**Iowa Medicaid Pharmaceutical and Therapeutics Committee**
**Minutes**

**Date:** November 21, 2019

**Chairperson:** Mark Graber, M.D.

**Time:** 9:31 a.m. to 1:16 p.m.

**Location:** Capitol Room 116, Des Moines, Iowa

**Committee Members Present:** Mark Graber, M.D.; Charles Wadle, D.O.; Carole Frier, D.O.; Jolene Kelly, PA-C; Heidi Price-Eastman, R.Ph.; Kevin de Regnier, D.O.; Holly Randleman, Pharm.D.; Bruce Alexander, Pharm.D.; and Kellen Ludvigson, Pharm.D.

**Iowa DHS Staff Present:** Susan Parker, Pharm.D., Pharmacy Consultant

**Iowa Medicaid Enterprise (IME) Staff Present:** Steve Liles, Pharm.D.; Jeffrey Barkin, M.D.; Erin Halverson, R.Ph.; Gina Kuebler, R.Ph.; and Melissa Biddle.

**Managed Care Organization (MCO) Staff Present:** Sandy Pranger, Amerigroup Iowa; and Emily Rogers, Iowa Total Care.

Chairperson Mark Graber called the meeting to order.

I. Mark Graber asked that each committee, DHS, and IME staff member introduce themselves to the public. The August 15, 2019, open session minutes were reviewed. Bruce Alexander made the motion to approve the minutes, and Heidi Price-Eastman seconded. The motion passed with no objections. Kevin de Regnier disclosed a conflict of interest, stating that he was on the speaker's bureau for Novo Nordisk.

II. PDL and Drug Rebate Issues (Dr. Liles): This is the annual PDL review, reviewing the full PDL for any changes to be effective January 2020. There were no drug rebate issues to report.

III. PA Criteria/Pro-DUR Edits (Dr. Parker): Informational Letter 2042-MC-FFS listed changes to the Preferred Drug List (PDL) and new ProDUR quantity limits, as well as new prior authorization (PA) criteria for cannabidiol (Epidiolex), along with changes to the PA criteria for: Benzodiazepines, Dupixent, Growth Hormone, and Lupron Depot - Adult. Informational Letter 2048-MC-FFS notified providers that the IME has added a new provider type for pharmacists, specifically an authorized pharmacist as defined in Iowa Administrative Code (IAC) 657 – Chapter 39. The addition of provider type 82 allows pharmacists to enroll as a Medicaid provider effective July 1, 2020. Enrollment will permit a pharmacist, pursuant to Statewide Protocols, to order and dispense naloxone and nicotine replacement therapy tobacco cessation products, as well as to order and administer vaccines to Medicaid members. The pharmacist must meet all required training, continuing education and certification requirements pursuant to these protocols and as defined in IAC 657 – Chapter 39. The committee also received copies of the letter sent to the Department of Human Services from the DUR Commission after their November meeting, which included ProDUR quantity limit

recommendations for gabapentin, as well as recommended criteria for: Multiple Sclerosis Agents – Oral, Osphena, Abilify MyCite, and CGRP Inhibitors.

IV. Legislation (Dr. Parker): House File 623 removed prior authorization requirements for one form of each covered Medication Assisted Treatment (MAT) drug listed in the legislation; DHS has submitted rules to implement this, to be effective February 1, 2020. The notice for the rule changes will be released on November 20, 2019, and will be sent to the P&T Committee members once available.

V. IME Updates: Erin Halverson provided a reminder of the public speaker process, which is available on www.iowamedicaidpdl.com on the Public Comments page. (Note that the committee did vote to amend this process at the end of this meeting, requiring that speakers sign-up in advance and provide any applicable reference documentation, at least a week prior to the meeting). Susan Parker added that all meeting information was posted on the website, as well, and that the IME staff should not be contacted directly or through the info@iowamedicaidpdl.com address unless posted materials could not be found on the site.

VI. Public Comment: The public speakers were:

| Name | Representing | Drug/Topic |
|---|---|---|
| Emily Beckett | Broadlawns | Spiriva Respimat and Stiolto Respimat |
| Susie Moroney | Novartis | Piqray |
| Alexander Kantorovich | United Therapeutics | Orenitram |
| Phillip Jennings | Allergan | Vraylar |
| Jomy Joseph | Sanofi Genzyme | Eloctate and Alprolix |
| Kyle Gunter | Paratek | Nuzyra |
| Michael Shepherd | Eli Lilly | Baqsimi |
| Maggie Murphy | Teva | Ajovy and Austedo |
| Joseph Cirrincione | Otsuka | Abilify Maintena |
| Jayson Gesulga | Otsuka | Abilify Maintena |
| Katie Shin | Verastem Oncology | Copiktra |
| Steven Penm | Dova | Doptelet |
| Erin Hohman | Janssen | Invokana |
| Michael Nelson | Sunovion | Latuda |
| Christopher Holtzer | Abbvie | Rinvoq |
| Ginelle Bryant | Drake University and UnityPoint | Spiriva Respimat and Stiolto Respimat |
| Kevin Duhrkopf | Sanofi Genzyme | Dupixent |
| Ryan Flugge | Novo Nordisk | Tresiba |
| Jim Baumann | Pfizer | Eucrisa |
| Anna Loh | Veloxis | Envarsus XR |
| Peggy Huppert | NAMI Iowa | Antipsychotic medications |

