

## Pharmaceutical and Therapeutics (P&T) Committee

### Iowa Medicaid P & T Committee Meeting

April 16, 2026

#### Virtual Meeting

Time: 9:30 a.m. – 2:30 p.m.

Teams Meeting: <https://teams.microsoft.com/meet/22040175476917?p=wMR53kqkR6Tf8A0L6Z>

Meeting ID: 220 401 754 769 17

Passcode: Z7vP3ps7

#### Final Agenda

1. Welcome & Introductions
  - a) Committee Members and Staff
2. Committee Business
  - a) Approval of the open session minutes
  - b) Annual P&T Committee Chairperson and Vice Chairperson Elections
  - c) Conflict of Interest Disclosure
3. Update
  - a) Preferred Drug List (PDL) – Reference Iowa Medicaid PDL Revision Notifications
  - b) Medicaid Drug Rebate Issues
  - c) Prior Authorization Criteria/Pro-DUR edits – Reference Informational Letters and DUR Recommendations
  - d) Legislation
  - e) Iowa Medicaid Updates
4. Public Comment (**See attachment 1 for Conflict of Interest Disclosure**)
  - Verbal - Must **pre-register** to provide verbal public comment and submit a completed conflict of interest disclosure. Five (5) minute maximum limit.
  - Written - Must submit written comments and a completed conflict of interest disclosure.
  - **All submissions must be received no later than 4:00 p.m. CT April 8, 2026.**
  - Send to [pba\\_iapdinfo@optum.com](mailto:pba_iapdinfo@optum.com). **Indicate in email if providing written or verbal comment.**
5. Closed Executive Session - *Motion to go into closed session pursuant to Iowa Code section 21.5(1)(a), to review and discuss closed-session items which are required or authorized by federal law to be kept confidential.*
  - a) Approval of the closed session minutes
  - b) Confidential Economic Review of the Iowa Medicaid PDL, Newly Released Drugs, Newly Released Generic Drugs, New Dosage Forms, and Contracts

c) Review and discussion of the Confidential Public Comments

RETURN TO OPEN SESSION

6. PDL discussion and deliberation  
**(See attachment 2 for order of discussion)**
7. Final Recommendations by the P & T Committee on the Iowa Medicaid PDL (Open Session)
8. Review of Newly Released Drugs  
**(See attachment 3 for order of discussion)**
9. Final Recommendations by the P & T Committee on Newly Released Drugs (Open Session)
10. Review of Newly Released Generic Drugs, Dosage Forms or Strengths  
**(See attachment 4 for order of discussion)**
11. Final Recommendations by the P & T Committee on Newly Released Generic Drugs, Dosage Forms or Strengths (Open Session)
12. Staff presentation
  - a) Atopic Dermatitis
13. Preview of next meeting
14. Adjournment

**\*\*Disclaimer: Closed Executive Sessions may be necessary during the deliberation process\*\***

[www.iowaMedicaidPDL.com](http://www.iowaMedicaidPDL.com)

**Next scheduled meeting:** August 20, 2026 9:30am - 2:30pm

For more information contact Erin Halverson at [erin.halverson@hhs.iowa.gov](mailto:erin.halverson@hhs.iowa.gov) or (515) 974-3126

## Iowa Medicaid Pharmaceutical and Therapeutics (P&T) Committee Public Comment Conflict of Interest Disclosure

The Iowa Medicaid Pharmaceutical and Therapeutics (P&T) Committee and persons speaking or providing written comment to the Iowa Medicaid P&T Committee are asked to disclose to the Committee any financial or other affiliation with organizations that may have a direct or indirect interest in the business. Those persons providing public comment to the P&T Committee meetings are asked to disclose potential conflicts on this form. P&T Committee members disclose potential conflicts each year on a separate form.

A financial interest may include, but is not limited to, being a shareholder in the organization, being on retainer with the organization, having research or honoraria paid by the organization, or receiving other forms of remuneration from an organization. An affiliation may include holding a position on an advisory committee or some other role or benefit to a supporting organization.

**The existence of such financial relationships or affiliation does not necessarily constitute a conflict of interest and will not preclude an individual from participating or addressing the P&T Committee. This policy is intended to openly identify any potential conflicts so that the P&T Committee members and the public are able to form their own judgments.**

**Please indicate type of public comment:**

- Verbal Comment, presented in person (option only for hybrid meetings)**
- Verbal Comment, presented virtually (option for hybrid and virtual meetings)**
- Written Comment**

**Your responses below will be read out loud before your verbal presentation or supplied with your written comment to the P&T Committee.**

**Please check the box of the statement that best applies.**

- Statement of No Conflicts**  
I do not have a current or recent (within the last 12 months) financial arrangement or affiliation with any organization that may have a direct interest in the business before the Iowa Medicaid P&T Committee.
- Disclosures**  
I do have a financial interest, affiliation or am employed by an organization that may have a direct interest in the business before the Iowa Medicaid P&T Committee
- I refuse to state my affiliation(s)**

Organization (List additional on the back of the form.)	Role/Relationship (List additional on the back of the form.)

---

(print name)

---

(signature)

---

(date)

## **Attachment 2**

### **Iowa Medicaid Preferred Drug List**

Disclaimer: The Iowa P&T Committee reserves the right to re-evaluate all medications within the same therapeutic category as those on the agenda scheduled to be discussed for the PDL Review, New Drug Review, New Generic Drug Review, and New Dosage Forms Review and vote to change the PDL status of other medications currently on the PDL. It is the responsibility of the drug manufacturer to provide representation, if necessary, at the P&T Committee Meeting when a competitor's product is on the agenda for discussion.

