



MISSISSIPPI DIVISION OF
MEDICAID

MISSISSIPPI DIVISION OF MEDICAID
Pharmacy & Therapeutics Committee Meeting
May 9, 2023
10:00am to 5:00pm

MINUTES

Committee Members Present:

Brad Gilchrist, PharmD
Clyde E. Glenn, MD
Karen Maltby, MD
Deborah Minor, PharmD, Co-Chair
Kim Rodgers, RPh
Spencer Sullivan, MD
Louise Turman, PharmD
Geri Lee Weiland, MD
Wilma Wilbanks, RPh, Chair

Committee Members Not Present:

James Benjamin Brock, MD
D. Stanley Hartness, MD

Other Contract Staff Present:

Tricia Banks, PharmD, Gainwell
Rob Coppola, Pharm.D. Med Impact
Jenni Grantham, PharmD, Magnolia
Matthew Lennertz, Pharm.D. Med Impact
Heather Odem, PharmD, UHC
Buddy Ogletree, PharmD, Aliant
Eric Pittman, PharmD, UM School of Pharmacy
Lew Anne Snow, RN Gainwell
Trina Stewart, PharmD, Molina

S. Caleb Williamson, PharmD

Division of Medicaid Staff Present:

Terri Kirby RPh, CPM, Pharmacy Director
Gail McCorkle, RPh, Pharmacy Team Lead
Dennis Smith, RPh, Pharmacy Team Lead
Chris A. Yount, MA, PMP, Office of Policy

CHC Staff Present:

Paige Clayton, PharmD
Shannon Hardwick, RPh
Jaqueline Hedlund, MD

Attendance Chart :

Committee Member	Oct 2021	Feb 2022	Aug 2022	Oct 2022	Feb 2023	May 2023
Brock		X	X		X	
Gilchrist	X	X	X	X	X	X
Glenn		X		X		X
Hartness	X	X	X	X	X	
Maltby	X		X	X		X

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Minor	X	X	X	X	X	X
Rodgers	X	X		X		
Sullivan	X	X	X	X	X	X
Turman	X	X	X	X		X
Weiland		X		X		X
Wilbanks	X	X		X	X	X
Williamson	X	X		X		

I. Call to Order

Ms. Wilbanks, chair, called the meeting to order at 10:04am.

II. Welcome and Introductions

Ms. Terri Kirby, Mississippi Division of Medicaid (DOM) Pharmacy Director, welcomed the Pharmacy & Therapeutics (P&T) Committee and all guests in the audience silence their phones. She stated that as of the first of May our total beneficiary count was 888,000, which means roughly 1 out of 3 Mississippians has Medicaid coverage.

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 had DOM contractors in the audience introduce themselves, including Lew Anne Snow and Dr. Tricia Banks from Gainwell, Dr. Jenni Grantham from Magnolia Health Plan, Dr. Heather Odem from United Healthcare, Dr. Trina Stewart from Molina, Dr. Buddy Ogletree from Aliant, Shannon Hardwick from Change Healthcare, Dr. Eric Pittman from UM School of Pharmacy and Drs. Rob Coppola and Matthew Lennertz from Med Impact.

III. Administrative Matters

Ms. Kirby reminded guests to register prior to each P&T Committee meeting via the electronic process available through the DOM website (www.medicaid.ms.gov). She stated that copies of the agenda and the public comment guidelines are available at the industry sign-in table. She stated that there is a separate sign in sheet for advocates and reminded guests that advocate presenters are limited to 3 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 the start of the 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 (www.medicaid.ms.gov) after the meeting.

Ms. Kirby reviewed policies related to food and drink, cell phones and laptop usage, 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. The SSDC is comprised of 14 state Medicaid programs. Change Healthcare is the current vendor for the SSDC and negotiates Supplemental Rebates on its behalf. In addition to supplemental rebates, Change Healthcare factors in the federal rebates paid by all manufacturers of the drugs listed on the PDL to leverage maximum savings for Medicaid. The importance of these federal rebates cannot be stressed enough.

Ms. Kirby reviewed the voting procedures 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 (www.medicaid.ms.gov) within 30 days of the meeting. The meeting minutes will be posted no later than June 9, 2023. The PDL decisions will be announced no later than June 1, 2023, on the DOM website and will go into effect July 1, 2023.

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 considers 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 review the contents of the folders provided to each Committee member. She reminded Committee members to please be sure to complete all the enclosed forms and leave them on the table after the meeting, of particular importance are the confidentiality and Conflict of Interest Forms. All Rebate information found in the cost sheets (in your red folder) is highly confidential per CMS and US Code 1396. Be mindful that the Conflict-of-Interest forms can be accessed by the public. For example, a true conflict of interest would be a situation where you are a paid speaker by a pharmaceutical manufacturer for a particular drug, --- If this is the case you are not allowed to participate in committee discussions about that drug or participate in any voting involving that drug. Also be aware of any *perceived* conflicts of interest. For example, if you are involved in any studies involving a drug or drug class, DOM's attorney has advised that participation in discussions about that drug or class or voting could be perceived as a conflict of interest and is not recommended.

IV. Approval of the February 14, 2023 Meeting Minutes and Decisions

Ms. Wilbanks asked for additions or corrections to the minutes from the February 14, 2023 meeting. There were no further additions or corrections. The motion to

approve was made by Dr. Weiland, seconded by Dr. Glenn, votes were taken, and the motion was adopted.

Ms. Wilbanks stated that due to the lack of a quorum at the February 14, 2023, all the recommendations made were provisional. She entertained a motion to accept all provisional decisions as final. Dr. Weiland made the motion to accept all provisional recommendations from the as final en bloc. Dr. Minor seconded. There was a brief parliamentary procedure discussion. Votes were taken and the provisional recommendations from the February 14, 2023, meeting were approved as final, unanimously.

V. PDL Compliance/Generic Percent Report Updates

Dr. Clayton explained the PDL Compliance and Generic Percent reports have not been run due to ongoing encounter claim collection by the State. All parties are optimistic that the reports will be ready for presentation at the August meeting.

VI. Drug Class Announcements

Dr. Clayton stated there were no Drug Class Announcements.

VII. Public Comments

1. Desola Davis from Gilead spoke in favor of Sunlenca.
2. Randy Ziss from Rhythm Pharmaceuticals spoke in favor of Imcivree.
3. Chrisy Davis, NP advocated for the addition of the antiobesity class as a Medicaid provider at the Metabolic Medicine of Mississippi Clinic.

Ms. Wilbanks called for a short recess at 10:37am.

Ms. Wilbanks called the meeting to order at 10:46am.

**VIII. Therapeutic Class
Anti-Obesity Agents, Select**

Change Healthcare recommended that the following list be approved. A robust clinical and financial discussion followed. The budgetary impact is extremely difficult to predict and model. Dr. Clayton explained that the modeling included in the cost sheets reflected a collaboration with the data presented to the Mississippi Medicaid DUR Board by the University of Mississippi Pharmacy School (DUR vendor) in December 2022. Dr. Clayton stated the intent was to have all patients requesting these products complete a prior authorization for use. Dr. Weiland moved to accept the recommendation. Dr. Minor seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

ANTIOBESITY SELECT AGENTS	
PREFERRED	Non Preferred
CONTRAVE (naltrexone/bupropion)	orlistat
SAXENDA (liraglutide)	XENICAL (orlistat)
WEGOVY (semaglutide)	

IX. New Drug Reviews

a. Alzheimer’s Agents- Leqembi (lecanemab)

Change Healthcare reviewed the drug clinically and financially. Change Healthcare recommended that this drug not be added to the PDL. Dr. Weiland moved to accept the recommendation. Mr. Rodgers seconded. Votes were taken, and the motion was adopted. The product will not be included on the PDL.

b. Antibiotics & Related, GI- Rebyota (fecal microbiota)

Change Healthcare recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Sullivan moved to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

ANTIBIOTICS (GI)	
Preferred	Non-Preferred
FIRVANQ (vancomycin) metronidazole neomycin tinidazole	AEMCOLO (rifaximin) DIFICID (fidaxomicin) FLAGYL (metronidazole) FLAGYL ER (metronidazole) paromomycin REBYOTA (fecal microbiota) TINDAMAX (tinidazole) VANCOCIN (vancomycin) vancomycin XIFAXAN (rifaximin)

c. Antibiotics, Vaginal- Xaciato Gel

Change Healthcare recommended that the following list be approved. A financial discussion followed. Dr. Glenn moved to accept the recommendation. Dr. Sullivan seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

