



MISSISSIPPI DIVISION OF
MEDICAID

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Pharmacy & Therapeutics Committee Meeting
August 8, 2023
10:00am to 5:00pm

MINUTES

Committee Members Present:

Brad Gilchrist, PharmD
D. Stanley Hartness, MD
Karen Maltby, MD
Deborah Minor, PharmD, Co-Chair
Kim Rodgers, RPh
Spencer Sullivan, MD
Louise Turman, PharmD
Wilma Wilbanks, RPh, Chair
S. Caleb Williamson, PharmD

Committee Members Not Present:

James Benjamin Brock, MD
Clyde E. Glenn, MD
Geri Lee Weiland, MD

Division of Medicaid Staff Present:

Terri Kirby RPh, CPM, Pharmacy Director
Gail McCorkle, RPh, Pharmacy Team Lead
Dennis Smith, RPh, Pharmacy Team Lead

MedImpact Staff Present:

Matthew Lennertz, PharmD, MS, MBA
Greg Barabell, MD, CPC, FAAP

Other Contract Staff Present:

Tricia Banks, PharmD, Gainwell
Jenni Grantham, PharmD, Magnolia
Heather Odem, PharmD, UHC
Lew Anne Snow, RN Gainwell
Trina Stewart, PharmD, Molina

Attendance Chart:

Committee Member	Feb 2022	Aug 2022	Oct 2022	Feb 2023	May 2023	Aug 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
Minor	X	X	X	X	X	X
Rodgers	X		X		X	X
Sullivan	X	X	X	X	X	X
Turman	X	X	X		X	X
Weiland	X		X		X	

Mississippi Pharmacy & Therapeutics Committee Meeting Minutes
February 14, 2023

Wilbanks	X		X	X	X	X
Williamson	X		X			X

I. Call to Order

Ms. Wilbanks, chair, called the meeting to order at 10:09 a.m.

II. Welcome and Introductions

Ms. Kirby, Mississippi Division of Medicaid (DOM) Pharmacy Director, welcomed the Pharmacy & Therapeutics (P&T) Committee. She stated that it was the first meeting in state fiscal year 2024 and shared the reappointment of Drs. Gilchrist, Minor, Sullivan, and Williamson for another 3-year term.

She reiterated that Change Healthcare is no longer DOM's Preferred Drug List (PDL) and Supplemental Rebate (SR) vendor and that MedImpact is the new vendor. She introduced MedImpact representatives Drs. Greg Barabell - Lead Medical Director, Matthew Lennertz- Supplemental Rebate Manager, and Chris Benton- Clinical Account Manager (starting in September). 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; and Dr. Trina Stewart from Molina.

Ms. 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 June, the total beneficiary count was 904,000 which means almost 1 out of 3 Mississippians had coverage. With the unwinding process that recently began, the total beneficiary count was 877,000 at the end of July. During the Public Health Emergency, Medicaid was prohibited from removing members.

III. Administrative Matters

Ms. Kirby reminded all guests in the room to sign in prior to leaving if they had not signed in yet and reviewed policies related to food, drink, cell phones, and laptop usage. She reminded members they had travel vouchers at their seats that should be completed and left at the seat after the meeting. She stated that there is wireless internet available in the room through the network "Medicaid router" and provided the password. She then provided safety information per the State Fire Marshall.

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. The decision of the committee regarding any limitations to be 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. Ms. Kirby stated that the P&T Committee must conform to the Public Meetings Act.

Ms. 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 14 state Medicaid programs. Ms. Kirby noted that Change Healthcare is the current vendor for the SSDC and negotiates Supplemental Rebates on its behalf. She stated that the red folders may look a little different since the new vendor, MedImpact, created them for this meeting. Ms. Kirby stated that in addition to supplemental rebates, MedImpact factors in the federal rebates paid by all manufacturers of the drugs listed on the PDL to leverage maximum savings for Medicaid.

