

**MINUTES OF THE NOVEMBER 10, 2009 MISSISSIPPI DIVISION OF MEDICAID
PHARMACY AND THERAPEUTICS (P & T) COMMITTEE MEETING**

MEMBERS ATTENDING: Michael O'Dell, MD (Chair); Joyce Brewer, PhD, CFNP; Larry Calvert, RPh; Sharon Dickey, MD; Ryan Harper, PharmD; Lonnie Hicks; Deborah Minor, PharmD; William Sorey, MD; Carol Tingle, MD; Pearl Wales, PharmD

Also present: Judith Clark, RPh, Pharmacy Director, DOM; Paige Clayton, PharmD, DOM; Terry Kirby, RPh, DOM; Steve Liles, PharmD, Provider Synergies; Dave Wuest, RPh, Provider Synergies.

MEMBERS ABSENT: Hosan Azomani, MD; Lee Voulters, MD

CALL TO ORDER: Dr. O'Dell called the meeting to order. He apologized for his absence from the last meeting and thanked Dr. Minor for serving as Chair at that meeting.

INTRODUCTIONS: Ms. Clark welcomed attendees to the meeting and asked everyone at the table to introduce themselves. She thanked the Committee members for their work and introduced the DOM pharmacy staff and attendees from DOM's other pharmacy vendors, HID and ACS. Ms. Clark noted that, with DOM Pharmacy staffing changes, manufacturers should continue to contact Paige Clayton, Terri Kirby and herself for inquiries and comments related to the department.

ELECTION OF CHAIR AND CO-CHAIR: Dr. Dickey nominated Dr. Minor to be the Chair of the Committee. The nomination was seconded by Dr. Harper. There were no other nominations and Dr. Minor was elected Chair by a vote of 10-0.

Dr. Wales nominated Dr. Tingle to be Co-Chair of the Committee. This nomination was seconded by Dr. Brewer. There being no other nominations, the Committee elected Dr. Tingle to be Co-Chair by a vote of 10-0.

EXECUTIVE DIRECTOR'S COMMENTS: Ms. Clark noted that Ms. Williams is not able to attend this meeting.

ADMINISTRATIVE MATTERS: Ms. Clark noted that the revised agenda is available at the entrance to the meeting. She reviewed the procedure for public testimony and stated that the roster of P&T Committee members has been posted on the DOM website. She went on to outline the procedural and safety guidelines for the meeting. She stated that the PDL decisions for classes reviewed at this meeting, as well as from the previous meeting, would be effective on January 1, 2010 and that final PDL decisions would be posted 30 days prior to implementation. Ms. Clark stated that minutes from this meeting would be posted no later than December 10, 2009.

DRUG CLASS ANNOUNCEMENTS: Ms. Clark stated that DOM and Provider Synergies continually review drugs and drug classes to include in the PDL process based on the clinical and financial benefits of so doing.

APPROVAL OF OCTOBER 13, 2009 MEETING MINUTES: Dr. O'Dell asked for a motion to approve the minutes from the October 13, 2009 P&T Committee meeting. Mr.

Hicks moved to approve the minutes. Dr. Sorey seconded the motion and the minutes were approved by a vote of 10-0.

THERAPEUTIC CLASS REVIEWS: Dr. Liles stated that he would be presenting new information not previously covered in the Committee's reviews of these classes.

ANTIPARASITICS, TOPICAL

Dr. Liles presented an overview of the new drug, Ulesfia, a 5% benzyl alcohol lotion indicated for treatment of head lice in patients six months of age and older. He stated that this drug asphyxiates lice and has no risk of neurotoxicity. As it is not ovicidal, it does require repeat application in one week. Dr. Liles presented two double-blind randomized trials comparing this drug to vehicle.

Dr. Liles presented the PDL recommendations for the Antiparasitics, Topical class:

Drug	Current PDL Status	Provider Synergies Recommendations
EURAX (TOPICAL)	PDL	PDL
LINDANE (TOPICAL)	NPD	NPD
MALATHION (TOPICAL)	PDL	PDL
OVIDE (TOPICAL)	PDL	NPD
PERMETHRIN (TOPICAL)	PDL	PDL
PERMETHRIN OTC (TOPICAL)	PDL	PDL
ULESFIA (TOPICAL)	NPD	NPD

Robert Olson, MSL from Sciele, spoke on behalf of Ulesfia.
 Steve Whiten of Taro yielded his time back to the Committee.

