacist) spoke in favor of removing the Immunosuppressives class from PDL consideration.

Susan Barlow (Amylin) spoke in favor of Byetta and Bydureon.

Linda Posta (Astellas) spoke in favor of Prograf.

Andrea Wilson (Novo Nordisk) spoke in favor of Victoza.

Monica White (Novartis) spoke in favor of Myfortic and Zortress.

## **V. Executive Session**

Ms. King explained legal ground rules for executive session and that the purpose is to discuss confidential financial information. The Committee adjourned to Executive Session at 2:30PM. The Committee returned from Executive Session at 3:20PM.

## **VI. Old Business**

### **A. Ophthalmic Fluoroquinolones and Macrolides for Bacterial Conjunctivitis**

Chris Andrews, Pharm.D., provided a report to the Committee on Ophthalmic Fluoroquinolones that was a revision of the report submitted by a previous vendor. The Committee noted that there was no significant difference in spend or utilization as a result of the edit put in place for this class.

## **VII. New Business**

### **A. New class reviews**

#### **a. Hypoglycemics, Incretin Mimetics/Enhancers (injectable)**

MMA recommended that the Hypoglycemics, Incretin Mimetics/Enhancers (injectable) class be amended to list Byetta as preferred. The motion was made and seconded. A vote was taken and the motion failed. A second motion was made to make all products nonpreferred. A vote was taken and the motion was approved.

Preferred	Non-preferred
	BYDUREON (exenatide) BYETTA (exenatide) SYMLIN (pramlintide) VICTOZA (liraglutide)

b. Immunosuppressives, Oral

MMA recommended that the Immunosuppressives, Oral class be added to the PDL with azathioprine; cyclosporine; cyclosporine, modified; mycophenolate mofetil; Rapamune; and tacrolimus listed as preferred. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
azathioprine cyclosporine cyclosporine, modified mycophenolate mofetil RAPAMUNE (sirolimus) tacrolimus	AZASAN (azathioprine) CELLCEPT (mycophenolate mofetil) MYFORTIC (mycophenolic acid) NEORAL (cyclosporine, modified) PROGRAF (tacrolimus) SANDIMMUNE (cyclosporine) ZORTRESS (everolimus)

c. Ophthalmics, Antibiotic/Steroid Combinations

MMA recommended that the Ophthalmics, Antibiotic/Steroid Combinations class be added to the PDL with Blephamide, Blephamide S.O.P., Maxitrol ointment, neomycin/polymyxin/ dexamethasone, sulfacetamide/prednisolone, and Tobradex suspension listed as preferred. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
BLEPHAMIDE (prednisolone/sulfacetamide) BLEPHAMIDE S.O.P. (prednisolone/ sulfacetamide) MAXITROL OINTMENT (neomycin/polymyxin/dexamethasone) neomycin/polymyxin/dexamethasone sulfacetamide/prednisolone TOBRADEX SUSPENSION (tobramycin/ dexamethasone)	neomycin/bacitracin/polymyxin/ hydrocortisone neomycin/polymyxin/hydrocortisone POLY-PRED (prednisolone/neomycin/ polymyxin B) PRED-G (prednisolone/gentamicin) TOBRADEX OINTMENT (tobramycin/ dexamethasone) TOBRADEX ST (tobramycin/ dexamethasone) tobramycin/dexamethasone suspension ZYLET (loteprednol/tobramycin)

**B. New drug reviews**

a. Oxecta

MMA recommended that Oxecta be made a non-preferred drug in the Analgesics, Narcotic – Short-Acting category. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
APAP/codeine	ABSTRAL (fentanyl)
ASA/codeine	ACTIQ (fentanyl)
codeine	butalbital/APAP/caffeine/codeine
dihydrocodeine/ APAP/caffeine	butalbital/ASA/caffeine/codeine
hydrocodone/APAP	butorphanol
hydrocodone/ibuprofen	COMBUNOX (oxycodone/ibuprofen)
hydromorphone	DEMEROL (meperidine)
levorphanol	DILAUDID (hydromorphone)
morphine	fentanyl
oxycodone	FENTORA (fentanyl)
oxycodone/APAP	FIORICET W/ CODEINE (butalbital/APAP/caffeine/codeine)
oxycodone/ASA	FIORINAL W/ CODEINE (butalbital/ASA/caffeine/codeine)
pentazocine/APAP	LAZANDA (fentanyl)
pentazocine/naloxone	LORCET (hydrocodone/APAP)
ROXICET (oxycodone/acetaminophen)	LORTAB (hydrocodone/APAP)
tramadol	MAGNACET (oxycodone/APAP)
tramadol/APAP	meperidine
	NUCYNTA (tapentadol)
	OPANA (oxymorphone)
	ONSOLIS (fentanyl)
	oxycodone/ibuprofen
	<b>OXECTA (oxycodone)</b>
	OXYFAST (oxycodone)
	OXYIR (oxycodone)
	PANLOR (dihydrocodeine/ APAP/caffeine)
	PERCOCET (oxycodone/APAP)
	PERCODAN (oxycodone/ASA)
	ROXANOL (morphine)
	RYBIX ODT (tramadol)
	TALACEN (pentazocine/APAP)
	TALWIN NX (pentazocine/naloxone)
	TREZIX (dihydrocodeine/ APAP/caffeine) <sup>NR</sup>
	TYLENOL W/CODEINE (APAP/codeine)
	ULTRACET (tramadol/APAP)
	ULTRAM (tramadol)
	VICODIN (hydrocodone/APAP)
	VICOPROFEN (hydrocodone/ibuprofen)
	VOPAC (codeine/acetaminophen)
	XODOL (hydrocodone/acetaminophen)
	ZAMICET (hydrocodone/APAP)
	ZYDONE (hydrocodone/acetaminophen)
	XOLOX (oxycodone/APAP)