Ms. 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. Ms. Kirby further noted that the names of companies who have met the registration limit is posted on the DOM P&T website so that any miscommunication between reps can be lessened or avoided. She stated that about 2-3 weeks prior to the meeting, Committee members receive Therapeutic Class Reviews electronically from MedImpact. Ms. 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.

Ms. Kirby stated that Dr. Lennertz will be in charge of the timer and after all speakers have presented, there will be a short break. She reminded guests that if any speaker wishes to leave so that another representative from their company can take their seat, this would be the time to do so. Ms. Kirby stated that if you leave, please sign-out as if you do not, your replacement will not be allowed in. Ms. Kirby then stated that Dr. Lennertz will be announcing all speakers today.

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. Ms. Kirby noted that the minutes for each P&T Committee meeting are posted to the DOM website (www.medicaid.ms.gov) within 30 days of the meeting. She announced that the meeting minutes from this meeting will be posted no later than September 8, 2023. Ms. Kirby stated that the PDL decisions will be announced no later than September 1, 2023 on the DOM website and will go into effect October 1, 2023.

IV. Approval of the May 9, 2023 Meeting Minutes and Decisions

Ms. Wilbanks asked for additions or corrections to the minutes from the May 9, 2023, meeting. Two corrections were noted as Dr. Gilchrist was added in the attendance chart and the word parliamentarian was changed to parliamentary on page 4 of the minutes. There were no further additions or corrections. The motion to approve was made by Dr. Gilchrist, seconded by Ms. Wilbanks, votes were taken, and the motion was adopted.

V. PDL Compliance/Generic Percent Report Updates

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

VI. Drug Class Announcements

Dr. Lennertz stated there were no Drug Class Announcements.

VII. Public Comments

1. Angela Bedenbaugh from Teva spoke in favor of Uzedy.
2. Madeline Shurtleff from Otsuka spoke in favor of Abilify Asimtufii.
3. Tenicia Talley from Sanofi spoke in favor of Altuviiiio.

Ms. Wilbanks called for a short recess at 10:38 a.m.
 Ms. Wilbanks called the meeting to order at 10:45 a.m.

VIII. New Drug Reviews

a. Antibiotics & Related, GI- Vowst (fecal microbiota)

MedImpact recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Hartness moved to accept the recommendation, Dr. Sullivan 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.

ANTIBIOTICS (GI) & RELATED AGENTS	
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) VOWST (fecal microbiota) vancomycin XIFAXAN (rifaximin)

b. Antimigraine Agents, Acute Treatment: CGRP Oral and Nasal-Zavzpret

MedImpact recommended that the following list be approved. A robust clinical and financial discussion followed. Dr. Williamson 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.

ANTIMIGRAINE AGENTS, ACUTE TREATMENT	
Preferred	Non-Preferred
CGRP ORAL AND NASAL	
NURTEC ODT (rimegepant)	UBRELVY (ubrogepant) ZAVZPRET (zavegepant)

c. Antipsychotics-Injectables, Atypicals- Abilify Asimtufii, Uzedy

MedImpact recommended that Abilify Asimtufii and Uzedy be added as non-preferred. A robust clinical and financial discussion followed. Dr. Minor recommended to change Abilify Asimtufii to preferred and moved to accept the other recommendations, Dr. Williamson 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.

ANTIPSYCHOTICS ^{DUR+}	
Preferred	Non-Preferred
INJECTABLE, ATYPICALS ^{DUR+}	
ABILIFY MAINTENA (aripiprazole) ARISTADA ER (aripiprazole lauroxil) ARISTADA INITIO (aripiprazole lauroxil) INVEGA HAFYERA (paliperidone) INVEGA SUSTENNA (paliperidone palmitate) INVEGA TRINZA (paliperidone) PERSERIS (risperidone) RISPERDAL CONSTA (risperidone)	ABILIFY (aripiprazole) ABILIFY ASIMTUFII (aripiprazole) GEODON (ziprasidone) olanzapine UZEDY (risperidone) ZYPREXA (olanzapine) ZYPREXA RELPREVV (olanzapine)

d. Factor Deficiency Products: Factor VIII- Altuviio

MedImpact recommended the following list be approved. A robust clinical and financial discussion followed. Dr. Minor moved to accept the recommendation, Dr. Williamson 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.