Dr. Minor asked Dr. Sorrey if Ulesfia was needed on the PDL. Dr. Sorrey responded that most any oil, such as mineral oil, would have the same effect.

Dr. Harper made a motion to accept the recommendations as presented. The motion was seconded by Dr. Minor. The motion passed by a vote of 10-0.

ANTIFUNGALS, TOPICAL

Dr. Liles stated that there was no significant new information to present for this class.

He then presented the following PDL recommendations:

Drug	Current PDL Status	Provider Synergies Recommendations
BENSAL HP (TOPICAL)	NR	NPD
CICLOPIROX CR/SUSP/GEL (TOPICAL)	NPD	PDL
CICLOPIROX SOLUTION (TOPICAL)	NPD	NPD
CLOTRIMAZOLE OTC (TOPICAL)	PDL	PDL
CLOTRIMAZOLE RX (TOPICAL)	PDL	PDL
CLOTRIMAZOLE-BETAMETHASONE (TOPICAL)	PDL	PDL
CNL 8 (TOPICAL)	NPD	NPD
ECONAZOLE (TOPICAL)	PDL	PDL

ERTACZO (TOPICAL)	NPD	NPD
EXTINA (TOPICAL)	NPD	NPD
KETOCONAZOLE (TOPICAL)	PDL	NPD
KETOCONAZOLE SHAMPOO (TOPICAL)	PDL	PDL
LOPROX SHAMPOO (TOPICAL)	NPD	NPD
MENTAX (TOPICAL)	NPD	NPD
MICONAZOLE OTC (TOPICAL)	PDL	PDL
NAFTIN (TOPICAL)	PDL	PDL
NYSTATIN (TOPICAL)	PDL	PDL
NYSTATIN-TRIAMCINOLONE (TOPICAL)	PDL	PDL
OXISTAT (TOPICAL)	NPD	NPD
TERBINAFINE OTC (TOPICAL)	PDL	PDL
TOLNAFTATE OTC (TOPICAL)	PDL	PDL
VUSION (TOPICAL)	NPD	NPD
XOLEGEL (TOPICAL)	NPD	NPD

Cleve Bordelon from Pharmaderm spoke on behalf of Oxistat.

Dr. Sorey made a motion to accept the recommendations as presented. Dr. Wales seconded the motion. The motion passed by a vote of 9-1, with Mr. Calvert voting against the motion.

ACNE AGENTS

Dr. Liles presented a brief overview of several new drugs in this class – Epiduo, Clarifoam EF and Aczone.

He then presented the PDL recommendations to the Committee:

Drug	Current PDL Status	Provider Synergies Recommendations
ACANYA (TOPICAL)	NPD	NPD
ACZONE (TOPICAL)	NPD	NPD
AKNE-MYCIN (TOPICAL)	NPD	NPD
ATRALIN (TOPICAL)	NPD	NPD
AZELEX (TOPICAL)	PDL	PDL
BENZAFLIN (TOPICAL)	PDL	PDL
BENZEFOAM (TOPICAL)	NPD	NPD
BENZOYL PEROXIDE (TOPICAL)	PDL	PDL
BENZOYL PEROXIDE OTC (TOPICAL)	NR	PDL
CLARIFOAM EF (TOPICAL)	NPD	NPD
CLINAC BPO (TOPICAL)	PDL	PDL
CLINDAGEL (TOPICAL)	NPD	NPD
CLINDAMYCIN / BENZOYL PEROXIDE (TOPICAL)	PDL	NPD
CLINDAMYCIN PHOSPHATE (TOPICAL)	PDL	PDL
CLINDAREACH (TOPICAL)	NPD	NPD
DIFFERIN (TOPICAL)	NPD	NPD
DUAC (TOPICAL)	NPD	NPD
EPIDUO (TOPICAL)	NPD	NPD
ERYTHROMYCIN (TOPICAL)	PDL	PDL
ERYTHROMYCIN / BENZOYL PEROXIDE	PDL	NPD