ANTIBIOTICS (VAGINAL)	
Preferred	Non-Preferred
CLEOCIN OVULES (clindamycin) CLINDESSE (clindamycin) metronidazole vaginal	AVC (sulfanilamide) CLEOCIN CREAM (clindamycin) clindamycin cream METROGEL (metronidazole) NUVESSA (metronidazole) SOLOSEC (secnidazole) VANDAZOLE (metronidazole) XACIATO GEL (clindamycin)

d. Antineoplastics, Select Agents- Jayprica, Lytgobi, Krazati, Rezlidhia

Change Healthcare recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Hedlund reviewed each agent individually and recommended all agents be available to label and indications as they fall in line with the current practice guidelines. Dr. Sullivan moved to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

*ANTINEOPLASTICS – SELECTED SYSTEMIC ENZYME INHIBITORS	
Preferred	Non-Preferred
AFINITOR (everolimus)	ALECENSA (alectinib)
BOSULIF (bosutinib)	ALUNBRIG (brigatinib)
CAPRELSA (vandetanib)	AYVAKIT (avapritinib)
COMETRIQ (cabozantinib)	BALVERSA (erdafitinib)
COTELLIC (cobimetinib)	BRAFTOVI (encorafenib)
GILOTRIF (afatinib)	BRUKINSA (zanubrutinib)
ICLUSIG (ponatinib)	CABOMETYX (cabozantinib s-malate)
imatinib mesylate	CALQUENCE (acalabrutinib)
IMBRUVICA (ibrutinib)	COPIKTRA (duvelisib)
INLYTA (axitinib)	DAURISMO (glasdegib)
IRESSA (gefitinib)	ERIVEDGE (vismodegib)
JAKAFI (ruxolitinib)	ERLEADA (apalutamide)
MEKINIST (trametinib dimethyl sulfoxide)	erlotinib
NEXAVAR (sorafenib)	everolimus
ROZLYTREK (entrectinib)	EXKIVITY (mobocertinib)
SPRYCEL (dasatinib)	FARYDAK (panobinostat)
STIVARGA (regorafenib)	FOTIVDA (tivozanib)
SUTENT (sunitinib)	GAVRETO (pralsetinib)
TAFINLAR (dabrafenib)	GLEEVEC (imatinib mesylate)
TARCEVA (erlotinib)	GLEOSTINE (lomustine)
TASIGNA (nilotinib)	IBRANCE (palbociclib) ^{DUR+}
TURALIO (pexidartinib)	IDHIFA (enasidenib)
TYKERB (lapatinib ditosylate)	INQOVI (cedazuridine/decitabine)
vandetanib	INREBIC (fedratinib)
VOTRIENT (pazopanib)	JAYPIRCA (pirtobrutinib)
XALKORI (crizotinib)	KRAZATI (adagrasib)
XTANDI (enzalutamide)	KISQALI (ribociclib)
ZELBORAF (vemurafenib)	KOSELUGO (selumetinib)
ZYDELIG (idelalisib)	lapatinib ditosylate
ZYKADIA (ceritinib)	LENVIMA (lenvatinib) ^{DUR+}
	LORBRENA (lorlatinib)
	LUMAKRAS (sotorasib)
	LYNPARZA (olaparib) ^{DUR+}
	LYTGOBI (futibatinib)
	MEKTOVI (binimetnib)
	NERLYNX (neratinib maleate)
	NUBEQA (darolutamide)
	ODOMZO (sonidegib)
	ONUREG (azacitidine)
	ORGOVYX (relugolix)
	PEMAZYRE (pemigatinib)

PIQRAY (alpelisib)
 QINLOCK (ripretinib)
REZLIDHIA (lutasidenib)
 RETEVMO (selpercatinib)
 RUBRACA (rucaparib)
 RYDAPT (midostaurin)
 SCEMBLIX (asciminib)
 TABRECTA (capmatinib)
 TAGRISSO (osimertinib)
 TALZENNA (talazoparib)
 TAZVERIK (tazemetostat)
 TEPMETKO (tepotinib)
 TIBSOVO (ivosidenib)
 TRUSELTIQ (infigratinib)
 TUKYSA (tucatinib)
 UKONIQ (umbralisib)
 VERZENIO (abemaciclib)
 VITRAKVI (larotrectinib)
 VIZIMPRO (dacomitinib)
 VONJO (pacritinib)
 WELIREG (belzutifan)
 XATMEP (methotrexate)
 XOSPATA (gilteritinib)
 XPOVIO (selinexor)
 ZEJULA (niraparib)

e. Antiretroviral- Sunlenca

Change Healthcare recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Glenn moved to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

