MISSISSIPPI DIVISION OF MEDICAID

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Pharmacy & Therapeutics Committee Meeting
May 14, 2024
10:00am to 2:00pm
Table 100, Flowood, MS
Live-streamed
MINUTES

Committee Members Present:
James Benjamin Brock, MD
Clyde E. Glenn, MD
D. Stanley Hartness, MD
Karen Maltby, MD
Deborah Minor, PharmD, Co-Chair
Louise Turman, PharmD
Geri Lee Weiland, MD
Wilma Wilbanks, RPh, Chair

Other Contract Staff Present:
Tricia Banks, PharmD, Gainwell
Jenni Grantham, PharmD, Magnolia
Richard Ogletree, PharmD, Telligen
Lew Anne Snow, RN Gainwell

Committee Members Not Present:
Brad Gilchrist, PharmD
Kim Rodgers, RPh
Spencer Sullivan, MD
S. Caleb Williamson, PharmD

Division of Medicaid Staff Present:
Catherine Brett, MD, MPH, FACPM
Terri Kirby, BSPharm, RPh, CPM
Dennis R. Smith, BSPharm, RPh

MedImpact Staff Present:
Greg Barabell, MD, CPC, FAAP
Chris Benton, PharmD
Matthew Lennertz, PharmD, MS, MBA

Attendance Chart:

Committee Member	Feb 2022	May 2023	Aug 2023	Oct 2023	Feb 2024	May 2024
Brock	X					X
Gilchrist	X	X	X	X	X	
Glenn		X		X		X
Hartness	X		X	X	X	X
Maltby		X	X	X		X
Minor	X	X	X	X	X	X
Rodgers		X	X	X		
Sullivan	X	X	X	X	X	
Turman		X	X	X	X	X
Weiland		X		X		X

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Wilbanks	X	X	X	X	X	X
Williamson			X		X	

I. Call to Order

Ms. Wilbanks, chair, called the meeting to order at 10:10 a.m.

II. Welcome and Introductions

Mrs. Kirby, Mississippi Division of Medicaid (DOM) Pharmacy Director, welcomed the Pharmacy & Therapeutics (P&T) Committee.

She introduced MedImpact representatives Drs. Greg Barabell - Lead Medical Director and Matthew Lennertz - Supplemental Rebate Manager. All parties seated at the table introduced themselves and gave a brief statement about their professional credentials and affiliations.

Mrs. Kirby had DOM contractors in the audience introduce themselves including Lew Anne Snow from Gainwell; Dr. Jenni Grantham from Magnolia Health Plan; Dr. Chris Benton from MedImpact; Dr. Tricia Banks from Gainwell; and Dr. Buddy Ogletree from Telligen.

Mrs. Kirby thanked the members for their service on the committee. She then stated that the population of Mississippi is nearly 3 million people and the decisions made by the committee impact the Medicaid beneficiaries, providers, and all taxpayers. At the end of April 2024, the total beneficiary count was 703,381 or roughly one in four people residing in Mississippi.

III. Administrative Matters

Mrs. Kirby reminded all guests in the room to sign in prior to leaving if they had not yet and reviewed policies related to food, drink, cell phones, and laptop usage. She reminded the members that the travel vouchers at their seats should be completed and left at the seat after the meeting. She stated that there is wireless internet available in the room and provided the password.

Mrs. Kirby reminded members that the Cost sheets in the red binder are highly confidential per CMS by US Code 1396. She explained to the members what constitutes a true conflict of interest and noted that if one exists for a member for a particular drug or topic, that member is not allowed to participate in committee discussions regarding that drug or participate in any voting involving that particular drug. She also reminded members they must be aware of any perceived conflicts of interest.

Mrs. 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 further elaborated that the decision of the committee regarding any limitations imposed on any drug or its use for a specified indication shall be based on sound clinical evidence found

in labeling, drug compendia, and peer reviewed clinical literature. Mrs. Kirby stated that the P&T Committee must conform to the Public Meetings Act.

Mrs. Kirby stated that DOM aggressively pursues supplemental rebates. She also stated that Mississippi is part of the Sovereign States Drug Consortium (SSDC) pool, which is comprised of 15 state Medicaid programs representing a total of approximately 15.5 million lives and a total drug spend of over $20 billion. These 15 states' pooled lives result in better supplemental rebate offers and more savings to Mississippi.

Mrs. Kirby reminded guests of the P&T Committee timeline and procedures. She stated that, 30 days prior to each meeting, online registration is opened on the website for industry and advocacy groups to register to attend the upcoming P&T meeting. She stated that approximately 2-3 weeks prior to the meeting, Committee members receive Therapeutic Class Reviews (TCR's) electronically from MedImpact. Mrs. Kirby noted that prior to the class reviews in today's meeting, there will be a public comment period. She explained that during this time, advocacy groups will have 3 minutes per group to speak and pharmaceutical industry designees will have 3 minutes per drug to speak.

