Iowa Medicaid Pharmaceutical and Therapeutics Committee
Minutes

Date: November 20, 2025

Chairperson: Jason Kruse

Time: 9:32 a.m. to 12:45 p.m.

Location: Lucas State Office Building, Assembly Room LG20-B, 321 E 12th Street, Des Moines, IA

Committee Members Present: Jason Kruse, D.O.; Lacey Ferguson, Pharm.D.; Rachel Kinn, Pharm.D.; Tricia McComb, R.N. (virtual via Teams); Jennifer Doudna, Pharm.D., R.Ph. (virtual via Teams); Dawn Schissel, M.D.; and Fadi Yacoub, M.D. (Vacancies July 2023: 1 Physician Assistant)

Committee Members Absent: Charles Wadle, D.O.

Iowa DHHS Staff Present: Abby Cate, Pharm.D., Pharmacy Consultant; Michael Line, M.D., Chief Medical Officer; and Darian Forcier, Pharmacy Administrative Support.

Iowa Medicaid Staff Present: Roberta Capp, M.D., MHS; Paige Clayton, Pharm.D.; Gina Kuebler, R.Ph.; Pam Smith, R.Ph. (virtual via Teams); and Melissa Biddle.

Managed Care Organization (MCO) Staff Present: Jordan Thoman, Wellpoint Iowa; Emily Rogers, Iowa Total Care; and Candace Jordan, Molina Healthcare of Iowa.

Jason Kruse called the meeting to order.

I. Jason Kruse asked that each committee member introduce themselves to the public. Fadi Yacoub made the motion to approve the August minutes, and Dawn Schissel seconded. The motion passed with no objections. There were no new verbal conflict of interest disclosures. Forms were provided to the committee members so they could complete their annual disclosures.

II. PDL Revision Notifications (Gina Kuebler): Providers have received four notices since the last committee meeting, including notice of manufacturer terminations from the Medicaid Drug Rebate Program and their associated labeler codes. As a result of one of these terminations, effective 10/1/25 the following products became preferred on the Iowa Medicaid Preferred Drug List (PDL): fluorouracil topical cream, mesalamine er capsules, tretinoin topical cream, and tretinoin topical gel. Additionally, effective 10/3/25 sacubitril/valsartan became preferred, with Entresto to remain Co-Preferred. Another notice detailed coverage of opioid reversal agents, and the medications available through the Iowa Medicaid Preferred Drug List with no requirement for prior authorization (PA).

III. Drug Rebate Issues (Dr. Clayton): On November 6th the federal government gave a little bit of guidance for the pending Most Favored Nation Policy. TrumpRx really has nothing to do with Medicaid, though the notification letter says at the end that Medicaid will also benefit. CMS issued an official comment on the Most Favored Nation policy, called the Generous Model, which

is for Medicaid specifically. There has been a request for voluntary applications, both for the states and the manufacturers. What has been provided officially in writing is a 24-page request for application for pharma to participate, which lets you know exactly what the government is asking of these manufactures, and it has been amended once already. The administration would like manufacturers to come to the plate, with their entire drug portfolio included, and offer the second lowest international unit price within the countries that are in the Geneva 7 plus Denmark and Switzerland, i.e. countries seemingly like us in economic stature. The second lowest price calculation takes into account the currency exchange rate and the Gross Domestic Product (GDP). Manufacturers do also have the opportunity to cherry-pick potential offers if they decide not to include entire portfolios. The administration would also like these pricing changes to be effective January 1, 2026, which can't reasonably happen in six weeks, though they've also added a caveat for retroactivity. The SSDC pool can still be utilized, as well. It is concerning that CMS in their negotiations for pricing is asking manufacturers to conform to their suggested clinical criteria, which could present additional unforeseen issues with the process.

