



MISSISSIPPI DIVISION OF MEDICAID
Pharmacy & Therapeutics Committee Meeting

October 18, 2022

9:00am to 5:00pm

MINUTES

Committee Members Present:

Clyde E. Glenn, MD
Brad Gilchrist, PharmD
D. Stanley Hartness, 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
S. Caleb Williamson, PharmD

Division of Medicaid Staff Present:

Terri Kirby RPh, CPM, Pharmacy
Director
Dennis Smith, RPh, Pharmacist III
Chris A. Yount, MA, PMP, Staff Officer III

CHC Staff Present:

Paige Clayton, PharmD
Ryan Fell, PharmD
Jacquelyn Hedlund, MD, MS
Shannon Hardwick, RPh

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Other Contract Staff Present:

Jenni Grantham, PharmD, Magnolia

Ashleigh Holeman, PharmD, Gainwell Technologies

Heather Odem, PharmD, UHC

Eric Pittman, PharmD, UMC School of Pharmacy

Trina Stewart, PharmD, Molina Health

Buddy Ogletree, PharmD, Alliant Health

Attendance Chart for State Fiscal Year 2022:

Committee Member	Aug 2021	Oct 2021	Feb 2022	May 2022
Brock				
Gilchrist	X	X		
Glenn	X			
Hartness	X	X		
Maltby	X	X		
Minor	X	X		
Rodgers	X	X		
Sullivan	X	X		
Turman		X		
Weiland				
Wilbanks	X	X		

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Williamson	X	X		
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I. Call to Order

Ms. Wilbanks, chair, called the meeting to order at 10:03am

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.

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 introduced DOM staff members Chris Yount and Dennis Smith. Ms. Kirby recognized DOM contractors in the audience, including Dr. Ashleigh Holeman from the new fiscal agent Gainwell Technologies, Dr. Jenni Grantham from Magnolia Health Plan, Dr. Heather Odem from United Healthcare, Dr. Eric Pittman from the UMC School of Pharmacy DUR and Shannon Hardwick from Change Healthcare. She also introduced the new Division of Medicaid Medical Director, Dr. Todd Smith.

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 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 (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.

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 (www.medicaid.ms.gov) within 30 days of the meeting. The meeting minutes will be posted no later than November 19, 2021. The PDL decisions will be announced no later than December 1, 2021 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. She reminded Committee members to please be sure to complete all of 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 are 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 as 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 August 9, 2022 Meeting Minutes

Ms. Wilbanks asked for additions or corrections to the minutes from the August 9, 2022 meeting. There were no further additions or corrections. The minutes stand approved.

V. PDL Compliance/Generic Percent Report Updates

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

- A. Dr. Clayton reviewed the PDL Compliance Report; overall compliance for 3q22 was 96.6%.
- B. Dr. Clayton reviewed the Generic Percent Report; overall generic utilization for 3q22 was 89.5%.

VI. Drug Class Announcements

Dr. Clayton stated the annual Brand/Generic preferred changes were evaluated and approved by DOM for implementation July 1, 2022.

VII. First Round Extractions Announced

Change Healthcare recommended that the following classes be extracted:

- Analgesics, Topical
- Antimigraine, CGRPs
- Hepatitis C Treatment
- Hypoglycemic – Incretin Mimetics
- Hypoglycemic – Insulin & Related Agents
- Immunologic Therapies for Asthma
- Miscellaneous

VIII. Public Comments

1. Alexandra Wallem from Eli Lilly spoke in favor of Mounjaro.
2. David Birdsong from Evofem Biosciences spoke in favor of Phexxi.
3. Laurie Van Deventer from Xeris spoke in favor of Gvoke.
4. Harvey Patrick from Supernus spoke in favor of Qelbree.
5. Jenna McGowan from AbbVie spoke in favor of Ubrelvy and Qulipta.
6. Lindsay Bebout from Indivior spoke in favor of Sublocade.
7. Arlene Mejia from Pierre Fabre spoke in favor of Hemangeol.
8. Sylvia Poulos from Recordati Rare Disorders spoke in favor of Carbaglu.
9. Stephanie Cotsonas from Kate Farms spoke in favor of removing caloric agents from the PDL as proposed or open access to all Caloric Agents.
10. Matthew Redmann from UCB spoke in favor of Fintepla.
11. Belkis Llerena from Novo Nordisk spoke in favor of Rybelsus.

Chairwoman Wilbanks called for a short recess at 11:12am.

Chairwoman Wilbanks called the meeting back to order at 11:26am.

IX. Second Round Extractions

Committee member Weiland extracted the Select Contraceptives, Vaginal class.

Committee member Minor extracted the Hypoglycemic, Treatment Class.

Committee member Minor extracted the Bladder Relaxant Preparations Class.