Mrs. 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. She announced that the meeting minutes from this meeting will be posted to the DOM website (www.medicaid.ms.gov) no later than June 13, 2024. She also stated that implementation for PDL changes discussed today would take effect Monday, July 1, 2024. Mrs. Kirby stated that the PDL decisions will be posted on the DOM website 30 days prior to the go-live date and no later than Friday, May 31, 2024.

IV. Approval of the February 13, 2024, Meeting Minutes and Decisions

Mrs. Wilbanks asked for additions or corrections to the minutes from the February 13, 2024, meeting. There were no additions or corrections. Minutes were approved as distributed.

V. Preferred Drug List (PDL) Compliance/Generic Percent Report Updates

Dr. Lennertz explained that the PDL Compliance and Generic Percent reports are not available due to ongoing encounter claim collection by the State but that all parties are optimistic the reports will be ready for presentation at the August meeting.

VI. Public Comments

There were no speakers on behalf of advocacy or industry.

VII. New Drug / New Generic Reviews

a. Colony Stimulating Factors:

MedImpact recommended that Udenyca Onbody be placed as Non-Preferred on the PDL. A financial discussion followed. Dr. Glenn moved to accept the recommendation, Dr. Hartness seconded, votes were taken, and the motion was adopted.

The approved category details are provided in the table below with the changes highlighted in yellow.

COLONY STIMULATING FACTORS Preferred	Non-Preferred
FYLNETRA (pegfilgrastim) STIMUFEND (pegfilgrastim-fpgk) NEUPOGEN Syringe (filgrastim) NEUPOGEN Vial (filgrastim)	FULPHILA (pegfilgrastim) GRANIX (tbo-filgrastim) LEUKINE (sargramostim) NEULASTA (pegfilgrastim) NIVESTYM (filgrastim-aafi) NYVEPRIA (pegfilgrastim-apgf) RELEUKO (filgrastim) ROLVEDON (eflapegrastim) UDENYCA (pegfilgrastim-cbqv) UDENYCA ONBODY (pegfilgrastim-cbqv) ZARXIO (filgrastim) ZIEXTENZO (pegfilgrastim-bmez)

b. Cytokine & Cam Antagonists:

MedImpact recommended that Zymfentra be placed Non-Preferred on the PDL. A financial discussion followed. Dr. Minor moved to accept the recommendation, Dr. Glenn seconded, votes were taken, and the motion was adopted.

The changes to the PDL recommended by MedImpact are provided in the table below with the changes highlighted in yellow.

CYTOKINE & CAM ANTAGONISTS Preferred	Non-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)	ABRILADA (adalimumab-afzb) ACTEMRA ACTPEN (tocilizumab) AMJEVITA (adalimumab) ARCALYST (rilonacept) BIMZELX (bimekizumab-bkzx) CIMZIA (certolizumab) COSENTYX (secukinumab) COSENTYX VIAL (secukinumab) CYLTEZO (adalimumab-adbm) ENTYVIO (vedolizumab) ENTYVIO SQ (vedolizumab) HADLIMA (adalimumab) HULIO (adalimumab) HYRIMOZ (adalimumab) IDACIO (adalimumab)

	ILARIS (canakinumab) ILUMYA (tildrakizumab) INFLECTRA (infliximab) JYLAMVO (methotrexate) KEVZARA (sarilumab) LITFULO (ritlecitinib) OLUMIANT (baricitinib) OMVOH (mirikizumab-mrkz) ORENCIA SYRINGE (abatacept) OTREXUP (methotrexate) RASUVO (methotrexate) REMICADE (infliximab) RENFLEXIS (infliximab-abda) RHEUMATREX (methotrexate) RINVOQ (upadacitinib) RINVOQ ER (upadacitinib) SILIQ (brodalumab) SIMLANDI (adalimumab-ryvk) SKYRIZI (risankizumab) SOTYKTU (deucravacitinib) SPEVIGO (spesolimab) STELARA (ustekinumab) TREMFYA (guselkumab) TREXALL (methotrexate) TYENEE (tocilizumab-aazg) XELJANZ Oral Solution (tofacitinib) XELJANZ XR (tofacitinib) YUSIMRY (adalimumab) ZYMFENTRA (infliximab-dyyb)

c. Hypoglycemics, DPP4s and Combination:

MedImpact recommended that Zituvio be placed as Non-Preferred on the PDL. A financial discussion followed. Dr. Glenn moved to accept the recommendation, Dr. Weiland seconded, votes were taken, and the motion was adopted.

The approved category details are provided in the table below with the changes highlighted in yellow.

HYPOGLYCEMICS, DPP4s AND COMBINATION	
Preferred	**Non-Preferred**
JANUMET (sitagliptin/metformin) JANUMET XR (sitagliptin/metformin) JANUVIA (sitagliptin) JENTADUETO (linagliptin/metformin) TRADJENTA (linagliptin)	alogliptin alogliptin/metformin alogliptin/pioglitazone JENTADUETO XR (linagliptin/metformin) KAZANO (alogliptin/metformin) KOMBIGLYZE XR (saxagliptin/metformin)* NESINA (alogliptin)

	ONGLYZA (saxagliptin)* OSENI (alogliptin/pioglitazone) sitagliptin NR ZITUVIO (sitagliptin)

d. Immunologic Therapies For Asthma:

MedImpact recommended that Xolair Autoinjector be placed as Preferred on the PDL. A robust clinical and financial discussion followed. Dr. Weiland moved to accept the recommendation, Dr. Maltby seconded, votes were taken, and the motion was adopted.

