



**MISSISSIPPI DIVISION OF MEDICAID
Pharmacy & Therapeutics Committee Meeting**

Woolfolk Building
Conference Center East, Room 145
Jackson, MS 39201-1399

**October 23, 2012
9:00am to 5:00pm**

MINUTES

Committee Members Present:

Anne A. Norwood, FNP, PhD
Billy Ray Brown, Pharm.D.
Carol Tingle, M.D.
Deborah Minor, Pharm.D.
Geri Lee Weiland, M.D.
John W. Gaudet, M.D.
John R. Mitchell, M.D.
Lee Voulters, M.D.
Maretta M. Walley, R.Ph., J.D.
Ryan Harper, Pharm.D.
Sharon R. Dickey, Pharm.D.
Wilma Johnson Wilbanks, R.Ph.

Chad Bissell, Pharm.D.
Laureen Biczak, D.O.
Shelagh Harvard

Other Contract Staff/State Staff Present:

Leslie Leon, Pharm.D., ACS-Xerox
Lew Anne Snow, RN, BSN, ACS-Xerox
Kyle Null, Pharm.D., University of Mississippi
School of Pharmacy

**Other Contract Staff/State Staff Present via
Teleconference:**

Joyce Grizzle, PMP, ACS-Xerox

Committee Members Not Present:

Division of Medicaid Staff Present:

Judith Clark, R.Ph., Pharmacy Bureau Director
Terri Kirby, R.Ph., Pharmacist III
Shannon Hardwick, R.Ph., Pharmacist III
Delvin Taylor

Contract Staff/GHS Staff Present:

I. Call to Order

John Mitchell, M.D., Chairperson, called the meeting to order at 9:08 a.m.

II. Introductions

Ms. Judith Clark, Mississippi Department of Medicaid (DOM) Pharmacy Bureau Director welcomed the Pharmacy & Therapeutics (P&T) Committee and all guests in the audience. She introduced Goold Health Systems, DOM's Preferred Drug List (PDL) and Supplemental Rebate (SR) vendor. All parties seated at the table introduced themselves and gave a brief statement about their professional credentials and affiliations.

Ms. Clark expressed DOM's appreciation to the Committee members for their volunteer service to the P&T Committee.

Ms. Clark introduced DOM staff member Delvin Taylor. She thanked her entire staff for their dedication, compassion, flexibility, and their tireless work as advocates for the Medicaid client community.

Ms. Clark recognized DOM contractors in the audience, including Dr. Leslie Leon, Ms. Lew Anne Snow, and Joyce Grizzle from Xerox, and Dr. Kyle Null and from the University of the Mississippi School of Pharmacy's MS-DUR Program.

Ms. Clark noted that DOM's Executive Director, Dr. David Dzielak, would not be able to attend the meeting.

III. Administrative Matters

Ms. Clark reviewed Committee policies and procedures. Ms. Clark reminded the Committee and the audience that the PDL is posted several weeks prior to P&T meetings. Ms. Clark noted that an updated PDL and agenda were posted to the website last week.

Ms. Clark reminded guests to sign in. She stated that copies of the agenda and the public comment guidelines were available at the sign-in table. She stated that there was a separate sign in sheet for advocates and reminded guests that advocate presenters are limited to 5 minutes of general comment about a disease, not specific to a drug. She noted that industry presenters must provide their full name, drug name, and company affiliation when signing in. She stated that industry presenters are allowed 3 minutes per drug and that no handouts would be permitted. Presenters are requested to sign in at least 10 minutes prior to start of meeting. Ms. Clark stated that any documents used in the meeting that were not marked confidential and proprietary would be posted on DOM's website (www.medicaid.ms.gov) after the meeting.

Ms. Clark reminded audience members that no food or drink should be brought into the room. She reviewed policies related to cell phones and pagers, discussions in the hallways, and emergency procedures for the building.

Ms. Clark requested that Committee members complete their travel vouchers and reviewed the contents of the folders provided to each Committee member.