b. Edarbyclor

MMA recommended that Edarbyclor be made a non-preferred drug in the Angiotensin Modulators category. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
AVALIDE (irbesartan/HCTZ)	ATACAND-HCT (candesartan/HCTZ)
BENICAR-HCT (olmesartan/HCTZ)	AZOR (olmesartan/amlodipine)
DIOVAN-HCT (valsartan/HCTZ)	<b>EDARBYCLOR (azilsartan/chlorthalidone)</b>
EXFORGE (valsartan/amlodipine)	HYZAAR (losartan/HCTZ)
EXFORGE HCT (valsartan/amlodipine/HCTZ)	TEVETEN-HCT (eprosartan/HCTZ)
losartan/HCTZ	TRIBENZOR (olmesartan/amlodipine/HCTZ)
MICARDIS-HCT (telmisartan/HCTZ)	TWYNSTA (telmisartan/amlodipine)

c. Onfi

MMA recommended that Onfi be made a non-preferred drug in the Anticonvulsants category. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
carbamazepine	BANZEL(rufinamide)
CARBATROL (carbamazepine)	carbamazepine XR
DEPAKOTE SPRINKLE (divalproex)	DEPAKENE (valproic acid)
divalproex EC	DEPAKOTE (divalproex)
divalproex ER	DEPAKOTE ER (divalproex)
divalproex DR	EQUETRO (carbamazepine)
EPITOL (carbamazepine)	FANATREX SUSPENSION (gabapentin) <sup>NR</sup>
FELBATOL (felbamate)	felbamate
gabapentin	GRALISE (gabapentin)
GABITRIL (tiagabine)	HORIZANT (gabapentin)
levetiracetam	KEPPRA (levetiracetam)
lamotrigine	KEPPRA XR (levetiracetam)
lamotrigine chewable	LAMICTAL (lamotrigine)
LYRICA (pregabalin)	LAMICTAL CHEWABLE (lamotrigine)
oxcarbazepine tablets	LAMICTAL ODT (lamotrigine)
topiramate	LAMICTAL XR (lamotrigine)
TRILEPTAL SUSPENSION (oxcarbazepine)	levetiracetam ER
valproic acid	NEURONTIN (gabapentin)
zonisamide	<b>ONFI (clobazam)</b>
	POTIGA (ezogabine) <sup>NR</sup>
	SABRIL (vigabatrin)
	STAVZOR (valproic acid)
	TEGRETOL (carbamazepine)
	TEGRETOL XR (carbamazepine)
	TOPAMAX (topiramate)
	TRILEPTAL TABLETS (oxcarbazepine)
	VIMPAT (lacosamide)
	ZONEGRAN (zonisamide)

d. Dutoprol

MMA recommended that Dutoprol be made a non-preferred drug in the Beta Blockers category. The motion was made and seconded. A vote was taken and the motion was approved.

Preferred	Non-preferred
<b>BETA BLOCKERS</b>	
acebutolol	BETAPACE (sotalol)
atenolol	BLOCADREN (timolol)
betaxolol	BYSTOLIC (nebivolol)
bisoprolol	CARTROL (carteolol)
metoprolol	CORGARD (nadolol)
metoprolol ER	INDERAL LA (propranolol)
nadolol	INNOPRAN XL (propranolol)
pindolol	KERLONE (betaxolol)
propranolol	LEVATOL (penbutolol)
propranolol ER	LOPRESSOR (metoprolol)
sotalol	SECTRAL (acebutolol)
timolol	TENORMIN (atenolol)
	TOPROL XL (metoprolol)
	ZEBETA (bisoprolol)

