

**Virginia's Department of Medical Assistance Services
Pharmacy and Therapeutics Committee Meeting**

*600 East Broad Street – 7th Floor Conference Rooms
Richmond, Virginia 23219*

Thursday, October 24, 2013 - 10:00 a.m.

Welcome and Comments from DMAS' Director

Cynthia B. Jones

Call to Order

Tim Jennings, Pharm.D., Chairman

Drug Utilization Review (DUR) Board Update

Avtar Dhillon, M.D., DMAS DUR Board

Magellan Health Update

Debbie Moody, R.Ph., Clinical Manager

Approval of Minutes From April, 16th 2013 Meeting

P&T Committee Members

PDL Management

P&T Committee Members

• **Old Business**

- Long Acting Beta Agonists (LABA) in Children Update
- Narcotic Utilization – prescriptions from multiple prescribers
- Update on ADHD Medication Utilization in Foster Children Population
- Anticoagulant Therapy and Hospitalizations Due to Bleeding Episodes

• **Potential New Therapeutic Class Review (PDL Category)**

- Alzheimer's Agents (*contains Cholinesterase Inhibitors, NMDA Receptor Antagonist*) (*CNS*)
- Antibiotics, Inhaled (*Antibiotic-Anti-Infective*)
- Antibiotics, Vaginal (*Antibiotic-Anti-Infective*)
- Antiemetic/Antivertigo Agents(*delta-9THC derivatives, 5HT3 Receptor Blockers, NK-1 Receptor Antagonist, Other*) (*Gastrointestinal*)
- Bile Acid Salts(*Gastrointestinal*)
- H. Pylori Treatment (*Gastrointestinal*)
- Hereditary Angioedema (*Blood Modifiers potential new PDL Class*)
- Irritable Bowel Syndrome (*Gastrointestinal*)
- Ophthalmic Antibiotic/Steroid Combinations (*Ophthalmic*)
- Thrombopoiesis Stimulating Proteins (*Blood Modifiers potential new PDL Class*)

• **PDL Phase II – New Drug Review**

- Acne Agents, Topical
 - tretinoin microsphere
- Antimigraine Agents
 - zolmitriptan
- Antivirals, Topical
 - acyclovir ointment
- Bone Resorption Suppression And Related Agents
 - alendronate solution
- Cephalosporins
 - SupraxTM Capsule (new dosage form)
- Hypoglycemics (Incretin Mimetics/Enhancers, SGLT2, and TZDs)
 - OseniTM
 - NesinaTM
 - KazanoTM
 - InvokanaTM
 - Pioglitazone-Glimepiride
- Multiple Sclerosis Agents
 - RebifTM Rebidose
 - TecfideraTM

- Opiate Dependence Treatments
 - ZubsolvTM
 - buprenorphine-naloxone
- Short-Acting Narcotics
 - PrimlevTM
- Stimulants/ADHD Medications
 - ZenediTM
 - dextroamphetamine solution
- **PDL Phase I – Annual Review**
 - ***Antivirals***
 - Hepatitis C
 - ***Cardiac Medications***
 - Angiotensin Modulators
 - ACE Inhibitors and Renin Inhibitors
 - Angiotensin II Receptor Blockers
 - Angiotensin Modulators Combinations
 - Beta Blockers (includes combination products)
 - Calcium Channel Blockers (includes dihydropyridine & non-dihydropyridine agents)
 - Lipotropics
 - HMG CoA Reductase Inhibitors-Statins (includes combinations with niacin, CAI agent, CCBs)
 - Other (includes Bile Acid Sequestrants, CAI agent, Fibric Acid derivatives, Niacin, Omega 3 fatty acid, and Apolipoprotein B Synthesis Inhibitors)
 - Pulmonary Arterial Hypertension Agents (PDE-5 Inhibitors; Endothelin-1 agents and Prostacyclin analogues)
 - ***Central Nervous System***
 - Sedative Hypnotics and Other Hypnotics
 - ***Dermatologic Agents (previously part of Immunologic Agents)***
 - Atopic Dermatitis- topical (*previous name Topical Immunomodulators*)
 - ***Endocrine & Metabolic Agents***
 - Growth Hormones
 - Progestins for Cachexia
 - ***Gastrointestinal***
 - Histamine-2 Receptor Antagonists
 - Proton Pump Inhibitors
 - Ulcerative Colitis (oral and rectal)
 - ***Genitourinary***
 - Bladder Relaxants
 - BPH Agents (includes Alpha Blockers, Androgen Hormone Inhibitors and Phosphodiesterase (PDE) 5 Inhibitor for BPH treatment)
 - Phosphate Binders
 - ***Ophthalmics (moved from the spring meeting)***
 - Ophthalmic Glaucoma Agents (includes Alpha-2 Adrenergic, Beta-blockers, Carbonic Anhydrase Inhibitors, Prostaglandin Inhibitors)
 - Ophthalmic Anti-Inflammatory Agents
 - Ophthalmic Antibiotics (includes Quinolones & Macrolides)
 - Ophthalmics for Allergic Conjunctivitis (includes Ophthalmic Antihistamines & Mast Cell Stabilizers)

- **Respiratory**
 - Antihistamines – Minimally Sedating
 - Beta2 Adrenergic Agents – (includes nebulized and combinations)
 - Long-Acting
 - Short-Acting
 - COPD: (includes Anticholinergics, Bronchodilators and Phosphodiesterase 4 (PDE4) Inhibitors
 - Cough & Cold (includes 1st Generation Antihistamines, Antihistamines & Expectorant combination, Expectorants, Narcotic Antitussive & Decongestant combinations, Narcotic Antitussive & Expectorant combinations, Non-narcotic Antitussive & Decongestant combinations, Non-narcotic Antitussive, 1st Generation Antihistamine & Decongestant combinations) *(moved from the spring meeting)*
 - