

# MISSISSIPPI DIVISION OF MEDICAID Pharmacy & Therapeutics Committee Meeting

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

February 28, 2017 10:00am to 5:00pm

# **MINUTES**

#### **Committee Members Present:**

Anne A. Norwood, CFNP, Ph.D.
Jeffrey A. Ali, M.D., M.Sc.
Logan Davis, Pharm.D., MBA
Deborah Minor, Pharm.D.
Jason Parham, M.D.
D. Stanley Hartness, M.D.
Maretta Walley, R.Ph., J.D.
Wilma Wilbanks, R.Ph.
Ryan Harper, Pharm.D.
Geri Lee Weiland, M.D.

#### **Committee Members Not Present:**

Steven V. Dancer, R.Ph. John Cook, M.D.

#### **Division of Medicaid Staff Present:**

Terri Kirby, B.S.Pharm., R.Ph., Pharmacy
Director
Cindy Noble, Pharm.D., MPH, Pharmacist III
Gail C. McCorkle, BS Pharm., R.Ph., Pharmacist
III
Chris A. Yount, MA, PMP, Staff Officer III

#### **Contract Staff/CHC Staff Present:**

Chad Bissell, Pharm.D., MBA Laureen Biczak, D.O. Jennifer Seymour, Project Coordinator Paige Clayton, Pharm.D. Shannon Hardwick, R.Ph.

#### Other Contract Staff Present:

Karen Powell, Pharm.D., Conduent
Felicia Lobrano, R.N., Conduent
Lee Ann Snow, R.N., Conduent
Ben Banahan, Ph.D., University of Mississippi
School of Pharmacy

#### I. Call to Order

Ms. Wilma Wilbanks, Chairperson, called the meeting to order at 10:02 a.m.

## II. Introductions

Ms. Terri Kirby, Mississippi Division of Medicaid (DOM) Pharmacy Director, welcomed the Pharmacy & Therapeutics (P&T) Committee and all guests in the audience.

She introduced Change Healthcare, 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. Kirby recognized DOM contractors in the audience, including Karen Powell, Felicia Lobrano and Lee Ann Snow from Conduent, and Dr. Ben Banahan from the University of the Mississippi School of Pharmacy's MS-DUR Program and Change Healthcare(CHC) contractors, Dr. Paige Clayton and Shannon Hardwick.

#### **III.** Administrative Matters

Ms. Kirby reminded guests that if they did not sign the sign-in sheet prior to entering the room, to please do so. She stated that copies of the agenda and the public comment guidelines are available at the sign-in table. She stated that there is 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, identification, and company affiliation when signing in. She stated that industry presenters are allowed 3 minutes per drug and that no handouts are permitted. Presenters are requested to sign in at least 10 minutes prior to start of meeting.

Ms. Kirby stated that any documents used in the meeting that are not marked confidential and proprietary will be posted on DOM's website (<a href="www.medicaid.ms.gov">www.medicaid.ms.gov</a>) after the meeting.

Ms. Kirby reviewed policies related to food and drink, cell phones and pagers, discussions in the hallways, and emergency procedures for the building.

Ms. Kirby stated that DOM aggressively pursues supplemental rebates. Mississippi is part of the Sovereign States Drug Consortium (SSDC) pool.

Ms. Kirby reviewed the voting procedure and reminded the Committee that, in accordance with the Mississippi Open Meetings Act, the minutes reflect each person's vote. She requested that the Chair announce the recommendation, motions, and the names of committee members making motions. The minutes for each P&T Committee meeting are posted to the DOM website (<a href="www.medicaid.ms.gov">www.medicaid.ms.gov</a>) within 30 days of the meeting. The meeting minutes will be posted no later than March 30, 2017. Decisions will be announced no later than April 1, 2017 on the DOM website.

Ms. Kirby stated that the P&T Committee works in an advisory capacity and that DOM is responsible for final decisions related to the PDL. She reviewed the meeting process. She stated that DOM takes into account recommendations from both the P&T Committee and the clinical contractor before making a final decision. She stated that the PDL is completely updated once per year; quarterly updates are implemented throughout the year.

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

# IV. Division of Medicaid Update

Ms. Kirby provided an update on the upcoming changes to the pharmacy reimbursement methodology, including the use of National Average Drug Acquisition Cost (NADAC).

# V. Approval of October 18, 2016 Meeting Minutes

Ms. Wilbanks asked for additions or corrections to the minutes from the October 18, 2016 meeting. There were no further additions or corrections. The minutes stand approved.

# 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 Q4 2016 was 96.3%.
- **B.** Dr. Biczak reviewed the Generic Percent Report; overall generic utilization for Q4 2016 was 86.7%.

## VII. Drug Class Announcements

Dr. Bissell reviewed the meeting format.

#### VIII. Public Comments

Philip DenBleyker from Allergan yielded his time back to the Committee.

Pratik Parikh from Sarepta Therapeutics spoke in favor of Exondys 51.