Ms. Clark stated that DOM aggressively pursues supplemental rebates. Implementation for classes discussed at the meeting will be January 1, 2013. She stated that the PDL recommended during the meeting would not apply to members in the managed care benefit and, although there is interest, there is currently no active coordination between the fee for service and managed care PDLs. She stated that DOM is currently waiting for CMS approval of DOM's SSDC membership application.

Ms. Clark reviewed the voting procedure and reminded the Committee that, in accordance with the Mississippi Open Meetings Act, the minutes will reflect each person's vote. She requested that the Chair announce the recommendation, motions, and names of committee members making motions. The meeting minutes will be posted no later than November 23, 2012.

Ms. Clark stated that lunch and refreshments would be provided for Committee members.

Ms. Clark stated that the P&T Committee works in an advisory capacity and that DOM is responsible for final decisions related to the PDL. The minutes for each P&T Committee meeting will be posted to the DOM website (www.medicaid.ms.gov) within 30 days of the meeting. She stated that DOM takes into account recommendations from both the P&T Committee and the clinical contractor before making a final decision. The approved PDL decisions will be posted to the DOM website at least 30 days prior to their implementation on January 1, 2013. She stated that beginning on January 1, 2013, the PDL will be completely updated once per year. There will be small changes as needed throughout the year.

IV. Executive Director's Comments

There were no comments made by the Executive Director.

V. Approval of April 17, 2012 Meeting Minutes

Dr. Mitchell asked for approval of the minutes from the September 11, 2012 meeting. Dr. Voulters motioned to accept the minutes, Dr. Dickey seconded. Dr. Mitchell stated that there being no further corrections that the minutes would stand accepted.

VI. PDL Compliance/Generic Percent Report Updates

Dr. Biczak provided an explanation of the PDL Compliance and Generic Percent reports.

- A.** Dr. Biczak reviewed the PDL Compliance Report; overall compliance for Q3 2012 was 96.7%.
- B.** Dr. Biczak reviewed the Generic Percent Report; overall generic utilization for Q3 2012 was 82.1%.

VII. Drug Class Announcements

Dr. Bissell reviewed the agenda, the updated PDL, Committee procedure, and the extraction process. He reminded industry representatives that deferring speaking time in the case of preferred drugs would be appreciated.

VIII. First Round of Extractions

GHS recommended that the following classes be extracted:

- Acne Agents, Topical
- Analgesics, Narcotic - Long Acting
- Analgesics/Anesthetics (Topical)
- Androgenic Agents
- Antipsychotics
- Bronchodilators, Beta Agonist
- Cytokine & CAM Antagonists
- Hepatitis C Treatments
- Intranasal Rhinitis Agents
- Multiple Sclerosis Agents
- Otic Antibiotics
- Proton Pump Inhibitors
- Stimulants and Related Agents

Ms. Clark stated that questions related to criteria should be directed to DOM.

Dr. Norwood asked that the following classes be extracted:

- Antiparasitics, Topical
- Hypoglycemics, Incretin Mimetics/Enhancers

Dr. Minor asked that the following class be extracted:

- Fibromyalgia Agents

Dr. Tingle asked that the following class be extracted:

- Antidepressants, Other

Dr. Voulters asked that the following class be extracted:

- Anticonvulsants

Dr. Mitchell asked that the following class be extracted:

- Beta Blockers

IX. Public Comments

Ms. Clark reviewed the public comment process.

Dr. John Norton, UMC, spoke in favor of reducing restrictions on mental health medications.

Zandrea Ware, Mississippi Association of Community Mental Health Centers, spoke in favor of reducing restrictions on mental health medications.

Ellen Emmich, DMH Peer Specialists, spoke in favor of reducing restrictions on mental health medications.

Tonya Tate, NAMI - MS, spoke in favor of reducing restrictions on mental health medications.

Dr. Mardi Allen, Mental Health America, spoke in favor of reducing restrictions on mental health medications.

Cathy Tugwell, Amylin, spoke in favor of Bydureon.

