

The Executive Office of Health & Human Services

Pharmacy and Therapeutics Committee Meeting Minutes



Tuesday, June 5th, 2018

8:00 AM

HP Enterprise Services

301 Metro Center Blvd, Room 203

Warwick, Rhode Island 02886

P & T Members Present: Greg Allen, MD
Scott Campbell, RPh
Dave Feeney, RPh, Chairperson
Rita Marcoux RPh, Co-Chairperson
Rick Wagner, MD
Kristina Ward, PharmD

Absent: Matt Salisbury, MD

Others Present: Ann Bennett (DXC Technology)
Jerry Fingerut, MD (Conduent)
Karen Mariano, RPh (DXC Technology)
Kathryn Novak, RPh (Magellan Medicaid Administration)

The meeting was called to order by the Chairperson once a quorum was in attendance - 8:05am.

The April 10th, 2018 meeting minutes were reviewed and by vote were accepted as presented.

Public testimony included the following speakers:

1. Ingrid Ma, Sunovion, Latuda.
2. Amy Tomasello, Sunovion, Utibron & Seabri
3. Christy Skibicki, Indivior, Sublocade
4. Ruth Feder, Mental Health Association of Rhode Island
5. Brian Calamari, AbbVie Mavyret (*defers unless there are questions*)
6. Tim Birner, Alkermes, Vivitrol and Aristada
7. Nicole DeVito, American Lung Association of Rhode Island
8. Jane Guo, Otsuka, Rexulti

Magellan Medicaid Administration presented the following categories for the quarterly review:

- a. Respiratory, Oral
 1. Anti-allergens. Motion made to accept the recommendations; unanimously approved.
 2. Antibiotics, Inhaled. No changes to the current agents. Discussion; see some patients who cycle between products which impacts utilization. Overall utilization is small. Motion made to accept the recommendations; unanimously approved.
 3. Anti-histamines, Minimally Sedating. No changes recommended. Motion made to accept the recommendations; unanimously approved.
 4. Bronchodilators
 - i. Beta-Agonist. Recommendations with changes to products; including additions albuterol nebulizer 0.63 and 1.25mg and deletion of Foradil as product is not available in the market. Motion made to accept the recommendations; unanimously approved.
 - ii. COPD Agents – new agent in class, Lonhala Magnair and new formulary of Daliresp 250mg tablet; recommend addition of Bevespi and Combivent Respimat. Questions: any PDL limited dose forms? Yes. Motion made to accept the recommendations; unanimously approved.
 5. Epinephrine, Self-Injected. Supply/availability; FDA website Adrenaclick not available and no release date at this time. Generic epinephrine available, but “heard” of shipping issues in parts of the country, but not on the east coast. Continue to recommend epinephrine 0.15 and 0.3mg, authorized generic which is available. What happens if there is a shortage is there an automatic change in the system to ok the other products? No. Magellan contacts DXC for discussion and PDL changes can be made as necessary. The PDL is reviewed weekly. Motion made to accept the recommendations; unanimously approved.
 6. Glucocorticoids