IV. PA Criteria/Pro-DUR Edits (Dr. Cate): Committee members were provided a copy of the October 2025 Iowa Medicaid Pharmacy Program Changes notice detailing PDL, prior authorization, and ProDUR edit changes effective October 1, 2025, posted on the www.iowamedicaidpdl.com site on the Informational Letters page. Informational Letter 2710 notifying providers of the Pharmacy 90-day supply requirement, now mandatory effective December 1, 2025, was posted to the HHS Informational Letters page on November 14th, and the list of associated medications can be found on the PDL site above on the Preferred Drug Lists page. The committee also received copies of the letter sent from the DUR Commission to DHHS following their meeting on November 7th, which had recommended changes to the prior authorization criteria for: Brensocatib (Brinsupri); Diazoxide Choline (Vykat XR); Incretin Mimetics for Non-Diabetes Indications; Janus Kinase (JAK) Inhibitors; Pegcetacoplan (Empaveli); Sepiapterin (Sephience); and Select Topical Agents. Additionally, the Commission discussed removal of PA criteria for Hepatitis C Treatments, Direct Acting Antivirals (DAAs), along with the implementation of ProDUR edits for preferred DAAs. These edits include quantity limits, treatment duration, and a lookback to identify treatment experienced patients. All of the DUR recommendations were approved by DHHS and will go into effect January 1, 2026.

V. Legislation (Dr. Cate): There were no updates.

VI. Iowa Medicaid Updates (Dr. Cate): Michael Line, M.D., the new Iowa Medicaid Chief Medical Officer, introduced himself and provided background information on his career focused on pediatrics, including years as a hospitalist at Blank Children's Hospital and Chief Medical Officer in Jefferson, IA, and his move to healthcare administration around 2015, with the goal of helping patients with access to care. There is also a new HHS Director, Larry Johnson, who was previously the Director of the Iowa Department of Inspections, Appeals, and Licensing (DIAL) for more than six years, and has been in state government for more than 15 years.

VII. Public Comment: In addition to the written public comments provided to committee members, they heard oral public comments from the speakers shown below. They were also forwarded manufacturer comments as they were received via email prior to the meeting.

Name	Organization / Manufacturer	Product
Carla McSpadden	Galderma	Nemluvio
Lynda Finch	Biogen	Zurzuvae
Olawemimo Odebiyi	Teva Pharmaceuticals	Ajovy, Austedo XR, Uzedy
Asma Sikder	Axsome Therapeutics	Symbravo Auvelity
Brent Milovac	Leo Pharma	Anzupgo
Reanna Yenger	Johnson & Johnson Innovative Medicine	Caplyta
Mae Kwong	Soleno Therapeutics	Vykat XR
Michael Pazirandeh	Gilead	Yeztugo
Dorothea Lantz	PWSA USA	Vykat XR
Chantal Rozmus	Abbe Community Mental Health	Caplyta
Brock Bizzell	United Therapeutics	Tyvaso
Christine Dube	Astrazeneca	Breztri
Ryan Miller	PTC Therapeutics	Sephience
Shawn Hansen	Novo Nordisk	Rybelsus

Member Comments Received: None

Written Provider Comments Received: Caplyta

Written Manufacturer Comments Received: Zoryve, Wakix, Airsupra, Fasenra, Lokelma, Endari

At 10:47, Rachel Kinn motioned to go to closed session as authorized by Iowa Code Section 21.5(1)(a) of the Open Meetings Law to review or discuss economic records associated with the PDL which are required or authorized to be kept confidential. Fadi Yacoub seconded, and the motion passed with unanimous roll call approval. Open session resumed at 12:08.

VIII. PDL Discussion and Deliberation (Gina Kuebler): All subsequent recommendations (with numbering as provided on agenda attachment 3) were made to maximize cost savings to the program unless otherwise noted.

1. Airsupra to Preferred
2. Breo Ellipta to Preferred
3. Trelegy Ellipta to Preferred
4. Dabigatran capsules to Preferred
5. Pradaxa capsules to Non-Preferred
6. Emend to Non-Preferred with Conditions
7. Diclegis to Non-Preferred
8. Doxylamine/pyridoxine to Preferred
9. Trimethobenzamide to Non-Preferred
10. Nucala prefilled syringe to Preferred with Conditions
11. Amjevita 40mg/0.4mL and 80mg/0.8mL to Non-Preferred with Conditions
12. Vtama to Preferred with Conditions
13. Rykindo to Non-Preferred Step 3
14. Caplyta to Preferred Step 2

15. Entresto tablets to Non-Preferred
16. Janumet XR to Non-Preferred with Conditions
17. Jentadueto XR to Preferred
18. Rybelsus to Preferred with Conditions
19. Exenatide to Preferred with Conditions
20. Wegovy to Preferred with Conditions
21. Pirfenidone to Preferred with Conditions
22. Nevanac to Non-Preferred
23. Ticagrelor to Preferred
24. Brilinta to Non-Preferred
25. Jornay PM to Preferred with Conditions
26. Spinosad topical suspension to Preferred

Dawn Schissel motioned to accept the recommendations above, and Fadi Yacoub seconded. The decision was unanimous.