Joe Brann, Novo Nordisk, spoke in favor of Victoza.

Joe Brann, Novo Nordisk, yielded his time to the Committee (Levemir).

Deanine G. Halliman, Bausch & Lomb, spoke in favor of Besivance.

Patricia Grossman, Boehringer Ingelheim, yielded her time to the Committee (Tradjenta).

Patricia Grossman, Boehringer Ingelheim, yielded her time to the Committee (Pradaxa).

Patricia Grossman, Boehringer Ingelheim, yielded her time to the Committee (Jentaduet).

Jennifer Robinson, Shire, spoke in favor of Intuniv.

Hillary Norris, UCB, spoke in favor of Cimzia.

Marilyn Ripoll, Astellas, spoke in favor of Protopic.

Marilyn Ripoll, Astellas yielded her time to the Committee (Prograf).

Melinda Welch, UCB, spoke in favor of Neupro.

Melinda Welch, UCB, yielded her time to the Committee (Vimpat).

Kirsten Mar, Eli Lilly, yielded her time to the Committee (Strattera).

Kirsten Mar, Eli Lilly, spoke in favor of Cymbalta.

Robert Laurenston, Astellas, spoke in favor of Vesicare.

Lizbet Delgado, Sunovion, yielded her time to the Committee (Latuda).

JC Brister, Sunovion, spoke in favor of Abilify.

Michael McGuire, Forest, spoke in favor of Bystolic.

Jolan Rosenthal, Forest, spoke in favor of Viibryd.

Jolan Rosenthal, Forest, spoke in favor of Savella.

Michelle Mattox, Vertex, gave her time back to the Committee (Incivek).

Kristen D’Onofrio, Takeda, spoke in favor of Dexilant.

Bill Randle, Daiichi Sankyo, spoke in favor of Azor.

Bill Randle, Daiichi Sankyo, spoke in favor of Tribenzor.

Bill Randle, Daiichi Sankyo, spoke in favor of Welchol.

Vijay Anne, Reckitt Benckiser, spoke in favor of Suboxone

Julie Huber, Astra Zeneca, spoke in favor of Brilinta.

Julie Huber, Astra Zeneca, gave her time back to the Committee (Seroquel XR).

Julie Huber, Astra Zeneca, gave her time back to the Committee (Symbicort).

Katie Walker, Novo Nordisk, gave her time back to the Committee (Norditropin).

Alan Blau, Forest, gave his time back to the Committee (Namenda).

Alan Blau, Forest, spoke in favor of Daliresp.

Shane Perrillone, Teva, spoke in favor of ProAir HFA.

Shane Perrillone, Teva, spoke in favor of Qnasl.

Julia Compton, Novartis, gave her time back to the Committee (Fanapt).

Julia Compton, Novartis, gave her time back to the Committee (Exelon patch).

Julia Compton, Novartis, gave her time back to the Committee (Arcapta).

Julia Compton, Novartis, spoke in favor of Gilenya.

X. Second Round of Extractions

Dr. Biczak and Dr. Bissell provided a brief update on line extensions.

There were no other categories recommended for extraction.

XI. Non-Extracted Categories

GHS recommended that the following list be approved without extraction.

- Alzheimer's Agents
- Analgesics, Narcotic - Short Acting
- Angiotensin Modulators
- Antibiotics (Topical)
- Antibiotics (GI)
- Antibiotics (Vaginal)
- Anticoagulants
- Antidepressants, SSRIs
- Antiemetics
- Antifungals (Oral)
- Antifungals (Topical)
- Antihistamines, Minimally Sedating and Combinations
- Antimigraine Agents, Triptans
- Antiparkinson's Agents (Oral)
- Antivirals (Oral) – Antiherpetic Agents
- Antivirals (Topical)
- Atopic Dermatitis
- Bile Salts
- Bladder Relaxant Preparations
- Bone Resorption Suppression and Related Agents
- BPH Agents
- Bronchodilators & COPD Agents
- Calcium Channel Blockers
- Cephalosporins and Related Antibiotics (Oral)
- Erythropoiesis Stimulating Proteins
- Fluoroquinolones (Oral)
- Glucocorticoids (Inhaled)
- Growth Hormone
- *H. pylori* Combination Treatments
- Hyperuricemia & Gout
- Hypoglycemics, Insulins And Related Agents
- Hypoglycemics, Meglitinides
- Hypoglycemics, TZDs
- Immunosuppressive (Oral)
- Leukotriene Modifiers
- Lipotropics, Other (Non-Statins)
- Lipotropics, Statins
- Macrolides/Ketolides (Oral)
- NSAIDs