Dr. Amanda Witt from University of Mississippi Medical Center spoke in favor of Exondys 51.

Steven Zona from Janssen Scientific Affairs is testifying on Invokamet XR.

# IX. New Therapeutic Class Reviews

# A. Muscular Dystrophy Agents

CHC recommended that the following list be approved. Dr. Biczak spoke about the clinical trials for EXONDYS and reviewed CHC's PA criteria recommendations. A robust clinical discussion followed. Dr. Weiland moved to accept the recommendation. Dr. Ali seconded. Votes were taken, and the motion was carried by unanimous approval. The approved category is below.

| PREFERRED AGENTS | NON-PREFERRED AGENTS |
|------------------|----------------------|
|                  |                      |
|                  | EXONDYS (eteplirsen) |
|                  |                      |

# B. Ophthalmic, Dry Eye Agents

CHC recommended that the following list be approved. Dr. Minor moved to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion was carried by unanimous approval. The approved category is below.

| PREFERRED AGENTS                   | NON-PREFERRED AGENTS                                   |
|------------------------------------|--|
| RESTASIS droperette (cyclosporine) | RESTASIS Multidose (cyclosporine) XIIDRA (lifitegrast) |

# X. New Drug/New Generic Reviews

#### A. Onzetra

CHC recommended that Onzetra be made Non-Preferred in the Antimigraine Agents, Triptans category. Dr. Hartness moved to accept the recommendation. Dr. Davis seconded. Votes were taken, and the motion was carried by unanimous approval. The approved category is below.

| PREFERRED AGENTS    | NON-PREFERRED AGENTS            |
|---------------------|---------------------------------|
| ORAL                |                                 |
| RELPAX (eletriptan) | almotriptan                     |
| rizatriptan         | AMERGE (naratriptan)            |
| rizatriptan ODT     | AXERT (almotriptan)             |
| sumatriptan tablets | FROVA (frovatriptan)            |
|                     | IMITREX (sumatriptan)           |
|                     | MAXALT (rizatriptan)            |
|                     | MAXALT MLT(rizatriptan)         |
|                     | naratriptan                     |
|                     | TREXIMET (sumatriptan/naproxen) |

| PREFERRED AGENTS | NON-PREFERRED AGENTS  |
|------------------|---|
|                  | zolmitriptan  |
|                  | ZOMIG (zolmitriptan)  |
| NASAL            |   |
| sumatriptan      | IMITREX (sumatriptan)   |
|                  | ONZETRA Xsail (sumatriptan)   |
|                  | ZOMIG (zolmitriptan)  |
| INJECTABLES      |   |
| sumatriptan      | IMITREX (sumatriptan) SUMAVEL (sumatriptan) ZEMBRANCE (sumatriptan) |
| OTHER            |   |
|                  | ZECUITY PATCH (sumatriptan)   |

# **B.** Zurampic

CHC recommended that Zurampic be made Non-Preferred in the Hyperuricemia & Gout category. Dr. Minor moved to accept the recommendation. Dr. Parham seconded. Votes were taken, and the motion was carried by unanimous approval. The approved category is below.

| PREFERRED AGENTS       | NON-PREFERRED AGENTS   |
|------------------------|------------------------|
| allopurinol            | colchicine             |
| MITIGARE (colchicine)  | COLCRYS (colchicine)   |
| probenecid             | ULORIC (febuxostat)    |
| probenecid/colchicines | ZURAMPIC (lesinurad)   |
|                        | ZYLOPRIM (allopurinol) |

#### C. Invokamet XR

CHC recommended that Invokamet XR be made Non-Preferred in the Hypoglycemics, Sodium Glucose Cotransporter-2 Inhibitors category. Dr. Weiland moved to accept the recommendation. Dr. Hartness seconded. Votes were taken, and the motion was carried by unanimous approval. The approved category is below.

| PREFERRED AGENTS   | NON-PREFERRED AGENTS  |
|--|---|
| HYPOGLYCEMICS, SODIUM GLUCOSE COTRANSPORTER-2 INHIBITORS             |   |
| JARDIANCE (empagliflozin)  | FARXIGA (dapaglifozin) INVOKANA (canagliflozin)   |
| HYPOGLYCEMICS, SODIUM GLUCOSE COTRANSPORTER-2 INHIBITOR COMBINATIONS |   |
| SYNJARDY (empagliflozin/metformin)                                   | GLYXAMBI (empagliflozin/linagliptin) INVOKAMET (canaglifozin/metformin) INVOKAMET XR (canaglifozin/metformin) XIGDUO (dapaglifozin/metformin) |

## D. Relistor

CHC recommended that Relistor be made Non-Preferred in the Irritable Bowel Syndrome/Short Bowel Syndrome Agents/Selected GI Agents category. Dr. Harper moved to accept the recommendation. Dr. Ali seconded. Votes were taken, and the motion was carried by unanimous approval. The approved category is below.