(TOPICAL)		
EVOCLIN (TOPICAL)	NPD	NPD
INOVA (TOPICAL)	NPD	PDL
NUOX (TOPICAL)	PDL	PDL
PANOXYL (TOPICAL)	NR	PDL
RETIN-A MICRO (TOPICAL)	PDL	PDL
SODIUM SULFA / SULFUR / MERATAN (TOPICAL)	PDL	NPD
SULFACETAMIDE (TOPICAL)	PDL	NPD
SULFACETAMIDE / SULFUR (TOPICAL)	PDL	PDL
TAZORAC (TOPICAL)	NPD	NPD
TRETINOIN (TOPICAL)	NPD	NPD
ZACLIR (TOPICAL)	PDL	PDL
ZIANA (TOPICAL)	NPD	NPD

Ms. Clark noted that DOM covers the drugs in this class only for patients under 21 years of age and that, as a result, brand limits do not apply.

There was no public testimony on this class.

Dr. Tingle made a motion to approve the recommendations as presented by Provider Synergies. The motion was seconded by Dr. Dickey and passed unanimously.

STEROIDS, TOPICAL

Dr. Liles stated that there are two medium potency steroids included in the TCR – Momexin and Pandel. He also noted that Halog is now available generically.

Dr. Liles presented the PDL recommendations for this class:

LOW POTENCY

Drug	Current PDL Status	Provider Synergies Recommendations
ALCLOMETASONE DIPROPIONATE (TOPICAL)	PDL	NPD
CAPEX SHAMPOO (TOPICAL)	PDL	PDL
DERMA-SMOOTHIE-FS (TOPICAL)	NPD	NPD
DESONATE (TOPICAL)	PDL	NPD
DESONIDE (TOPICAL)	PDL	PDL
HYDROCORTISONE (TOPICAL)	PDL	PDL
SCALACORT DK (TOPICAL)	NPD	NPD
VERDESO (TOPICAL)	NPD	NPD

MEDIUM POTENCY

Drug	Current PDL Status	Provider Synergies Recommendations
CLODERM (TOPICAL)	NPD	NPD
CORDRAN (TOPICAL)	PDL	NPD
CORDRAN TAPE (TOPICAL)	NPD	NPD
CUTIVATE LOTION (TOPICAL)	NPD	NPD
FLUOCINOLONE ACETONIDE (TOPICAL)	PDL	PDL
FLUTICASONE PROPIONATE (TOPICAL)	PDL	PDL
HYDROCORTISONE BUTYRATE (TOPICAL)	PDL	PDL
HYDROCORTISONE VALERATE (TOPICAL)	PDL	PDL
LUXIQ (TOPICAL)	PDL	PDL
MOMETASONE FUROATE (TOPICAL)	PDL	PDL
MOMEXIN (TOPICAL)	NPD	PDL
PREDNICARBATE (TOPICAL)	PDL	PDL

HIGH POTENCY

Drug	Current PDL Status	Provider Synergies Recommendations
AMCINONIDE (TOPICAL)	NPD	NPD
BETAMETHASONE DIPROPIONATE (TOPICAL)	PDL	NPD
BETAMETHASONE VALERATE (TOPICAL)	PDL	PDL
DESOXIMETASONE (TOPICAL)	NPD	NPD
DIFLORASONE DIACETATE (TOPICAL)	NPD	NPD
FLUOCINONIDE (TOPICAL)	PDL	PDL
FLUOCINONIDE EMOLLIENT (TOPICAL)	PDL	PDL
FLUOCINONIDE-E (TOPICAL)	PDL	PDL
HALOG (TOPICAL)	NPD	PDL
KENALOG AEROSOL (TOPICAL)	NPD	NPD
TRIAMCINOLONE ACETONIDE (TOPICAL)	PDL	PDL
VANOS (TOPICAL)	NPD	NPD