- Ophthalmic Antibiotics
- Ophthalmic Anti-Inflammatories
- Ophthalmics For Allergic Conjunctivitis
- Ophthalmics, Glaucoma Agents
- Pancreatic Enzymes
- Phosphate Binders
- Platelet Aggregation Inhibitors
- Prenatal Vitamins
- Pulmonary Antihypertensives – Endothelin Receptor Antagonists
- Pulmonary Antihypertensives – PDE5s
- Pulmonary Antihypertensives – Prostacyclins
- Sedative Hypnotics
- Skeletal Muscle Relaxants
- Steroids (Topical)
- Tetracyclines
- Ulcerative Colitis Agents

Dr. Voulters motioned to accept the recommendation. Dr. Gaudet seconded. Votes were taken, and the motion carried.

XII. Extracted Therapeutic Class Reviews

A. Acne Agents, Topical

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Harper motioned to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
ANTI-INFECTIVE	
AZELEX (azelaic acid) clindamycin erythromycin	ACZONE (dapsone) AKNE-MYCIN (erythromycin) CLEOCIN-T (clindamycin) CLINDAGEL (clindamycin) ERY (erythromycin) EVOCLIN (clindamycin) FINACEA (azelaic acid) KLARON (sulfacetamide) sulfacetamide
RETINOIDS	
RETIN-A MICRO (tretinoin) TAZORAC (tazarotene)	adapalene AVITA (tretinoin) ATRALIN (tretinoin) DIFFERIN (adapalene) RETIN-A (tretinoin) TRETIN-X (tretinoin) tretinoin
COMBINATION DRUGS/OTHERS	
DUAC (benzoyl peroxide/clindamycin) EPIDUO (adapalene/benzoyl peroxide) sodium sulfacetamide/sulfur cream/cleanser/foam/gel/lotion/suspension	ACANYA (benzoyl peroxide/clindamycin) BENZAACLIN GEL (benzoyl peroxide/clindamycin) BENZAACLIN KIT (benzoyl peroxide/ clindamycin) BENZAMYCIN PAK (benzoyl peroxide/ erythromycin) benzoyl peroxide/clindamycin CLARIFOAM EF (sodium sulfacetamide/sulfur) CLENIA (sulfacetamide sodium/sulfur) erythromycin/benzoyl peroxide INOVA 4/1 (benzoyl peroxide/salicylic acid) INOVA 8/2 (benzoyl peroxide/salicylic acid) PRASCION (sulfacetamide sodium/sulfur) ROSANIL (sulfacetamide sodium/sulfur) SE BPO (benzoyl peroxide) sodium sulfacetamide/sulfur pads sodium sulfacetamide/sulfur/meratan sulfacetamide sodium/sulfur/urea SULFATOL (sulfacetamide sodium/sulfur/urea) VELTIN (clindamycin/tretinoin) ZENCIA WASH (sulfacetamide sodium/sulfur) ZIANA (clindamycin/tretinoin)
KERATOLYTICS (BENZOYL PEROXIDES)	
benzoyl peroxide ZACLIR (benzoyl peroxide)	BENZEFOAM (benzoyl peroxide) BENZEFOAM ULTRA (benzoyl peroxide) BP10 (benzoyl peroxide) BPO (benzoyl peroxide) INOVA (benzoyl peroxide) LAVOCLEN (benzoyl peroxide) OSCIION (benzoyl peroxide)