| PREFERRED AGENTS                                    | NON-PREFERRED AGENTS  |
|---|---|
| IRRITABLE BOWL SYNDROME/SHORT BOWEL SYNDROME AGENTS |   |
| dicyclomine<br>hyoscyamine                          | alosetron∞  AMITIZA (lubiprostone)∞  BENTYL (dicyclomine)  GATTEX (teduglutide)  LEVSIN (hyoscyamine)  LEVSIN-SL (hyoscyamine)  LINZESS (linaclotide) ∞  LOTRONEX (alosetron) ∞  NUTRESTORE POWDER PACK (glutamine)  RELISTOR (methylnaltrexone)  ZORBTIVE (somatropin) ∞ |
| SELECTED GI AGENTS                                  |   |
|   | FULYZAQ (crofelemer) ∞ MOVANTIK (naloxegol)  RELISTOR(methylnaltrexone) VIBERZI (eluxadoline)   |

#### E. Bromsite

CHC recommended that Bromsite be made Non-Preferred in the Ophthalmic Anti-Inflammatories category. Dr. Hartness moved to accept the recommendation. Dr. Norwood seconded. Votes were taken, and the motion was carried by unanimous approval. The approved category is below.

| PREFERRED AGENTS          | NON-PREFERRED AGENTS        |
|---------------------------|-----------------------------|
| dexamethasone             | ACULAR LS (ketorolac)       |
| diclofenac                | ACUVAIL (ketorolac)         |
| DUREZOL (difluprednate)   | BROMDAY (bromfenac)         |
| FLAREX (fluorometholone)  | bromfenac                   |
| flurbiprofen              | BROMSITE (bromfenac)        |
| FML SOP (fluorometholone) | FML FORTE (fluorometholone) |
| ketorolac                 | ILEVRO (nepafenac)          |
| MAXIDEX (dexamethasone)   | LOTEMAX (loteprednol)       |
| prednisolone acetate      | NEVANAC (nepafenac)         |
| prednisolone NA phosphate | OCUFEN (flurbiprofen)       |
| VEXOL (rimexolone)        | PROLENSA (bromfenac)        |
|                           | PRED MILD (prednisolone)    |
|                           | PRED FORTE (prednisolone)   |
|                           | VOLTAREN (diclofenac)       |
|                           |                             |

#### XI. Other Business

A discussion on how to consider PDL placement of Biosimilar Drugs was presented by Dr. Biczak. She pointed out that when a biosimilar is introduced, it will have the same indications, route of administration and clinical data as the reference product, therefore CHC does not recommend clinical review when new biosimilars are made available. The recommendation is that preferred or non-preferred status relative to the reference drug be made by DOM based on the current placement of the reference drug and, if it is preferred, allowing DOM to adjust the preferred/non-preferred status of the reference drug and the biosimilar based on the net price. A robust discussion followed and the Committee expressed agreement for this plan.

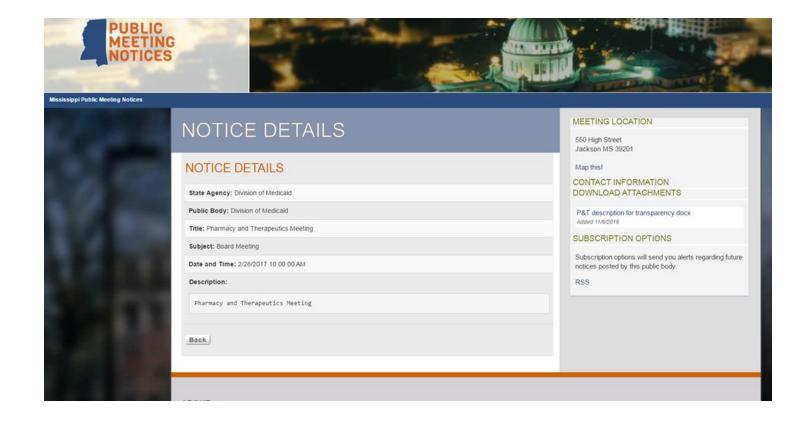
Stimulants & Related agents re-review information presented by Dr. Bissell, including information on the prior authorization activity in the month of January. Strattera continues to be available as brand name only. Generic Concerta availability is an ongoing issue for certain providers in the State. Discussion about the economic impact of opening all labelers of generic Concerta versus preferring the name brand product was held. Dr. Bissell noted that while DOM has the authority to change the PDL at any given time, this varying fluctuation is rare. Dr. Walley moved to accept the recommendation to allow for fluidity switching from generic to brand name (Concerta) based off current market availability. Dr. Ali seconded. Votes were taken, and the motion was carried by unanimous approval.

# XII. Next Meeting Date

The next meeting of the Pharmacy & Therapeutics Committee will be held on May 9, 2017 at 10:00 a.m. in the Woolfolk Building, Conference Center East, Room 145, in Jackson, Mississippi.

## XIII. Adjournment

The meeting adjourned at 11:53 a.m.





# Division of Medicaid Pharmacy and Therapeutics Committee Meeting

February 28, 2017

10:00 A.M.

Woolfolk Building; Room 145