The below changes are recommended to maximize cost savings to the program, unless otherwise noted:

1. Nemluvio to Preferred with Conditions
2. Mounjaro to Preferred with Conditions
3. Suflave to Non-Preferred
4. Ruconest to Preferred with Prior Authorization

## Attachment 3

### Newly Released Drugs

Disclaimer: The Iowa P&T Committee reserves the right to re-evaluate all medications within the same therapeutic category as those on the agenda scheduled to be discussed for the PDL Review, New Drug Review, New Generic Drug Review, and New Dosage Forms Review and vote to change the PDL status of other medications currently on the PDL. It is the responsibility of the drug manufacturer to provide representation, if necessary, at the P & T Committee Meeting when a competitor's product is on the agenda for discussion.

1. Aqvesme- Recommend status on the PDL as Non-Preferred
2. Blujepa – Recommend status on the PDL as Non-Preferred
3. Ekterly- Recommend status on the PDL as Non-Preferred
4. Exxua- Recommend status on the PDL as Non-Preferred with Conditions ([Antidepressants](#))
5. Hyrnuo- Recommend status on the RDL as Non-Recommended with Conditions ([Select Oncology Agents](#))
6. Ibtrozi- Recommend status on the RDL as Non-Recommended with Conditions ([Select Oncology Agents](#))
7. Inluriyo- Recommend status on the RDL as Non-Recommended with Conditions ([Select Oncology Agents](#))
8. Jascayd- Recommend status on the PDL as Non-Preferred with Conditions ([Pirfenidone & Nintedanib](#))
9. Leqembi Auto-Injector- Recommend status on the PDL as Non-Preferred
10. Lynkuet- Recommend status on the PDL as Preferred
11. Orlynvah- Recommend status on the PDL as Non-Preferred
12. Palsonify- Recommend status on the PDL as Non-Preferred
13. Rhapsido – Recommend status on the PDL as Preferred with Conditions
14. Tonmya- Recommend status on the PDL as Non-Preferred
15. Voyxact- Recommend status on the PDL as Non-Preferred
16. Wayrilz- Recommend status on the PDL as Non-Preferred with Conditions ([Hematopoietics/Chronic ITP](#))

## Attachment 4

### Newly Released Generic Drugs, New Dosage Forms, New Drug Names, New Drug Strengths

Disclaimer: The Iowa P&T Committee reserves the right to re-evaluate all medications within the same therapeutic category as those on the agenda scheduled to be discussed for the PDL Review, New Drug Review, New Generic Drug Review, and New Dosage Forms Review and vote to change the PDL status of other medications currently on the PDL. It is the responsibility of the drug manufacturer to provide representation, if necessary, at the P&T Committee Meeting when a competitor's product is on the agenda for discussion.

NEWLY RELEASED GENERIC DRUGS		
Drug Name	Brand Name/Status on PDL/RDL	PDL/RDL Recommendation
Amphetamine ER ODT	Adzenys XR ODT / Non-Preferred with Conditions	Non-Preferred with Conditions
Besifloxacin	Besivance / Non-Preferred	Non-Preferred
Carbidopa-Levodopa ER Cap	Rytary / Non-Preferred with Conditions	Non-Preferred with Conditions
Ciprofloxacin-Hydrocortisone Otic Suspension	Cipro HC / Preferred	Non-Preferred
Cladribine Pak	Mavenclad / Non-Preferred with Conditions	Non-Preferred with Conditions
Conjugated Estrogen Tab	Premarin / Preferred	Non-Preferred
Evexithroid	Armour Thyroid / Preferred	Non-Preferred
Glycerol PHE Liquid	Ravicti / Non-Preferred	Non-Preferred
Loteprednol/Tobramycin Oph Suspension	Zylet / Preferred	Non-Preferred
Prednisone Delayed Release Tab	Rayos / Not Covered	Non-Preferred
Ustekinumab-AAUZ	Otulfi / Non-Preferred with Conditions	Non-Preferred with Conditions

### NEW DRUG DOSAGE FORMS/STRENGTHS/COMBINATIONS/BIOSIMILARS

<b>Drug Name</b>	<b>Brand Name/Status on PDL/RDL</b>	<b>PDL/RDL Recommendation</b>
Arbli Oral Suspension	Losartan Tabs / Preferred	Non-Preferred with Conditions
Brekiya Auto-Injector	Dihydroergotamine Mesylate Nasal Spray / Non-Preferred	Non-Preferred
Daybue Stix	Daybue Oral Solution / Non-Preferred	Non-Preferred
Eliquis Sprinkle Cap	Eliquis Tab / Preferred	Non-Preferred
Eliquis Tab for Oral Suspension	Eliquis Tab / Preferred	Non-Preferred
Escitalopram Cap	Escitalopram Tab / Preferred	Non-Preferred
Javadin Oral Solution	Clonidine Tabs / Preferred	Non-Preferred
Otezla XR	Otezla / Preferred with Conditions	Non-Preferred with Conditions
Starjemza	Stelara / Non-Preferred with Conditions	Non-Preferred with Conditions
Subvenite Oral Suspension	Lamotrigine Chew Tab / Preferred	Non-Preferred
Wegovy Tab	Wegovy Injection / Preferred with Conditions	Preferred with Conditions
Vyscoxa Oral Suspension	Celecoxib Caps / Preferred	Non-Preferred with Conditions
Yutrepia Inhal Cap	Tyvaso Inhal Powder/ Non-Preferred with Conditions	Non-Preferred with Conditions
Zurnai Auto-Injector	Opvee Nasal Spray / Preferred	Non-Preferred