B. Analgesics, Narcotic - Long Acting

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Voulters motioned to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
DURAGESIC (fentanyl) methadone morphine ER OPANA ER (oxymorphone)	AVINZA (morphine) BUTRANS (buprenorphine) CONZIP ER (tramadol) ^{NR} DOLOPHINE (methadone) EMBEDA (morphine/naltrexone) EXALGO (hydromorphone) fentanyl patches KADIAN (morphine) morphine ER capsules MS CONTIN (morphine) NUCYNTA ER (tapentadol) ORAMORPH SR (morphine) oxycodone ER OXYCONTIN (oxycodone) oxymorphone ER RYZOLT (tramadol) tramadol ER ULTRAM ER (tramadol)

C. Analgesics/Anesthetics (Topical)

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Weiland motioned to accept the recommendation. Dr. Gaudet seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
VOLTAREN Gel (diclofenac sodium)	capsaicin EMLA (lidocaine/prilocaine) FLECTOR (diclofenac epolamine) LIDAMANTLE (lidocaine) LIDAMANTLE HC (lidocaine/hydrocortisone) lidocaine lidocaine/prilocaine LIDODERM (lidocaine) LMX 4 (lidocaine) PENNSAID Solution (diclofenac sodium) xylocaine SYNERA (lidocaine/tetracaine) ZOSTRIX (capsaicin)

D. Androgenic Agents

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Voulters motioned to accept the recommendation. Ms. Wilbanks seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
TESTIM (testosterone gel)	ANDRODERM (testosterone patch) ANDROGEL (testosterone gel) AXIRON (testosterone gel) FORTESTSA (testosterone gel)

E. Anticoagulants

GHS recommended that the following list be approved with existing users of warfarin (generic) being grandfathered. A robust clinical and financial discussion followed. Dr. Weiland motioned to accept the recommendation. Dr. Gaudet seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
COUMADIN (warfarin) FRAGMIN (dalteparin) ^{SmartPA LMWH} LOVENOX (enoxaparin) ^{SmartPA LMWH} PRADAXA (dabigatran)* XARELTO 10mg (rivaroxaban) ^{Clinical Edit}	ARIXTRA (fondaparinux) ^{SmartPA LMWH} enoxaparin ^{SmartPA LMWH} fondaparinux ^{SmartPA LMWH} INNOHEP (tinzaparin) ^{SmartPA LMWH} XARELTO 15 & 20mg (rivaroxaban) warfarin

F. Anticonvulsants

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Voulters motioned to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
ADJUVANTS	
carbamazepine carbamazepine XR CARBATROL (carbamazepine) DEPAKOTE ER (divalproex) DEPAKOTE SPRINKLE (divalproex) divalproex divalproex ER EPITOL (carbamazepine) gabapentin GABITRIL (tiagabine) lamotrigine levetiracetam oxcarbazepine TEGRETOL XR (carbamazepine) TOPAMAX Sprinkle (topiramate) topiramate TRILEPTAL Suspension (oxcarbazepine)	BANZEL (rufinamide) DEPAKENE (valproic acid) DEPAKOTE (divalproex) EQUETRO (carbamazepine) FANATREX SUSPENSION (gabapentin) ^{NR} felbamate FELBATOL (felbamate) GRALISE (gabapentin) HORIZANT (gabapentin) KEPPRA (levetiracetam) KEPPRA XR (levetiracetam) LAMICTAL (lamotrigine) LAMICTAL CHEWABLE (lamotrigine) LAMICTAL ODT (lamotrigine) LAMICTAL XR (lamotrigine) levetiracetam ER NEURONTIN (gabapentin) POTIGA (ezogabine)

PREFERRED AGENTS	NON-PREFERRED AGENTS
valproic acid VIMPAT (lacosamide) zonisamide	SABRIL (vigabatrin) STAVZOR (valproic acid) TEGRETOL (carbamazepine) TRILEPTAL Tablets (oxcarbazepine) ZONEGRAN (zonisamide)
SELECTED BENZODIAZEPINES	
DIASTAT (diazepam rectal)	diazepam rectal gel ONFI (clobazam)
HYDANTOINS	
DILANTIN (phenytoin) PHENYTEK (phenytoin) Phenytoin	PEGANONE (ethotoin)
SUCCINIMIDES	
ethosuximide	CELONTIN (methsuximide) ZARONTIN (ethosuximide)

The Committee broke for lunch at 12:05. The Committee resumed at 1:17.