VERY HIGH POTENCY

Drug	Current PDL Status	Provider Synergies Recommendations
CLOBETASOL EMOLLIENT (TOPICAL)	PDL	PDL
CLOBETASOL PROPIONATE (TOPICAL)	PDL	PDL
CLOBEX (TOPICAL)	NPD	NPD
HALOBETASOL PROPIONATE (TOPICAL)	PDL	PDL
OLUX-E (TOPICAL)	NPD	NPD
OLUX-OLUX-E (TOPICAL)	NPD	NPD
ULTRAVATE (TOPICAL)	PDL	NPD

Steve Whiten of Taro spoke on behalf of Topicort.
 Cleve Bordelon of Pharmaderm spoke on behalf of Cutivate lotion.

Dr. Minor made the motion to approve the recommendations as presented. The motion was seconded by Mr. Hicks and approved unanimously by the Committee.

ATOPIC DERMATITIS

Dr. Liles presented two new clinical trials of Elidel and of of Protopic in the pediatric population – all showing effectiveness superior to that of vehicle without any significant increase in adverse effects. He also reviewed a meta-analysis that showed Elidel to be less effective than topical steroids and Protopic to be as effective as medium potency steroids. Dr. Liles pointed out that there are no double-blind studies directly comparing the two drugs.

Dr. Liles presented the PDL recommendations:

Drug	Current PDL Status	Provider Synergies Recommendations
ELIDEL (TOPICAL)	PDL	PDL
PROTOPIC (TOPICAL)	PDL	PDL

Marilyn Ripoll of Astellas waived her time to the Committee.

Mr. Calvert asked what percentage of PA requests for these drugs was approved. The representative from HID estimated this to be approximately 60%. Mr. Calvert asked if the PA could be removed from one of the two agents.

Dr. Wales made a motion to accept the recommendations as presented. This motion was seconded by Dr. Harper. The motion passed unanimously.

CYTOKINE AND CAM ANTAGONISTS

Dr. Liles noted that Raptiva was withdrawn from the market due to reports of PML in patients receiving the drug. He presented updated guidelines on rheumatoid arthritis, psoriasis, psoriatic arthritis, plaque psoriasis and juvenile idiopathic arthritis.

Dr. Liles presented the PDL recommendations to the Committee:

Drug	Current PDL Status	Provider Synergies Recommendations
AMEVIVE (INJECTION)	NPD	NPD
CIMZIA (INJECTION)	PDL	PDL
ENBREL (INJECTION)	PDL	PDL
HUMIRA (INJECTION)	PDL	PDL
KINERET (INJECTION)	PDL	PDL
ORENCIA (INJECTION)	NPD	NPD
REMICADE (INJECTION)	NPD	NPD
SIMPONI (INJECTION)	NPD	NPD

Dr. Hillary Norris of UCB yielded her time to the Committee.

Dr. Brad Clay of Amgen yielded his time to the Committee.

Dr. Pam Sardo of Abbott yielded her time to the Committee.

Dr. Brewer made a motion to accept the recommendations as presented. The motion was seconded by Dr. Dickey and passed unanimously.

NSAIDS

Dr. Liles presented a brief overview of the ACC/ACG/AHA guidelines on prophylaxis of

NSAID and ASA-associated gastric injury.

Dr. Liles made the following recommendations to the Committee:

Drug	Current PDL Status	Provider Synergies Recommendations
ARTHROTEC (ORAL)	NPD	NPD
CELEBREX (ORAL)	NPD	NPD
DICLOFENAC (ORAL)	PDL	PDL
ETODOLAC (ORAL)	PDL	PDL
FENOPROFEN (ORAL)	PDL	PDL
FLURBIPROFEN (ORAL)	PDL	PDL
IBUPROFEN RX (ORAL)	PDL	PDL
INDOMETHACIN (ORAL/RECTAL)	PDL	PDL
KETOPROFEN (ORAL)	PDL	PDL
KETOROLAC (ORAL)	PDL	PDL
MECLOFENAMATE (ORAL)	NPD	NPD
MEFENAMIC ACID (ORAL)	NPD	NPD
MELOXICAM (ORAL)	PDL	PDL
NABUMETONE (ORAL)	PDL	NPD
NAPROXEN (ORAL)	PDL	PDL
OXAPROZIN (ORAL)	PDL	PDL
PIROXICAM (ORAL)	PDL	PDL
SULINDAC (ORAL)	PDL	PDL
TOLMETIN (ORAL)	PDL	NPD
ZIPSOR (ORAL)	NPD	NPD

Dr. LeeAnn Griffin of Pfizer spoke on behalf of Celebrex.