X. Motion for All Non-Extracted Categories to be Approved as Proposed

Change Healthcare recommended that the following list of classes be approved without extraction:

- Acne Agents
- Alpha1-Proteinase Inhibitor
- Alzheimer's Agents
- Analgesics, Narcotics- Short Acting
- Analgesics, Narcotics- Long Acting

- Androgenic Agents
- Angiotensin Modulators
- Antibiotics (GI)
- Antibiotics (Miscellaneous)
- Antibiotics (Topical)
- Antibiotics (Vaginal)
- Anticonvulsants
- Anticoagulants
- Antidepressant-Other
- Antidepressants- SSRIs
- Antiemetics
- Antifungals (Oral)
- Antifungals (Topical)
- Antifungals (Vaginal)
- Antihistamines, Minimally Sedating & Combinations
- Antimigraine Agents, Triptans
- Antineoplastics- Selected Systemic Enzyme Inhibitors
- Antiparasitics (Topical)
- Antiparkinson's Agents (Oral)
- Antipsychotics
- Antiretrovirals
- Antivirals (Oral)
- Antivirals (Topical)
- Aromatase Inhibitors
- Atopic Dermatitis
- Beta Blockers, Antianginals & Sinus Node Agents
- Bile Salts
- Bone Resorption Suppression & Related Agents
- BPH Agents
- Bronchodilators & COPD Agents
- Bronchodilators, Beta Agonists
- Calcium Channel Blockers
- Caloric Agents
- Cephalosporins & Related Antibiotics (Oral)
- Colony Stimulating Factors
- Cystic Fibrosis Agents
- Cytokine & CAM Antagonists
- Erythropoiesis Stimulating Proteins

- Factor Deficiency Products
- Fibromyalgia/Neuropathic Pain Agents
- Fluoroquinolones (Oral)
- Gaucher's Disease
- Genital Warts & Actinic Keratosis Agents
- Glucocorticoids (Inhaled)
- GI Ulcer Therapies
- Growth Hormones
- H. Pylori Combination Treatments
- Hepatitis B Treatments
- Hereditary Angioedema
- Hyperuricemia & Gout
- Hypoglycemics, Biguanides
- Hypoglycemics, DPP4s and Combinations
- Hypoglycemics, Meglitinides
- Hypoglycemics, Sodium Glucose Cotransporter-2 Inhibitors
- Hypoglycemics, TZDs
- Idiopathic Pulmonary Fibrosis
- Immune Globulins
- Immunosuppressive (Oral)
- Intranasal Rhinitis Agents
- Iron Chelating Agents
- IBS/SBS Agents/Selected GI Agents
- Leukotriene Modifiers
- Lipotropics, Other (Non-Statins)
- Lipotropics, Statins
- Movement Disorder Agents
- Multiple Sclerosis Agents
- Muscular Dystrophy Agents
- NSAIDs
- Ophthalmic Antibiotics
- Ophthalmic Anti-Inflammatories
- Ophthalmics for Allergic Conjunctivitis
- Ophthalmics for Dry Eye Agents
- Ophthalmics, Glaucoma Agents
- Opiate Dependence Treatments
- Otic Antibiotics
- Pancreatic Enzymes

- Parathyroid Agents
- Phosphate Binders
- Platelet Aggregation Inhibitors
- Platelet Stimulating Agents
- Prenatal Vitamins
- Pseudobulbar Affect Agents
- Pulmonary Antihypertensives
- Rosacea Treatments
- Sedative Hypnotics
- Sickle Cell Treatments
- Skeletal Muscle Relaxants
- Smoking Deterrents
- Steroids (Topical)
- Stimulants & Related Agents
- Tetracyclines
- Ulcerative Colitis & Crohn's Agent

Dr. Weiland made a motion that all non-extracted classes be accepted as recommended. Mr. Rodgers seconded. Votes were taken, and the motion was adopted. The changes are outlined here:

NEW PREFERRED DRUGS	
THERAPEUTIC CLASS	RECOMMENDED for PREFERRED STATUS
PLATELET STIMULATING AGENTS	PROMACTA POWDER PACK (eltrombopag olamine)
SKELETAL MUSCLE RELAXANTS	OZOBAX (baclofen)

XI. Extracted Therapeutic Class Reviews

a. Analgesics, Topical

Change Healthcare recommended lidocaine ointment be moved to preferred. A robust financial discussion followed. Dr.Sullivan moved to accept the

recommendation with the addition of be added as preferred. Dr. Hartness seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

b. Antimigraine, CGRPs

Change Healthcare modeled and reviewed the different confidential supplemental rebate offers with unique criteria allowances. Dr. Glenn moved to accept the recommendation with Qulipta verbiage all a step through of preferred injectable product. Dr. Weiland seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