ANTIRETROVIRALS ^{DUR+}	
Preferred	Non-Preferred
CAPSID INHIBITORS	
	SUNLENCA (lenacapavir)

f. Colony Stimulating Factors- Rolvedo, Stimufend

Change Healthcare recommended the following list be approved. A robust financial discussion followed. Mr. Rodgers moved to accept the recommendation. Dr. Weiland seconded. Votes were taken on both the motion and amendment, and the motion was adopted. The approved category is as follows:

COLONY STIMULATING FACTORS

Preferred

FYLNETRA (pegfilgrastim)
NEUPOGEN Syringe (filgrastim)
NEUPOGEN Vial (filgrastim)

Non-Preferred

FULPHILA (pegfilgrastim)
GRANIX (tbo-filgrastim)
LEUKINE (sargramostim)
NEULASTA (pegfilgrastim)
NIVESTYM (filgrastim-aafi)
NYVEPRIA (pegfilgrastim-appf)
RELEUKO (filgrastim)
ROLVEDO (eflapegrastim)
STIMUFEND (pegfilgrastim-fpgk)
UDENYCA (pegfilgrastim-cbqv)
ZARXIO (filgrastim)
ZIEXTENZO (pegfilgrastim-bmez)

g. Cytokine & CAM Antagonists- Amjevita

Change Healthcare recommended that the following list be approved. A financial discussion followed. Dr. Clayton mentioned several biosimilars are in the pipeline due to launch this summer. Dr. Weiland moved to accept the recommendation. Dr. Sullivan seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

CYTOKINE & CAM ANTAGONISTS^{DUR+}

Preferred

ACTEMRA SYRINGE (tocilizumab)
ACTEMRA VIAL(tocilizumab)
AVSOLA (infliximab)
ENBREL (etanercept)
HUMIRA (adalimumab)
KINERET (anakinra)
methotrexate
ORENCIA CLICKJET(abatacept)
ORENCIA VIAL(abatacept)
OTEZLA (apremilast)
SIMPONI (golimumab)
TALTZ (ixekizumab)
XELJANZ IR (tofacitinib)

Non-Preferred

ACTEMRA ACTPEN (tocilizumab)
AMJEVITA (adalimumab)
ARCALYST (rilonacept)
CIMZIA (certolizumab)
COSENTYX (secukinumab)
ENTYVIO (vedolizumab)
ILARIS (canakinumab)
ILUMYA (tildrakizumab)
INFLECTRA (infliximab)
KEVZARA (sarilumab)
OLUMIANT (baricitinib)
ORENCIA SYRINGE (abatacept)
OTREXUP (methotrexate)
RASUVO (methotrexate)
REMICADE (infliximab)
RENFLEXIS (infliximab-abda)
RHEUMATREX (methotrexate)
RINVOQ (upadacitinib)
RINVOQ ER (upadacitinib)
SILIQ (brodalumab)
SKYRIZI (risankizumab)
SOTYKTU (deucravacitinib)
SPEVIGO (spesolimab)
STELARA (ustekinumab)

TREMFYA (guselkumab)
 TREXALL (methotrexate)
 XELJANZ Oral Solution (tofacitinib)
 XELJANZ XR (tofacitinib)

h. Factor Deficiency Agents- Hemgenix

Change Healthcare reviewed the drug clinically and financially. Change Healthcare recommended that this drug not be added to the PDL. Dr. Weiland moved to accept the recommendation. Dr. Glenn seconded. Votes were taken, and the motion was adopted. The product will not be included on the PDL.

i. Multiple Sclerosis- Briumvi, Tascenso ODT

Change Healthcare recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Clayton also stated that the generic version of brand Aubagio is now more cost effective for the State and should be preferred. Dr. Glenn moved to accept the recommendation. Dr. Sullivan seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