Dr. Wales made a motion to accept all of the recommendations with the exception of Celebrex, which she moved should be given preferred status. Dr. Brewer seconded the motion. The motion passed 9-1, with Dr. Minor being the sole vote against the motion.

ANALGESICS/ANESTHETICS, TOPICAL

Dr. Liles stated that there was no new clinical information to present on the drugs in this class.

He presented the following PDL recommendations:

Drug	Current PDL Status	Provider Synergies Recommendations
FLECTOR (TOPICAL)	PDL	NPD
LIDODERM (TOPICAL)	PDL	PDL
VOLTAREN (TOPICAL)	PDL	PDL

Mark Rubino of Endo waived his time to speak on behalf of Lidoderm, but did speak on behalf of Voltaren gel. Mr. Rubino inquired as to the quantity limits that DOM has on this drug. Ms. Clark noted that this issue has been addressed and resolved.

Dr. Tina Dancer, MSL from King, spoke on behalf of Flector.

Dr. Minor asked Dr. Liles for the rationale of the recommendation to remove Flector from the PDL. Dr. Liles noted that this was primarily a financially driven recommendation due to the higher cost of this drug compared to Voltaren gel.

Dr. Minor made a motion to continue to have all three drugs on the PDL. The motion was seconded by Dr. Harper and approved unanimously.

ANALGESICS, NARCOTIC – SHORT ACTING

Dr. Liles presented a brief overview of two new drugs in this class. Onsolis is a buccal form of fentanyl indicated for breakthrough cancer pain. Nucynta is a new compound indicated for moderate to severe acute pain. He presented a clinical trial showing Nucynta to be non-inferior to oxycodone with the former having fewer adverse GI effects.

Dr. Liles made the following recommendations to the Committee:

Drug	Current PDL Status	Provider Synergies Recommendations
APAP / CODEINE (ORAL)	PDL	PDL
BUTALBITAL COMPOUND W/CODEINE (ORAL)	PDL	NPD
CODEINE (ORAL)	PDL	PDL
DARVON-N (ORAL)	NPD	NPD
DIHYDROCODEINE / APAP / CAFFEINE (ORAL)	PDL	PDL
DILAUDID LIQUID (ORAL)	NPD	NPD
FENTANYL (BUCCAL)	NPD	NPD
FENTORA (BUCCAL)	NPD	NPD
HYDROCODONE / APAP (ORAL)	PDL	PDL
HYDROCODONE / IBUPROFEN (ORAL)	PDL	PDL
HYDROMORPHONE (ORAL)	PDL	PDL
IBUDONE (ORAL)	PDL	PDL
LEVORPHANOL (ORAL)	NPD	NPD
MEPERIDINE (ORAL)	PDL	PDL
MORPHINE IR (ORAL)	PDL	PDL
NUCYNTA (ORAL)	NPD	NPD
OPANA (ORAL)	NPD	NPD
OXYCODONE (ORAL)	PDL	PDL
OXYCODONE / APAP (ORAL)	PDL	PDL
OXYCODONE / ASA (ORAL)	PDL	PDL
OXYCODONE / IBUPROFEN (ORAL)	PDL	PDL
PANLOR DC (ORAL)	NPD	NPD
PENTAZOCINE / APAP (ORAL)	PDL	PDL
PENTAZOCINE / NALOXONE (ORAL)	PDL	NPD
PROPOXYPHENE (ORAL)	PDL	NPD
PROPOXYPHENE / APAP (ORAL)	PDL	PDL
REPREXAIN (ORAL)	NPD	NPD
TRAMADOL (ORAL)	PDL	PDL
TRAMADOL / APAP (ORAL)	PDL	PDL
ZAMICET (ORAL)	NPD	NPD

Dr. Brian Macomson of J&J presented information on Nucynta.