At 11:35, motion to go to closed session was made by Kellen Ludvigson and seconded by both Chuck Wadle and Carole Frier. The motion passed with unanimous approval. Open session resumed at 12:40.

VII. PDL Discussion and Deliberation (Dr. Barkin, Voting Block 1): All subsequent recommendations were made to maximize cost savings to the program unless otherwise noted. Recommended changes are as follows: Danazol to Preferred, Methitest to Non-Preferred with

Conditions, fluticasone and salmeterol to Preferred, Combivent Respimat and Stiolto Respimat to Preferred, Utibron Neohaler to Preferred, Xarelto 2.5mg tablets to Preferred, Fycompa to Preferred, topiramate sprinkle capsules to Preferred, Kogenate FS to Preferred, Nuwiq to Preferred, Afstyla to Preferred, cyproheptadine to Preferred, Praluent to Non-Preferred with Conditions, Zyprexa Relprevv to Non-Preferred Step 3, Abilify Maintena to Non-Preferred Step 3 (grandfathering existing users), Vesicare to Non-Preferred, solifenacin to Preferred, Fiasp vials to Non-Preferred, Humalog vials to Non-Preferred, insulin lispro to Preferred, Tresiba vials to Non-Preferred, Humulin R vials to Non-Preferred, Humulin N vials to Non-Preferred, Humulin 70/30 vials to Non-Preferred, Humulin R U-500 to Preferred, Fiasp FlexTouch to Non-Preferred with Conditions, insulin lispro KwikPen to Preferred, Tresiba FlexTouch to Non-Preferred with Conditions, and Humulin R U-500 KwikPen to Preferred. Carole Frier motioned to accept the recommendations above, and Bruce Alexander seconded. Kevin de Regnier abstained for all the diabetic medications (agenda items #18 Fiasp vials through #29 Humulin R U-500 KwikPen) due to his conflict of interest stated above. All others were in favor of all changes, and the motion passed.

VIII. PDL Discussion and Deliberation (Dr. Barkin, Voting Block 2): All subsequent recommendations were made to maximize cost savings to the program unless otherwise noted. Recommended changes are as follows: Xigduo XR to Non-Preferred with Conditions, Synjardy XR to Non-Preferred with Conditions, Epogen to Preferred with Conditions, Procrit to Non-Preferred with Conditions, Linzess 145mcg and 290mcg to Preferred with Conditions, Viberzi to Non-Preferred with Conditions, Neupogen syringes to Preferred with Conditions, Granix to Non-Preferred with Conditions, Firazyr to Non-Preferred with Conditions, Takhzyro to Preferred with prior authorization for diagnosis confirmation, Ampyra to Non-Preferred with Conditions, dalfampridine er to Preferred with Conditions, meperidine tablets to Non-Preferred with Conditions (as use is not recommended in guidelines), buprenorphine tablets to Preferred with Conditions (due to a legislative requirement), Ingrezza to Preferred with Conditions, naproxen oral suspension to Non-Preferred with Conditions, Pennsaid to Non-Preferred with Conditions, Apokyn to Non-Preferred, sevelamer carbonate tablets to Preferred, Renagel to Non-Preferred, tadalafil to Preferred with Conditions, Letairis to Non-Preferred with Conditions, ambrisentan to Preferred with Conditions, dextroamphetamine sulfate ER to Preferred with Conditions, dextroamphetamine sulfate tablets to Preferred with Conditions, methylphenidate oral solution to Preferred with Conditions, dexmethylphenidate er to Preferred with Conditions, Focalin XR to Non-Preferred with Conditions, and Daytrana to Non-Preferred with Conditions (grandfathering existing users). Kevin de Regnier motioned to accept the recommendations above, and Holly Randleman seconded. The decision was unanimous.

IX. PDL Discussion and Deliberation (Dr. Barkin, Voting Block 3): All subsequent recommendations were made to maximize cost savings to the program unless otherwise noted. Recommended changes are as follows: Concerta to Non-Preferred with Conditions, authorized generic (labeler 10147) methylphenidate ER tablets osmotic (generic Concerta) to Preferred with Conditions, Aptensio XR to Non-Preferred with Conditions, Elidel to Non-Preferred with Conditions, authorized generic (labeler 68682) pimecrolimus cream to Preferred with Conditions, lidocaine 5% topical patch to Preferred with Conditions, and Sklice to Non-Preferred (due to availability issues). Kellen Ludvigson motioned to accept the recommendations above, and Heidi Price-Eastman seconded. All members were in favor.