MULTIPLE SCLEROSIS AGENTS ^{DUR+}	
Preferred	Non-Preferred
AVONEX (interferon beta-1a)	AMPYRA (dalfampridine)
AVONEX PEN (interferon beta-1a)	AUBAGIO (teriflunomide)
BETASERON (interferon beta-1b)	BAFIERTAM (monomethyl fumarate)
COPAXONE 20mg (glatiramer)	BRIUMVI (ublituximab)
dalfampridine	COPAXONE 40mg (glatiramer)
dimethyl fumarate	EXTAVIA (interferon beta-1b)
GILENYA (fingolimod)	glatiramer
REBIF (interferon beta-1a)	GLATOPA (glatiramer)
REBIF REBIDOSE (interferon beta-1a)	KESIMPTA (ofatumumab)
teriflunomide	MAVENCLAD (cladribine)
TYSABRI (natalizumab)	MAYZENT (siponimod)
	OCREVUS (ocrelizumab)
	PLEGRIDY (interferon beta-1a)
	PONVORY (ponesimod)
	TASCENSO ODT (fingolimod)
	TECFIDERA (dimethyl fumarate)
	VUMERITY (diroximel fumarate)
	ZEPOSIA (ozanimod)

j. Ophthalmic Allergic Conjunctivitis- Verkazia

Change Healthcare recommended that the following list be approved. A robust clinical and financial discussion followed. Mr. Rodgers moved to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS ^{DUR+}

Preferred	Non-Preferred
ALREX (loteprednol) azelastine cromolyn ketotifen ^{OTC} olopatadine 0.1% olopatadine 0.2% ZADITOR (ketotifen) ^{OTC}	ALOCRIAL (nedocromil) ALOMIDE (Iodoxamide) BEPREVE (bepotastine) epinastine LASTACRAFT (alcaftadine) PATADAY (olopatadine) PATANOL (olopatadine) PAZEO (olopatadine) VERKAZIA (cyclosporine) ZERVIAE (cetirizine)

k. Stimulants- Xelstrym Patch

Change Healthcare recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Glenn moved to accept the recommendation. Dr. Weiland seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

STIMULANTS AND RELATED AGENTS ^{DUR+}

Preferred	Non-Preferred
LONG-ACTING	
ADDERALL XR (amphetamine salt combination) amphetamine salt combination ER CONCERTA (methylphenidate) dexmethylphenidate ER dextroamphetamine ER DYANAVEL XR SUSPENSION(amphetamine) methylphenidate CD (generic Metadate CD) methylphenidate ER (generic Concerta) methylphenidate ER Tabs (generic Ritalin SR) methylphenidate ER/LA Caps (generic Ritalin LA) QUILLICHEW (methylphenidate) QUILLIVANT XR (methylphenidate)	ADHANSIA XR (methylphenidate) ADZENYS XR ODT (amphetamine) ADZENYS ER SUSPENSION (amphetamine) amphetamine susp 24 hr (generic ADZENYS ER) APTENSIO XR (methylphenidate) AZSTARYS (serdexmethylphen/dexmethylphen) COTEMPLA XR-ODT (methylphenidate) DAYTRANA (methylphenidate) DEXEDRINE (dextroamphetamine) DYANAVEL XR tablet(amphetamine) FOCALIN XR (dexmethylphenidate) JORNAY PM (methylphenidate) methylphenidate ER caps (generic Aptensio XR) methylphenidate ER (generic Relexxi) MYDAYIS (amphetamine salt combination) RELEXXI (methylphenidate) RITALIN LA (methylphenidate) RITALIN SR (methylphenidate) VYVANSE (lisdexamfetamine)* VYVANSE CHEWABLE (lisdexamfetamine)* XELSTRYM patch (dextroamphetamine)

X. Other Business**XI. Division of Medicaid Update**

Terri Kirby stated she had three updates to discuss. Per House Bill 1125, which became law on 2/28/23, Medicaid is not allowed to cover gender reassignment procedures or drugs associated with this process for beneficiaries less than 18 years of age. DOM is in the process of determining the method(s) to operationalize this state law. SPA 23-0013 to cover select anti-obesity drugs will be submitted to CMS soon and hopeful that we will have a July 1, 2023, start date approved. This will be the last meeting at which Change Healthcare will present to you because their contract with Medicaid will end on June 30th.

“I would like to thank Change Healthcare for being an excellent partner to Medicaid. Their first contract with us began on October 20, 2011 when they were known as Goold Health Systems ... When their current contract ends they will have prepared Therapeutic Class Reviews, presented to your committee, managed the PDL and administered the supplemental drug rebate program for 11 years, 8 months and 10 days over half of those years they also were responsible for the Pharmacy Prior Authorization Unit and the Complex Pharmacy Care (CPC) program.”

On July 1, 2023 MedImpact will assume all of these responsibilities (except for the PA Unit/CPC program).

XII. Tentative 2023 Meeting Dates

- a. Tuesday, August 8, 2023
- b. Tuesday, October 24, 2023

XIII. Adjournment

The meeting adjourned at 12:22pm.