Dr. Scott Harrison, an ENT from Jackson, spoke in favor of having Zamicet on the PDL.

Dr. Minor asked about the availability of hydrocodone/APAP liquid. Dr. Liles noted that there are quite a few generics available.

Dr. Minor made a motion to accept the PDL as presented. The motion was seconded by Mr. Hicks. The motion passed unanimously.

ANALGESICS, NARCOTIC – LONG ACTING

Dr. Liles stated that there was no significant new clinical information to report in this class.

He then presented the following recommendations to the Committee:

Drug	Current PDL Status	Provider Synergies Recommendations
AVINZA (ORAL)	NPD	NPD
DURAGESIC MATRIX (TRANSDERM.)	NPD	NPD
EMBEDA (ORAL)	NPD	NPD
FENTANYL (TRANSDERM)	PDL	PDL
KADIAN (ORAL)	PDL	PDL
METHADONE (ORAL)	PDL	PDL
MORPHINE ER (ORAL)	PDL	PDL
OPANA ER (ORAL)	NPD	NPD
OXYCODONE ER (ORAL)	NPD	NPD
OXYCONTIN (ORAL)	NPD	NPD
RYZOLT (ORAL)	NPD	NPD
ULTRAM ER (ORAL)	NPD	NPD

Mark Rubino of Endo spoke on behalf of Opana ER.

Dr. Minor made a motion to approve the PDL as recommended. The motion was seconded by Dr. Wales and was passed unanimously.

Dr. Minor excused herself from the meeting at 11:45am.

SKELETAL MUSCLE RELAXANTS

Dr. Liles stated that there was no significant new clinical information to report for this class.

He then presented the following recommendations to the Committee:

Drug	Current PDL Status	Provider Synergies Recommendations
AMRIX (ORAL)	NPD	NPD
BACLOFEN (ORAL)	PDL	PDL
CARISOPRODOL (ORAL)	NPD	NPD
CARISOPRODOL COMPOUND (ORAL)	NPD	NPD
CHLORZOXAZONE (ORAL)	PDL	PDL
CYCLOBENZAPRINE (ORAL)	PDL	PDL
DANTROLENE SODIUM (ORAL)	PDL	PDL
FEXMID (ORAL)	NPD	NPD
METHOCARBAMOL (ORAL)	PDL	PDL
ORPHENADRINE (ORAL)	PDL	NPD
ORPHENADRINE COMPOUND (ORAL)	PDL	NPD
SKELAXIN (ORAL)	NPD	NPD
SOMA 250 MG (ORAL)	NPD	NPD
TIZANIDINE (ORAL)	PDL	PDL

ZANAFLEX CAPSULES (ORAL)	NPD	NPD
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Dr. Leeland Lou of Acorda spoke on behalf of Zanaflex

Dr. Harper made a motion to accept the recommendations as presented. Dr. Wales seconded the motion, which then passed by a vote of 9-0.

ANTIHYPURICEMICS

Dr. Liles stated that this is the first time that the Committee has reviewed this class. He presented a brief overview of the mechanism of action and indications for the drugs in the class. Dr. Liles presented a comparison of allopurinol and Uloric, including two directly comparative clinical trials, FACT and APEX.

Dr. Liles presented the PDL recommendations to the Committee:

Drug	Current PDL Status	Provider Synergies Recommendations
ALLOPURINOL (ORAL)	NR	PDL
COLCHICINE (ORAL)	NR	PDL
COLCRYS (ORAL)	NR	NPD
PROBENECID (ORAL)	NR	PDL
PROBENECID / COLCHICINE (ORAL)	NR	PDL
ULORIC (ORAL)	NR	NPD

There was no public testimony.

Dr. Brewer made a motion to approve the recommendations. The motion was seconded by Dr. Wales. The motion was approved by a vote of 9-0.

ANTIEMETICS

Dr. Liles stated that there was no significant new clinical information to present on the drugs in this class.