X. PDL Discussion and Deliberation (Dr. Barkin, Voting Block 4): The drugs listed below are recommended to be removed from coverage under the pharmacy benefit, as they are intended to be administered in a healthcare/office setting (coverage and billing is available through the medical benefit): Hectorol, Cytogam, Hepagam B, Bivigam, Carimune Nanofiltered, Flebogamma, Gammagard S/D, Gammaplex, Octagam, Privigen, Fentanyl injection solution, Hydromorphone injection solution, Nalbuphine injection solution, and Ephedrine Sulfate. Kevin de Regnier motioned to accept the recommendations above, and Jolene Kelly seconded. The decision was unanimous.

XI. PDL Discussion and Deliberation (Erin Halverson): The subcutaneous immunoglobulin products (Hizentra, Cuvitru, Cutaquig, and Hyqvia) were reviewed with no recommended changes, however Carole Frier requested additional information regarding administration of the products.

XII. RDL Discussion and Deliberation (Dr. Barkin): All subsequent recommendations were made to maximize cost savings to the program unless otherwise noted. Recommended changes are as follows: Kaletra to Non-Recommended (due to guidelines not recommending use), Delstrigo to Preferred, Complera to Preferred, Norvir tablets to Non-Preferred, ritonavir tablets to Preferred, Sustiva to Non-Preferred, efavirenz to Preferred, and zidovudine to Non-Recommended (due to guidelines not recommending use). Jolene Kelly motioned to accept the recommendations above, and Holley Randleman. The decision was unanimous. Additionally, Herceptin Hylecta is recommended to be removed from coverage under the pharmacy benefit, as it is intended to be administered in a healthcare/office setting (coverage and billing is available through the medical benefit). Kevin de Regnier motioned to accept the recommended removal of coverage, and Bruce Alexander seconded. All members were in favor.

XIII. Newly Released Drugs (Dr. Barkin): All following recommendations were made to maximize cost savings to the program unless otherwise noted. Dr. Barkin reviewed the new drugs, and the first set of recommendations were as follows: Diacomit, Non-Preferred; Inrebic, Non-Recommended with Conditions; Nubeqa, Non-Recommended with Conditions; Nuzyra, Non-Preferred; Oxervate, Non-Preferred; and Piqray, Non-Recommended with Conditions. Carole Frier motioned to accept the recommendations above, and Kellen Ludvigson seconded. The decision was unanimous. The following were also recommended: Rinvoq, Non-Preferred with Conditions; Rozlytrek, Non-Recommended with Conditions; Sunosi, Non-Preferred with Conditions; Turalio, Non-Recommended with Conditions, and Xpovio, Non-Recommended with Conditions. Heidi Price-Eastman motioned to accept the second set of recommendations, and Carole Frier seconded. All members were in favor.

XIV. Newly Released Generic Drugs/New Drug Dosage Forms/Strengths/Combinations/Biosimilars (Dr. Barkin): All following recommendations were made to maximize cost savings to the program unless otherwise noted. The following were all recommended to be Non-Preferred: doxylamine/pyridoxine, Katerzia, Nayzilam, Ruzurgi, Slynd, Symjepi, and Vyndamax. The following were all recommended to be Non-Preferred with Conditions: clocortolone, febuxostat, halcinonide, ramelteon, sildenafil oral suspension, Adhansia XR, Baqsimi, Ezallor Sprinkle Cap, Jornay PM, Nucala Auto-Injector and Prefilled Syringe, and Tosymra. Pregabalin and Retacrit were recommended to be Preferred with Conditions, while Icatibant will be Preferred with prior authorization for diagnosis confirmation. Kevin de Regnier motioned to accept the

recommendations above, and Bruce Alexander seconded. The motion passed with no members opposed or abstaining.

XV. Additional business: Bruce Alexander motioned to limit future public comment to three minutes per speaker/manufacturer rather than five, and Carole Frier seconded. However, the motion did not pass. Four members (Bruce Alexander, Holly Randleman, Kevin de Regnier, and Carole Frier) voted for it, but five (Mark Graber, Charles Wadle, Jolene Kelly, Heidi Price-Eastman, and Kellen Ludvigson) were opposed. Kellen Ludvigson then motioned that public speakers be required to sign up in advance of the meetings and provide any materials they intend to reference, at least one week prior. Carole seconded, and all members approved this change unanimously.

A motion was made by Heidi Price-Eastman to adjourn the meeting. It was seconded by Jolene Kelly, and all in attendance approved. The meeting adjourned at 1:16 p.m. The next scheduled meeting is tentatively set for April 16, 2020.