G. Antidepressants, Other

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Weiland motioned to accept the recommendation. Dr. Minor seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
bupropion EFFEXOR XR (venlafaxine) mirtazapine PRISTIQ (desvenlafaxine) trazodone WELLBUTRIN XL (bupropion HCl)	APLENZIN (bupropion HBr) bupropion SR bupropion XL DESYREL (trazodone) EFFEXOR (venlafaxine) EMSAM (selegiline transdermal) MARPLAN (isocarboxazid) NARDIL (phenelzine) nefazodone OLEPTRO ER (trazodone) REMERON (mirtazapine) tranylcypromine venlafaxine venlafaxine ER venlafaxine XR VIIBRYD (vilazodone) WELLBUTRIN (bupropion) WELLBUTRIN SR

H. Antiparasitics, Topical

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Voulters motioned to accept the recommendation. Dr. Tingle seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
EURAX (crotamiton) NATROBA (spinosad) permethrin	lindane malathion OVIDE (malathion) SKLICE (ivermectin) ULESFIA (benzyl alcohol)

I. Antipsychotics

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Harper motioned to accept the pill splitting recommendation. Dr. Weiland seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
ORAL	
ABILIFY (aripiprazole) amitriptyline/perphenazine chlorpromazine clozapine FANAPT (iloperidone) fluphenazine GEODON (ziprasidone) haloperidol LATUDA (lurasidone) perphenazine risperidone SAPHRIS (asenapine) SEROQUEL (quetiapine) SEROQUEL XR (quetiapine) thioridazine thiothixene trifluoperazine	CLOZARIL (clozapine) FAZACLO (clozapine) HALDOL (haloperidol) INVEGA (paliperidone) NAVANE (thiothixene) olanzapine olanzapine/fluoxetine quetiapine RISPERDAL (risperidone) SYMBYAX (olanzapine/fluoxetine) ziprasidone ZYPREXA (olanzapine)
INJECTABLE, ATYPICALS	
	ABILIFY (aripiprazole) GEODON (ziprasidone) INVEGA SUSTENNA (paliperidone palmitate) RISPERDAL CONSTA (risperidone) ZYPREXA (olanzapine) ZYPREXA RELPREVV (olanzapine)

J. Beta Blockers

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Ms. Wilbanks moved that Toprol XL be added to the PDL. Dr. Weiland seconded. Dr. Mitchell clarified that the drugs would be co-preferred. Votes were taken, and the motion carried. Ms. Wilbanks motioned that Bystolic be added to the PDL. Dr. Gaudet seconded. Votes were taken, and the motion carried. Dr. Brown, Dr. Voulters, Dr. Norwood, Ms. Wilbanks, and

Dr. Gaudet voted in favor of the motion. Dr. Weiland, Ms. Walley, Dr. Harper, Dr. Dickey, and Dr. Minor voted against the motion. Dr. Tingle abstained. Since there was a tie in the vote, Dr. Mitchell voted as a tie breaker and voted in favor of the motion. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
acebutolol atenolol bisoprolol BYSTOLIC (nebivolol) metoprolol metoprolol XL nadolol pindolol propranolol timolol TOPROL XL (metoprolol)	BETAPACE (sotalol) betaxolol BLOCADREN (timolol) CARTROL (carteolol) CORGARD (nadolol) INDERAL LA (propranolol) INNOPRAN XL (propranolol) KERLONE (betaxolol) LEVATOL (penbutolol) LOPRESSOR (metoprolol) SECTRAL (acebutolol) sotalol TENORMIN (atenolol) TOPROL XL (metoprolol) ZEBETA (bisoprolol)