He then presented the following PDL recommendations:

Drug	Current PDL Status	Provider Synergies Recommendations
ANZEMET (ORAL)	NPD	NPD
CESAMET (ORAL)	NPD	NPD
DRONABINOL (ORAL)	NPD	NPD
EMEND (ORAL)	NPD	NPD
GRANISETRON (ORAL)	NPD	NPD
MARINOL (ORAL)	NPD	NPD
ONDANSETRON / ODT (ORAL)	PDL	PDL
SANCUSO (TRANSDERMAL)	NPD	NPD

There was no public testimony.

Dr. Harper made a motion, seconded by Dr. Tingle, to approve the recommendations as presented. The motion passed by a vote of 9-0.

NUTRITIONALS, CALORIC AGENTS

Dr. Liles indicated that this was the first review of this class by the Committee. He stated that the recommendations were developed to ensure that a wide selection of the more commonly used types of nutritional products were included on the PDL.

Dr. Liles presented the following recommendations:

Drug	Current PDL Status	Provider Synergies Recommendations
BOOST (ORAL)	NR	PDL
BRIGHT BEGINNINGS (ORAL)	NR	PDL
CARNATION INSTANT BREAKFAST (ORAL)	NR	PDL
COMPLEAT (ORAL)	NR	NPD
DUOCAL (ORAL)	NR	PDL
ENSURE (ORAL)	NR	PDL
EO28 SPLASH (ORAL)	NR	NPD
FIBERSOURCE (ORAL)	NR	NPD
ISOSOURCE (ORAL)	NR	NPD
JEVITY (ORAL)	NR	NPD
JUVEN (ORAL)	NR	PDL
KINDERCAL (ORAL)	NR	NPD
NUTREN (ORAL)	NR	PDL
NUTRITIONAL SUPPLEMENT (ORAL)	NR	NPD
OSMOLITE (ORAL)	NR	PDL
PEDIASURE (ORAL)	NR	PDL
PEPTAMEN (ORAL)	NR	NPD
POLYCOSE (ORAL)	NR	PDL
PROMOD (ORAL)	NR	PDL
PROMOTE (ORAL)	NR	NPD
RESOURCE (ORAL)	NR	PDL
TOLEREX (ORAL)	NR	NPD
TWOCAL HN (ORAL)	NR	PDL
VITAL (ORAL)	NR	NPD

Ms. Clark noted that all of these products go through POS and require a PA.

Mr. Calvert asked about WIC funds. Ms. Clark responded that those funds should be exhausted prior to patients getting these products through Medicaid POS. Mr. Hicks suggested that HID work with WIC to coordinate coverage.

There was no public testimony.

Mr. Hicks made a motion to accept the recommendations as presented. The motion was seconded by Dr. Dickey and passed by a vote of 9-0.

Dr. Sorey excused himself from the remainder of the meeting.

Dr. O'Dell adjourned the meeting for lunch.

After lunch, Dr. O'Dell reconvened the meeting.

Ms. Clark introduced an advocate from the Mississippi Epilepsy Foundation to give a short presentation to the Committee. The advocate requested that DOM and the Committee put forth an effort to keep up on new AEDs entering the market. She also noted the Foundation's concern about switching patients' drugs from one manufacturer to another due to potential issues with bioavailability. Ms. Clark stated that DOM is meeting with the Epilepsy Foundation to address their concerns.

NEW DRUGS FOR REVIEW

BEPREVE – Ophthalmics for Allergic Conjunctivitis

Dr. Liles gave a brief overview of Bepreve. He made the recommendation that Bepreve be non-preferred.

There were no speakers.

Dr. Brewer made a motion to accept the recommendation. The recommendation was seconded by Dr. Tingle and approved by a vote of 8-0.

OZURDEX – Ophthalmic Anti-Inflammatories

Since this drug is implanted, it will not be covered by Medicaid pharmacy and, therefore, will not be reviewed for PDL consideration.

GELNIQUE – Bladder Relaxants

Dr. Liles made the recommendation that Gelnique be non-preferred.

Dr. Jeremy Findlinson of Watson presented information on Gelnique.

Dr. Harper made a motion to approve the recommendations as approved. Dr. Dickey seconded the motion, which was approved by a vote of 8-0.