FACTOR DEFICIENCY PRODUCTS	
Preferred	Non-Preferred
Factor VIII	
ADVATE AFSTYLA	ADYNOVATE ALTUVIIIO

ALPHANATE FEIBA NF HEMOPIL M HUMATE-P KOATE KOGENATE FS KOVALTRY NOVOEIGHT NUWIQ RECOMBINATE WILATE XYNTHA XYNTHA SOLOFUSE	ELOCTATE ESPEROCT HEXILATE FS JIVI KCENRA OBIZUR VONVENDI
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e. GI Ulcer Therapies: Proton Pump Inhibitors- Konvomep

MedImpact recommended the following list be approved. A robust financial discussion followed. Mr. Rodgers moved to accept the recommendation, Dr. Williamson 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.

GI ULCER THERAPIES	
Preferred	Non-Preferred
PROTON PUMP INHIBITORS	
esomeprazole magnesium DR Capsule NEXIUM PACKET (esomeprazole) omeprazole Rx pantoprazole	ACIPHEX SPRINKLE (rabeprazole) ACIPHEX Tablet (rabeprazole) DEXILANT (dexlansoprazole) esomeprazole strontium DR Capsule KONVOMEP SUSPENSION (omeprazole/sodium bicarbonate) lansoprazole Rx NEXIUM Rx DR Capsule (esomeprazole) omeprazole sod. bicarb. PREVACID Rx (lansoprazole) PREVACID SOLU-TAB (lansoprazole) PRILOSEC RX (omeprazole) PRILOSEC SUSPENSION (omeprazole) PROTONIX DR (pantoprazole) PROTONIX PACKET (pantoprazole) Rabeprazole

f. Growth Hormone- Sogroya

MedImpact recommended the following list be approved. A robust clinical and financial discussion followed. Dr. Williamson moved to accept the recommendation, Dr. Sullivan 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.

GROWTH HORMONE^{DUR+}	
Preferred	Non-Preferred
GENOTROPIN (somatropin) NORDITROPIN (somatropin) NUTROPIN AQ (somatropin)	HUMATROPE (somatropin) OMNITROPE (somatropin) SAIZEN (somatropin) SEROSTIM (somatropin) SKYTROFA (lonapegsomatropin) SOGROYA (somapacitan) VOXZOGO (vosoritide) ZOMACTON (somatropin) ZORBTIVE (somatropin)

g. Hypoglycemics, Insulin and Related Agents- Rezvoglar

MedImpact recommended the following list be approved. A robust financial discussion followed. Mr. Rodgers 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.

HYPOGLYCEMICS, INSULIN AND RELATED AGENTS^{DUR+}	
Preferred	Non-Preferred
HUMULIN N, R, 70/30 VIAL ^{OTC} (insulin) HUMULIN R U500 KWIKPEN HUMULIN R U500 VIAL (insulin) HUMALOG MIX 50/50 VIAL HUMALOG MIX 75/25 VIAL insulin aspart insulin aspart flexpen insulin aspart mix insulin aspart mix flexpen Insulin lispro insulin lispro jr kwikpen insulin lispro kwikpen LANTUS SOLOSTAR & VIAL (insulin glargine) LEVEMIR FLEXPEN & VIAL (insulin detemir) TOUJEO (insulin glargine) TOUJEO MAX (insulin glargine)	AFREZZA (insulin) ADMELOG (insulin lispro) APIDRA (insulin glulisine) APIDRA SOLOSTAR (insulin glulisine) BASAGLAR (insulin glargine) FIASP (insulin aspart) HUMALOG JR (insulin lispro) HUMALOG KWIKPEN U100 (insulin lispro) HUMALOG KWIKPEN U200 (insulin lispro) HUMALOG MIX KWIKPEN (insulin lispro/ lispro protamine) HUMALOG VIAL (insulin lispro) HUMULIN N, 70/30 KWIKPEN (insulin) ^{OTC} insulin glargine LYUMJEV KWIKPEN (insulin lispro) LYUMJEV VIAL (insulin lispro) NOVOLIN N, R, 70/30 FLEXPEN (insulin) ^{OTC} NOVOLIN N, R, 70/30 VIAL (insulin) ^{OTC} NOVOLOG FLEXPEN & VIAL (insulin aspart) NOVOLOG MIX FLEXPEN & VIAL (insulin aspart/ aspart protamine) REZVOGLAR (insulin glargine) SEMGLEE (insulin glargine) TRESIBA (insulin degludec)