<b>BETA BLOCKER/DIURETIC COMBINATION DRUGS</b>	
atenolol/chlorthalidone	CORZIDE (nadolol/bendroflumethiazide)
bisoprolol/HCTZ	<b>DUTOPROL (metoprolol ER/HCTZ ER)</b>
metoprolol/HCTZ	INDERIDE (propranolol/HCTZ)
nadolol/bendroflumethiazide	LOPRESSOR HCT (metoprolol/HCTZ)
propranolol/HCTZ	TENORETIC (atenolol/chlorthalidone)
	ZIAC (bisoprolol/HCTZ)
<b>BETA- AND ALPHA-BLOCKERS</b>	
carvedilol	COREG (carvedilol)
labetalol	COREG CR (carvedilol)
	TRANDATE (labetalol)

e. Janumet XR, Jentadueto

Dr. Matulis suggested that both new products in this class be discussed at the same time. MMA recommended that Janumet XR and Jentadueto be made non-preferred drugs in the Hypoglycemics, Incretin Mimetics/Enhancers (oral) category. The motion was made and seconded. A vote was taken and the motion was approved.

<b>Preferred</b>	<b>Non-preferred</b>
JANUMET (sitagliptin/metformin)	<b>JANUMET XR (sitagliptin/metformin)</b>
JANUVIA (sitagliptin)	<b>JENTADUETO (linagliptin/metformin)</b>
JUVISYNC (sitagliptin/simvastatin)	
KOMBIGLYZE XR (saxagliptin/metformin)	
ONGLYZA (saxagliptin)	
TRADJENTA (linagliptin)	

f. Cosopt PF, Zioptan

Dr. Andrews suggested reviewing these two products at the same time, as done in the previous class. MMA recommended that Cosopt PF and Zioptan be made preferred drugs in the Ophthalmics, Glaucoma category. The motion was made and seconded. A vote was taken and the motion was approved.

<b>Preferred</b>	<b>Non-preferred</b>
<b>COMBINATION AGENTS</b>	
COMBIGAN (brimonidine/timolol)	COSOPT (dorzolamide/timolol)
dorzolamide/timolol	<b>COSOPT PF (dorzolamide/timolol)</b>
<b>BETA BLOCKERS</b>	
betaxolol	BETAGAN (levobunolol)
BETOPTIC S (betaxolol)	BETIMOL (timolol)
carteolol	ISTALOL (timolol)
levobunolol	OPTIPRANOLOL (metipranolol)
metipranolol	TIMOPTIC (timolol)
timolol	
<b>CARBONIC ANHYDRASE INHIBITORS</b>	
AZOPT (brinzolamide)	TRUSOPT (dorzolamide)
dorzolamide	
<b>PARASYMPATHOMIMETICS</b>	

CARBOPTIC (carbachol) ISOPTO CARBACHOL (carbachol) PHOSPHOLINE IODIDE (echothiophate iodide) pilocarpine	ISOPTO CARPINE (pilocarpine) PILOPINE HS (pilocarpine)
<b>PROSTAGLANDIN ANALOGS</b>	
latanoprost LUMIGAN (bimatoprost) TRAVATAN-Z (travoprost)	XALATAN (latanoprost) ZIOPTAN (tafluprost)
<b>SYMPATHOMIMETICS</b>	
ALPHAGAN P (brimonidine) brimonidine 0.2% dipivefrin	brimonidine 0.15% PROPINE (dipivefrin)

**VIII. Next Meeting**

The next P&T meeting is scheduled for August 15, 2012 at 2PM in the Diamond Building, Charleston, WV. Approval of the minutes from the September 2011 P&T meeting will be tabled until the next P&T meeting. Minutes from the January 25, 2012 P&T meeting were approved.

**IX. Other Business**

Scott Brown, R.Ph. addressed the possibility of PDL innovation following years of maintenance. Specifically, a tiered PDL was mentioned. Mr. Brown requested that MMA provide models of what a tiered PDL might look like using appropriate classes. Teresa Frazer, M.D. remarked that such a PDL structure would make the P&T Committee obsolete and give the DUR Committee a greater role. Mrs. King discussed several factors affecting PDL maintenance, including an increase in Medicaid population in 2014, CMS taking a greater share of the federal rebates, and the subsequent effect on supplemental rebates. Mrs. King stated that GHS would be providing SSDC members with a white paper addressing the state of pharmacy under the Affordable Care Act, due in June 2012. As for immediate PDL effects, the August P&T meeting will focus on products likely to receive the “line extension” designation from CMS. In addition, WV may soon move all Medicaid recipients to managed care coverage instead of fee-for-service. Another factor is WV’s position relative to other states in managing pharmacy spend, as shown by an MMA report.

Mr. Brown withdrew his request to review atypical antipsychotics at an upcoming P&T meeting, but this class would meet the discussion points regarding a tiered PDL and should be included in the MMA presentation in August.

Dr. Frazer requested discussion with providers to detail them on preferred products and the availability of generics in order to increase awareness.

**X. Adjournment**

The meeting was adjourned at 4:00PM.