PREFERRED AGENTS	NON-PREFERRED AGENTS
SINGLE PRODUCT REGIMENS	
BIKTARVY (bictegravir/emtricitabine/tenofovir) CABENUVA (cabotegravir/rilpivirine) DELSTRIGO (doravirine/lamivudine/tenofovir) DOVATO (dolutegravir/lamivudine) efavirenz/emtricitabine/tenofovir labeler GENVOYA (elvitegravir/cobicistat/emtricitabine/tenofovir) JULUCA (dolutegravir/rilpivirine) ODEFSEY (emtricitabine/rilpivirine/tenofovir AF) SYMFI (efavirenz/lamivudine/tenofovir) SYMFI-LO (efavirenz/lamivudine/tenofovir) TRIUMEQ (abacavir/lamivudine/ dolutegravir)	ATRIPLA (efavirenz/emtricitabine/tenofovir) COMPLERA (emtricitabine/rilpivirine/tenofovir) efavirenz/lamivudine/tenofovir efavirenz/lamivudine/tenofovir lo STRIBILD (elvitegravir/cobicistat/emtricitabine/tenofovir) SYMTUZA (darunavir/cobicistat/ emtricitabine/tenofovir)
	RUKOBIA (fostemsavir tromethamine ER)
CD4 DIRECTED HIV-1 INHIBITOR	
	TROGARZO (ibalizumab)

c. Hepatitis C Treatment

Change Healthcare recommended that the following list be approved. Dr. Fell further explained criteria allowances that could further enhance the confidential supplemental rebate offers. A robust clinical and financial discussion followed. Dr. Sullivan moved to accept the recommendation to accept the offers that require DOM to remove the sobriety and specialist criteria from the current prior authorization form for non-complicated Hepatitis C treatment. Dr. Weiland seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

d. Hypoglycemics, Incretin Mimetics/Enhancers

Dr. Minor commented that after looking at the cost sheets she understands why changes would not be in DOM’s best interest. She implored that manufacturers should come to the table to make better offers on the GLP 1 products in order to increase access for Medicaid beneficiaries. She did not make a motion. The class stands as unchanged.

Dr. Weiland made the motion to accept the recommendations. Mr. Rodgers seconded.

e. Hypoglycemics, Insulin & Related Agents

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

f. Immunologic Therapies for Asthma

Change Healthcare recommended that the following list be approved. A robust clinical discussion followed. Dr. Glenn moved to accept the recommendation including the healthcare administered products open for payment through pharmacy and medical billing. Dr. Weiland seconded. Votes were taken, and the motion was adopted. The approved category is as follows:

PREFERRED AGENTS	NON-PREFERRED AGENTS
DUPIXENT (dupilumab)	NUCALA AUTOINJECTOR (mepolizumab)
FASENRA PEN AUTOINJECTOR (benralizumab)	NUCALA SYRINGE (mepolizumab)
	XOLAIR SYRINGE (omalizumab)

g. Miscellaneous

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

h. Hypoglycemic Treatments no motion

i. Select Contraceptive Products

Change Healthcare performed a routine financial review and recommended that the following list be approved. A robust financial discussion followed. To note, the new additional preferred products will not be listed on the final PDL document; they are listed here as a reference to show changes. Dr. Sullivan moved to accept the recommendation. Dr. Williamson seconded. Votes were taken, and the motion was adopted. The preferred products in yellow will not be listed on the PDL document but are listed here for historical purposes. The approved category is as follows:

Dr. Weiland made the motion to prefer Phexxi. Dr. Hartness seconded the motion. Votes were taken, and the motion was adopted.

j. Bladder Relaxant Preparations

Dr. Minor made a motion to accept the class as presented with the addition of preferring Movantix. Dr. Fell reviewed the financial information with the Committee and agreed that the request was reasonable. Mr. Rodgers seconded. Votes were taken, and the motion was adopted

XII. Other Business

Anti obesity

XIII. Division of Medicaid Update

Terri Kirby stated there were two DOM updates. First, a reminder that DOM is in the process of actively transitioning to a new fiscal agent. DOM is moving from Conduent to Gainwell Technologies. This transition is set to take place in 2022. She encouraged everyone to read all of the information received from DOM concerning this transition in order to be prepared for changes and to ensure a smooth transition. She also mentioned that as a result of the transition, change requests require a complex approval process and are not being implemented as fast as usual. Delays in updating electronic PA criteria is expected. Secondly, she reminded the audience that DOM pays for COVID 19 vaccine administration fees, including the booster and down to age 10 as it is approved now. As a part of the

Prep Act for COVID, pharmacy providers will be able to use their Medicaid ID number in the prescriber field on flu shots. She encouraged providers to visit the DOM website for updates and to call anytime they have issues. She said there is something intangible that we lose when we are not allowed to meet in person. She is happy we were allowed to meet live.

Dr. Todd Smith stated that he is focused on easing the administrative burden on providers.

XIV. Tentative 2022 Meeting Dates

- a. Tuesday, February 15, 2022
- b. Tuesday, May 10, 2022
- c. Tuesday, August 9, 2022
- d. Tuesday, October 18, 2022

XV. Adjournment

The meeting adjourned at 11:45am