h. Lipotropics, Statins: Statins- Atorvaliq

MedImpact recommended the following list be approved. A robust financial discussion followed. Dr. Sullivan moved to accept the recommendation, Mr. Rodgers 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.

LIPOTROPICS, STATINS ^{DUR+}	
Preferred	Non-Preferred
STATINS	
atorvastatin	ALTOPREV (lovastatin)
lovastatin	ATORVALIQ SUSPENSION (atorvastatin)
pravastatin	CRESTOR (rosuvastatin)
rosuvastatin	EZALLOR SPRINKLE (rosuvastatin)
simvastatin	FLOLIPID (simvastatin)
	fluvastatin ER
	fluvastatin
	LESCOL (fluvastatin)
	LESCOL XL (fluvastatin)
	LIPITOR (atorvastatin)
	LIVALO (pitavastatin)
	MEVACOR (lovastatin)
	PRAVACHOL (pravastatin)
	ZOCOR (simvastatin)
	ZYPITAMAG (pitavastatin)

i. Movement Disorder Agents- Austedo XR

MedImpact recommended the following list be approved. A robust financial discussion followed. Mr. Rodgers moved to accept the recommendation, Dr. Williamson 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.

MOVEMENT DISORDER AGENTS ^{DUR+}	
Preferred	Non-Preferred
AUSTEDO (deutetrabenazine)	tetrabenazine (labeler 47335, 51224, 60505, 68180, 686820)
AUSTEDO XR (deutetrabenazine)	XENAZINE (tetrabenazine)
INGREZZA (valbenazine)	
tetrabenazine (all labelers except those listed as non-preferred)	

j. Pulmonary Antihypertensives: PDE5's- Liqrev

MedImpact recommended the following list be approved. A robust financial discussion followed. Dr. Sullivan moved to accept the recommendation. Dr. Williamson 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.

PULMONARY ANTIHYPERTENSIVES^{DUR+}	
Preferred	Non-Preferred
PDE5's	
sildenafil (generic Revatio) tablet tadalafil	ADCIRCA (tadalafil) LIQREV (sildenafil) suspension REVATIO (sildenafil) tablet REVATIO (sildenafil) suspension sildenafil (generic Revatio) suspension TADLIQ (tadalafil) suspension

IX. Division of Medicaid Update

Ms. Kirby stated she had 2 updates to discuss. The first update was in reference to the recently added Anti-Obesity Select Agents Class. Dennis Smith provided the update that requests and approvals are lower than expected and provided all the DOM documents that providers fill out in order to obtain a drug in this class. A robust discussion about the documents followed. Mr. Smith provided a second update to the committee, detailing an initiative approved by the DUR Board to encourage daily low-dose aspirin beginning in the late first trimester for women with a medical history of early-onset preeclampsia and preterm delivery or preeclampsia in more than one prior pregnancy. This initiative includes the development of a letter and flyer to be mailed to providers who treat pregnant women. A robust discussion about the documents followed.

X. Tentative 2023 Meeting Dates

- a. Tuesday, October 24, 2023

XI. Adjournment

The meeting adjourned at 11:56 a.m.