K. Bronchodilators, Beta Agonist

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Harper motioned to accept the recommendation. Dr. Voulters seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
INHALERS, SHORT-ACTING	
PROVENTIL HFA (albuterol)	MAXAIR (pirbuterol) SmartPA PROAIR HFA (albuterol) VENTOLIN HFA (albuterol) XOPENEX HFA (levalbuterol) SmartPA
INHALERS, LONG ACTING SmartPA	
FORADIL (formoterol)	ARCAPTA (indacaterol) SEREVENT (salmeterol)
INHALATION SOLUTION SmartPA	
albuterol	ACCUNEB (albuterol) BROVANA (arformoterol) levalbuterol metaproterenol PERFOROMIST (formoterol) XOPENEX (levalbuterol)
ORAL	
albuterol metaproterenol terbutaline	VOSPIRE ER (albuterol)

L. Cytokine & CAM Antagonists

GHS recommended that the following list be approved. He further recommended that current Kineret users be grandfathered. Ms. Wilbanks motioned to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
ENBREL (etanercept) HUMIRA (adalimumab)	AMEVIVE (alefacept) CIMZIA (certolizumab) KINERET (anakinra) ORENCIA (abatacept) REMICADE (infliximab) SIMPONI (golimumab) STELARA (ustekinumab)

M. Fibromyalgia Agents

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Ms. Weiland motioned to accept the recommendation. Dr. Brown seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
LYRICA (pregabalin) SAVELLA (milnacipran)	CYMBALTA (duloxetine)

N. Hepatitis C Treatments

GHS recommended that the following list be approved. Dr. Dickey motioned to accept the recommendation. Dr. Minor seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
INCIVEK (telaprevir)* PEGASYS (peginterferon alfa-2a) PEG-INTRON (peginterferon alfa-2b) RIBAPAK DOSEPACK (ribavirin) VICTRELIS (boceprevir)*	INFERGEN (interferon alfacon-1) ribavirin REBETOL (ribavirin) RIBASPHERE (ribavirin)

O. Hypoglycemics, Incretin Mimetics/Enhancers

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Norwood moved that Victoza be added to the PDL with a preferred status. Dr. Harper seconded. Votes were taken, and the motion failed. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
BYETTA (exenatide) JANUMET (sitagliptin/metformin) JANUVIA (sitagliptin) KOMBIGLYZE XR (saxagliptin/metformin) ONGLYZA (saxagliptin) TRADJENTA (linagliptin)	BYDUREON (exenatide) JANUMET XR (sitagliptin/metformin) JENTADUETO (linagliptin/metformin) JUVISYNC (sitagliptin/simvastatin) SYMLIN (pramlintide) VICTOZA (liraglutide)

P. Intranasal Rhinitis Agents

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Weiland motioned to accept the recommendation. Dr. Dickey seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
ANTICHOLINERGICS	
ipratropium	ATROVENT (ipratropium)
ANTI-HISTAMINES	
ASTELIN (azelastine) PATANASE (olopatadine)	ASTEPRO (azelastine) azelastine
ANTI-HISTAMINE/CORTICOSTEROID COMBINATION	
	DYMISTA (azelastine/fluticasone) SmartPA
CORTICOSTEROIDS	
BECONASE AQ (beclomethasone) FLONASE (fluticasone) NASAREL (flunisolide) NASONEX (mometasone) ZETONNA (ciclesonide)	flunisolide fluticasone NASACORT AQ (triamcinolone) OMNARIS (ciclesonide) QNASL (beclomethasone) RHINOCORT AQUA (budesonide) triamcinolone VERAMYST (fluticasone)