The approved category details are provided in the table below with the changes highlighted in yellow.

IMMUNOLOGIC THERAPIES FOR ASTHMA	
Preferred	**Non-Preferred**
DUPIXENT (dupilumab)* FASENRA PEN AUTOINJECTOR (benralizumab) FASENRA SYRINGE (benralizumab) XOLAIR AUTOINJECTOR (omalizumab) XOLAIR SYRINGE (omalizumab) XOLAIR VIAL (omalizumab)	CINQAIR (reslizumab) NUCALA AUTOINJECTOR (mepolizumab)* NUCALA SYRINGE (mepolizumab)* TEZSPIRE (tezepelumab)

e. Muscular Dystrophy Agents:

MedImpact recommended that Agamree be placed as Non-Preferred on the PDL. A financial discussion followed. Dr. Glenn moved to accept the recommendation, Dr. Turman seconded, votes were taken, and the motion was adopted.

The approved category details are provided in the table below with the changes highlighted in yellow.

MUSCULAR DYSTROPHY AGENTS	
Preferred	**Non-Preferred**
EMFLAZA (deflazacort)	AGAMREE (vamorolone) AMONDYS 45 (casimersen) deflazacort ELEVIDYS (delandistrogene moxeparvovec-rokl) EXONDYS 51 (eteplirsen) VILTEPSO (viltolarsen) VYONDYS 53 (golodirsen)

f. Platelet Stimulating Agents:

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MedImpact recommended that Alvaiz be placed as Non-Preferred on the PDL. A financial discussion followed. Dr. Glenn moved to accept the recommendation, Dr. Weiland seconded, votes were taken, and the motion was adopted.

The approved category details are provided in the table below with the changes highlighted in yellow.

PLATELET STIMULATING AGENTS	
Preferred	**Non-Preferred**
NPLATE (romiplostim) PROMACTA (eltrombopag olamine)	ALVAIZ (eltrombopag) DOPTELET (avatrombopag maleate) MULPLETA (lusutrombopag) PROMACTA powder pack (eltrombopag olamine) TAVALISSE (fostamatinib disodium)

VIII. Older Business

Mrs. Kirby presented the current P&T Committee Bylaws, which date back to 2006 and requested that members review them an provide suggested edits within the next few weeks. Discussion ensued that encompassed many conversations involving requirements of committee members, term limits and board composition.

Mrs. Kirby provided a status of the possibility of removing the Antineoplastics-Selected Systemic Enzyme Inhibitors class from the PDL. Mrs. Kirby stated that given the numerous projects underway in the Gainwell (GWT) system and the implementation of the single Pharmacy Benefit Administrator (PBA) on July 1, 2024, this project would need to be postponed. She noted that while this project seemed simple, at first glance, there will need to be considerable work done by various vendors to complete the project. Further discussion will be required over the following months and that a January 1, 2025, implementation seemed more appropriate at this time.

IX. Division of Medicaid Update

Mrs. Kirby announced that on July 1, 2024, the single PBA will go-live. Gainwell will be the single pharmacy claims processor for all Medicaid claims, fee for service, MSCAN and MSCHIP. GWT will also assume all pharmacy prior authorization responsibilities. They have increased their pharmacy PA Unit staff to accommodate the anticipated increase in PA volume. Additional details and further information will be shared closer to go-live regarding the conversion of existing PAs on file with the CCOs' PBMs. Mrs. Kirby reviewed the printed April 2024 MS Medicaid Provider Bulletin and stressed the importance of pharmacists completing required updates to their billing systems so that all Medicaid pharmacy claims are billed and routed correctly to the Gainwell BIN: 025151 and PCN: DRMSPROD.

Mrs. Kirby stated that many MCO members currently receive their diabetic supplies through the pharmacy benefit, so to minimize disruption and to take advantage of 2024 rebate offers on these products, the Division will implement a Preferred

Product List for Diabetic Supplies on July 1, 2024 and subsequently, open coverage to pharmacy billing for all Medicaid members. The DME billing venue will remain open. Mrs. Kirby concluded by thanking the Committee for their service and dedication.

Dr. Brett provided an overview of her recent poster presentation at the American College of Preventive Medicine (ACPM) annual meeting which received first place in the Scientific Excellence category. The presentation stemmed from Drug Utilization Review (DUR) Board work and was titled, "*Risk Factors for Severe Maternal Morbidity Among Mississippi Medicaid Enrollees."*

X. Upcoming 2024 Meeting Dates

a. Tuesday, August 13, 2024
b. Tuesday, October 22, 2024

XI. Adjournment

The meeting adjourned at 11:32 a.m.

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