ONGLYZA – Hypoglycemics, Incretin Mimetics/Enhancers

Dr. Liles gave a brief overview of this new DPP-IV inhibitor.

Dr. Liles made the recommendation that Onglyza be preferred.

Kris Washington of BMS deferred his testimony.

Dr. Dickey made a motion to accept the recommendation. The motion was seconded by Dr. Tingle and approved by a vote of 8-0.

ADCIRCA – PAH Agents, Oral

Dr. Liles gave a brief overview of this drug.

Dr. Liles made the recommendation that Adcirca be non-preferred.

There was no public testimony on this drug.

Dr. Brewer made a motion to accept the recommendation. The motion was seconded by Dr. Harper and approved by an 8-0 vote.

Dr. Minor rejoined the meeting at this time.

EFFIENT – Platelet Aggregation Inhibitors

Dr. O'Dell noted that he spoke with the manufacturer of this drug prior to presentation of the clinical trial data, but that this would have no impact on his review or recommendation.

Dr. Liles presented a brief overview of Effient.

Dr. Liles made the recommendation that Effient be non-preferred.

Becky Harmon of Lilly presented data on outcomes studies, metabolism and drug interactions of Effient.

Dr. Harper asked Dr. O'Dell for his opinion on Effient. Dr. O'Dell noted that he continues to use Plavix and will do so until there is more data available on Effient.

Dr. Wales asked how Medicaid would handle cases where patients are discharged from the hospital on Effient.

Dr. Dickey made a motion to accept the recommendation to make Effient non-preferred. Mr. Calvert seconded the motion. The motion was approved by a vote of 7-2 with Drs. Harper and Wales voting against approval.

FIBRICOR – Lipotropics, Other

Dr. Liles gave a brief overview of Fibracor and presented the recommendation to non-prefer Fibracor.

There were no speakers.

Dr. Minor made a motion to approve the recommendation. The motion was seconded by Dr. Dickey and approved by a vote of 9-0.

EXTAVIA – Multiple Sclerosis Agents

Dr. Liles gave a brief overview of Extavia and presented the recommendation to add it to the PDL.

Julia Compton of Novartis yielded her time back to the Committee.

Dr. Wales made a motion, seconded by Dr. Brewer, to accept the recommendation. This motion passed by a vote of 9-0.

LAMICTAL ODT, LAMICTAL XR, SABRIL – Anticonvulsants

Dr. Liles presented a brief overview of Lamictal ODT, Lamictal XR and Sabril. He then presented the recommendation to prefer Lamictal ODT and Lamictal XR and to non-prefer Sabril.

Dr. Angela Chandler of GSK spoke on behalf of Lamictal ODT and Lamictal XR.

Dr. Harper made a motion to accept the recommendation presented by Dr. Liles. Dr. Wales seconded the motion, which passed by a vote of 9-0.

SAPHRIS – Antipsychotics

Dr. Liles presented a brief overview of Saphris and gave the recommendation to prefer this new drug.

Toya Bowles, Merck MSL, yielded her time to the Committee.

Dr. Minor made a motion to approve the recommendation presented by Dr. Liles. The motion was seconded by Dr. Wales and passed by a vote of 9-0.

INTUNIV – Stimulants and Related Agents

Dr. Liles gave a brief overview of Intuniv. He then presented the recommendation to prefer Intuniv.

Jennifer Robinson of Shire yielded her time to the Committee.

Dr. Minor made a motion, seconded by Dr. Tingle, to accept the recommendation presented by Dr. Liles. The motion passed by a vote of 9-0.

EDLUAR – Sedative Hypnotics

Dr. Liles gave a brief overview of Edular and presented the recommendation to non-prefer this new drug. Dr. Brewer made a motion to accept the recommendation

presented by Dr. Liles. The motion was seconded by Dr. Harper and passed by a vote of 9-0.

OTHER BUSINESS

There was no other business.

NEXT MEETING DATE

Ms. Clark stated that the next P&T Committee meeting would be on March 9, 2010 with the subsequent meeting in April 2010.

ADJOURNMENT

There being no further business, Dr. O'Dell adjourned the meeting.