Q. Multiple Sclerosis Agents

GHS recommended that the following list be approved with existing users of Betaseron being grandfathered. Dr. Weiland motioned to accept the recommendation. Dr. Voulters seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
AVONEX (interferon beta-1a) COPAXONE (glatiramer) REBIF (interferon beta-1a)	AMPYRA (dalfampridine) BETASERON (interferon beta-1b) EXTAVIA (interferon beta-1b) GILENYA (fingolimod)

R. Otic Antibiotics

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Weiland motioned to accept the recommendation, with the exception of the age edit for Ciprodex. Dr. Dickey clarified the motion. Dr. Harper seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
<p>CIPRO HC (ciprofloxacin/hydrocortisone) CIPRODEX (ciprofloxacin/dexamethasone) COLY-MYCIN S (colistin/neomycin/ hydrocortisone) CORTISPORIN-TC (colistin/neomycin/ hydrocortisone) neomycin/polymyxin/hydrocortisone</p>	<p>CETRAXAL (ciprofloxacin) DERMOTIC (fluocinolone) ofloxacin</p>

S. Proton Pump Inhibitors

GHS recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Voulters motioned to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
<p>ACIPHEX (rabeprazole) NEXIUM (esomeprazole) PROTONIX PACKET (pantoprazole)</p>	<p>DEXILANT (dexlansoprazole) lansoprazole RX omeprazole RX omeprazole sod. bicarb. pantoprazole PREVACID Rx (lansoprazole) PREVACID SOLU-TAB (lansoprazole) PRILOSEC RX (omeprazole) PROTONIX (pantoprazole) ZEGERID RX (omeprazole sod bicar)</p>

T. Stimulants and Related Agents

GHS recommended that the following list be approved. Dr. Bissell further recommended the removal of the age edits on Procentra and Strattera. He stated that new starts for Adderall XR would need to fail Vyvanse first. Lastly, Intuniv and Kapvay should move to non-preferred status with PA criteria limiting them to those aged 6-17 years, diagnosis of ADD/ADHD, and have had a trial with a preferred stimulant, and a trial with Strattera, and a trial with the immediate release formulation of the alpha blocker they are seeking. A robust clinical and financial discussion followed. Dr. Tingle motioned to accept the recommendation with a change in language for the PA criteria for Intuniv and Kapvay. Dr. Voulters seconded. Votes were taken, and the motion carried. The approved category is below.

PREFERRED AGENTS	NON-PREFERRED AGENTS
SHORT-ACTING	
<p>amphetamine salt combination dexmethylphenidate IR dextroamphetamine IR FOCALIN (dexmethylphenidate) METHYLIN chewable tablets (methylphenidate)</p>	<p>ADDERALL (amphetamine salt combination) DESOXYN (methamphetamine) methamphetamine methylphenidate solution</p>

PREFERRED AGENTS	NON-PREFERRED AGENTS
METHYLIN solution (methylphenidate) methylphenidate IR PROCENTRA (dextroamphetamine)	
LONG-ACTING	
DAYTRANA (methylphenidate) FOCALIN XR (dexmethylphenidate) METADATE CD (methylphenidate) methylphenidate ER (generic Concerta) VYVANSE (lisdexamfetamine)	ADDERALL XR (amphetamine salt combination) amphetamine salt combination ER CONCERTA (methylphenidate) DEXEDRINE (dextroamphetamine) dextroamphetamine ER methylphenidate CD (generic Metadate CD) NUVIGIL (armodafinil) PROVIGIL (modafinil) RITALIN LA (methylphenidate)
NON-STIMULANTS	
STRATTERA (atomoxetine)	INTUNIV (guanfacine ER) KAPVAY (clonidine extended-release)

XIII. Other Business

Ms. Clark stated the tentative meeting dates for 2013:

- February 12, 2013
- April 9, 2013
- August 13, 2012
- October 22, 2013

XIV. Next Meeting Date

The next meeting of the Pharmacy & Therapeutics Committee will be held on February 12, 2013 at 10:00 a.m. in the Woolfolk Building, Conference Center East, Room 145, in Jackson, Mississippi.

XV. Adjournment

The meeting adjourned at 3:26 p.m.