- i. Inhaled – new formulation Qvar. Discussion; question/concern regarding removing of Qvar, what happens? In other states experience is that the prescribers shift to the PDL agent as they are looking for a corticosteroid. Recommend follow up with the DUR. Motion made to accept the recommendations; unanimously approved
 - ii. Oral – Motion made to accept the recommendations; unanimously approved with one abstention.
 - 7. Intranasal Rhinitis Agents. Recommend removal of Patanase which has no utilization. Motion made to accept the recommendations; unanimously approved.
 - 8. Leukotriene Modifiers. Recommend remove Zafirlukast oral as increased in cost; no utilization. Motion made to accept the recommendations; unanimously approved.
- b. CNS Agents
 - 1. Anti-migraine Agents. Two new generics in the category. Discussion; What about other products treating migraines? Brand new agent Amovig will be grouped as non-preferred; same as Cambia. Motion made to accept the recommendations; unanimously approved.
 - 2. Atypical Antipsychotics. New formulation, Aristada. New indications Latuda and Abilify Maintena. No changes to the recommendation as the PDL has many different products and dose forms available. Compliance is 95.6%. Motion made to open the class. Discussion on the motion. Committee member reached out to prescriber community; indicated no complaints with the access to medications. Results; in favor; 1 yes and 5 no. Motion made to accept the recommendations; the motion passes; 5 yes and 1 no.
 - 3. Opiate Dependence Treatments. New formulation, Sublocade; updated indications: Bunavail, Suboxone and Zubsolv. Both Sublocade and Vivitrol are administered by a physician; prescriber community is well aware of the process to prescribe, access, order the product. Some prescribers unwillingly to stock these based on their costs. Beginning to see the trickle over to pharmacy claims of these two items. Utilization presented today is pharmacy only, remember most of these would be billed on the medical side at a prescriber's office. Discussion: have any states required that these agents be on the medical side? Overlap of billing? Challenge because medical billing is not as sophisticated as the POS real time processing and cannot pick up the duplicative. What about payment rates? Difference POS and medical? Motion made to accept the recommendations; unanimously approved.
 - 4. Sedative Hypnotics. Given most prescribed agent is zolpidem, recommend DUR follow up on utilization. Motion made to accept the recommendations; unanimously approved.
 - 5. Skeletal Muscle Relaxants. Recommendations to add tizanidine tablets. Motion made to accept the recommendations; unanimously approved.
- c. Anti-infective Agents
 - 1. Antibiotics
 - i. GI – new product Solosec; new guidelines by IDSA and SHEA for clostridium difficile. Motion made and discussion on the motion about metronidazole for c. diff., however current guidelines do not exclude this agent for c. diff. Discussion to amend the PDL to add vancomycin capsules. Motion made to accept the recommendations with the addition of vancomycin capsules; the revised motion is unanimously approved.
 - ii. Topical. Motion made to accept the recommendations; unanimously approved.
 - iii. Vaginal. Motion made to accept the recommendations; unanimously approved.
 - iv. Cephalosporins. Motion made to accept the recommendations; unanimously approved.
 - v. Quinolones, Oral. Motion made to accept the recommendations; unanimously approved.
 - vi. Macrolides/Ketolides. Recommend BRAND EES to be preferred and eliminate the clarithromycin ER. Motion made to accept the recommendations; unanimously approved.
 - vii. Tetracyclines. Motion made to accept the recommendations; unanimously approved
 - 2. Antifungal agents. A new indication for Louzoo which has expanded coverage to pediatrics. Recommend two deletions of combination products because the individual agents are preferred. Motion made to accept the recommendations; unanimously approved.
 - i. Oral. Motion made to accept the recommendations; unanimously approved.
 - ii. Topical. Motion made to accept the recommendations; unanimously approved.
 - 3. Antiviral Agents
 - i. Oral
 - a. HSV. Motion made to accept the recommendations; unanimously approved.
 - b. Influenza. Motion made to accept the recommendations; unanimously approved.
 - c. Hepatitis C. AbbView news; Viekira and Technivie announced removal from market. Motion made to accept the recommendations; unanimously approved.
 - ii. Topical. Motion made to accept the recommendations; unanimously approved.

- d. GI Motility. Trulance updated indication for IBS-C. No changes to the recommendations. Motion made to accept the recommendations; unanimously approved.
- e. Methotrexate Agents. No changes to the recommendations. Motion made to accept the recommendations; unanimously approved.
- f. Ulcerative Colitis Agents. No changes to the recommendations. Motion made to accept the recommendations; unanimously approved.

DUR – Follow up items:

- 1. Follow up regarding the QVAR and shift.
- 2. Triazolam – consider making it available or have more stringent PA.

2018 Meeting Schedule – 8:00 am

September 11th

December 11th

Adjournment

The meeting adjourned at 9:59 AM