IX. Newly Released Drugs (Dr. Capp and Gina Kuebler): All following recommendations (with numbering as provided on agenda attachment 4) were made to maximize cost savings to the program unless otherwise noted. Dr. Capp reviewed the clinical information for the new drugs, and then Gina Kuebler read through the recommendations as follows:

1. Andembry – Recommend status on the PDL as Non-Preferred
2. Anzupgo- Recommend status on the PDL as Non-Preferred with Conditions (JAK Inhibitors)
3. Brinsupri- Recommend status on the PDL as Preferred with Conditions
4. Harliku- Recommend status on the PDL as Non-Preferred
5. Hernexeos- Recommend status on the RDL as Non-Recommended with Conditions (Select Oncology Agents)
6. Modeyso- Recommend status on the RDL as Non-Recommended with Conditions (Select Oncology Agents)
7. Sephience- Recommend status on the as Non-Preferred with Conditions
8. Tryptyr- Recommend status on the PDL as Non-Preferred
9. Vykat XR- Recommend status on the PDL as Non-Preferred with Conditions
10. Wakix - Recommend status on the PDL as Non-Preferred with Conditions (CNS Stimulants)
11. Yeztugo Tablets – Recommend status on the RDL as Non-Recommended
12. Zelsuvmi- Recommend status on the PDL as Non-Preferred
13. Zunveyl- Recommend status on the PDL as Non-Preferred

Fadi Yacoub motioned to accept the recommendations above. Dawn Schissel seconded, and the decision was unanimous.

X. Newly Released Generic Drugs and New Drug Dosage Forms/Strengths/ Combinations/BioSimilars (Gina Kuebler): All following recommendations were made to maximize cost savings to the program unless otherwise noted.

Drug Name	PDL/RDL Recommendation
Bosentan Soluble Tab	Non-Preferred with Conditions
Fidaxomicin	Non-Preferred
Fluticasone Furoate	Non-Preferred
Pilocarpine 1.25% Ophth Solution	Non-Preferred with Conditions
Sacubitril-Valsartan	Preferred
Topiramate Oral Solution	Non-Preferred with Conditions

Drug Name	PDL/RDL Recommendation
Brynovin Oral Solution	Non-Preferred with Conditions
Hydrocodone/Apap Oral Solution 10-300 MG	Non-Preferred with Conditions
Imuldosa	Non-Preferred with Conditions
Kirsty Vial & Pen	Non-Preferred
Merilog	Non-Preferred
Merilog SoloStar	Non-Preferred
Pruradik Lotion	Non-Preferred

Dawn Schissel motioned to accept the recommendations in both tables above. Fadi Yacoub seconded, and all members were in favor.

XI. High Cost Drugs Review Staff Presentation: Dr. Capp presented a PowerPoint outlining the national Medicaid overview of high-cost utilization products, which evaluated top drugs by total amount reimbursed across the U.S., as well as top drugs by total amount reimbursed by therapeutic class. In 2024, the top 5 classes nationally were: Incretin Mimetic Agents, Antiretrovirals, Anti-Psoriatics, Anti-TNF alpha Monoclonal Antibodies, and Sympathomimetics. Ozempic, Biktarvy, Dupixent, Invega, and Humira topped the total amount reimbursed by drug chart.

XII. Preview of the next meeting: Jason Kruse requested a review of the recently released atopic dermatitis guideline update and how it fits into the PDL.

A motion was made by Dawn Schissel to adjourn the meeting. It was seconded by Lacey Ferguson, and all in attendance approved. The meeting adjourned at 12:45 p.m. The next scheduled meeting is set for April 16, 2026.