

Pharmaceutical and Therapeutics (P&T) Committee

P & T Committee Meeting August 21, 2025

Location: Virtual

Time: 9:30 a.m. – 2:30 p.m.

Zoom Meeting:

<https://www.zoomgov.com/j/1611758568?pwd=CutvB7J2jviJRSJHBCHfaySFJaB5as.1>

Meeting ID: 161 175 8568

Passcode: 702390

Final Agenda

1. Welcome & Introductions
 - a) Committee Members and Staff
2. Committee Business
 - a) Approval of the open session minutes
 - b) 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. Must indicate if will be in-person or virtual testimony. 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 August 13, 2025.**
 - Send to 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) Review of Hemophilia and treatments

13. Preview of next meeting

14. Adjournment

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

www.iowaMedicaidPDL.com

Next scheduled meeting: November 20, 2025 9:30am - 4:30pm

For more information contact Erin Halverson at 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. Neffy nasal spray to Preferred
2. Buspirone 30mg tablets to Preferred
3. Ofloxacin ophthalmic solution to Preferred
4. Doxycycline hyclate 50mg & 100mg capsules to Preferred
5. Doxycycline hyclate 20mg & 100mg tablets to Preferred
6. Doxycycline monohydrate 50mg & 100mg tablets to Preferred
7. Nystatin cream to Preferred

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. Attruby- Recommend status on the PDL as Non-Preferred
2. Avmapki Fakzynja CO-PACK- Recommend status on the RDL as Non-Recommended with Conditions ([Select Oncology Agents](#))
3. Ebglyss- Recommend status on the PDL as Preferred with Conditions
4. Gomekli- Recommend status on the PDL as Non-Preferred
5. Itovebi- Recommend status on the RDL as Non-Recommended with Conditions ([Select Oncology Agents](#))
6. Journavx- Recommend status on the PDL as Preferred (qty limit 14-day supply per 60 days)
7. Nemludio- Recommend status on the PDL as Non-Preferred with Conditions
8. Qfitlia- Recommend status on the PDL as Non-Preferred
9. Revuforj- Recommend status on the RDL as Non-Recommended with Conditions ([Select Oncology Agents](#))
10. Romvimza- Recommend status on the PDL as Non-Recommended with Conditions ([Select Oncology Agents](#))
11. Sofdra- Recommend status on the PDL as Non-Preferred
12. Tryngolza- Recommend status on the PDL as Non-Preferred
13. Vanrafia- Recommend status on the PDL as Non-Preferred

Attachment 4

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

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NEWLY RELEASED GENERIC DRUGS		
Drug Name	Brand Name/Status on PDL/RDL	PDL/RDL Recommendation
Auranofin	Ridaura / Preferred	Non-Preferred
Chenodal	Ctexli / Non-Preferred	Non-Preferred
Eltrombopag	Promacta / Preferred with Conditions	Non-Preferred with Conditions
Emtricitabine- Rilpivirine-Tenofovir	Complera / Preferred	Non-Preferred
Eslicarbazepine	Aptiom / Non-Preferred	Non-Preferred
Exenatide	Byetta / Discontinued	Non-Preferred with Conditions
Nilotinib	Tasigna / Preferred with Conditions	Non-Preferred with Conditions
Perampanel	Fycompa / Preferred	Non-Preferred
Rivaroxaban	Xarelto / Preferred	Non-Preferred
Ticagrelor	Brilinta / Preferred	Non-Preferred
Umeclidinium- Vilanterol	Anoro Ellipta / Preferred	Non-Preferred
Ustekinumab	Stelara / Non-Preferred with Conditions	Non-Preferred with Conditions
Ustekinumab-aekn	Selarsdi / Non-Preferred with Conditions	Non-Preferred with Conditions
Ustekinumab-ttwe	Pyzchiva / Preferred with Conditions	Non-Preferred with Conditions

NEW DRUG DOSAGE FORMS/STRENGTHS/COMBINATIONS/BIOSIMILARS		
Drug Name	Brand Name/Status on PDL/RDL	PDL/RDL Recommendation
Adalimumab-ryvk	Simlandi / Preferred with Conditions	Non-Preferred with Conditions
Bucapsol	Buspirone Tabs / Preferred	Non-Preferred
Edurant Ped Tab	Edurant Tabs / Preferred	Preferred
Evrysdi Tabs	Evrysdi Oral Solution / Non-Preferred with Conditions	Non-Preferred with Conditions
Hemiclor	Chlorthalidone / Preferred	Non-Preferred
Inzirgo	Hydrochlorothiazide Tabs & Caps / Preferred	Non-Preferred
Ivermectin 6mg	Ivermectin 3mg / Preferred	Non-Preferred
Khindivi Oral Solution	Hydrocortisone Tabs / Preferred	Non-Preferred
Onapgo	Apokyn / Non-Preferred	Non-Preferred
Raldesy Oral Solution	Trazodone Tabs / Preferred	Non-Preferred
Renthyroid	Armour Thyroid / Preferred	Non-Preferred
Symbravo	Meloxicam / Preferred Rizatriptan / Preferred	Non-Preferred with Conditions
Tezruly Oral Solution	Terazosin Capsules / Preferred	Non-Preferred
Vyvgart Hytrulo	Vyvgart IV / Medical	Non-Preferred
Xromi Oral Solution	Hydroxyurea Caps / Preferred	Non-Preferred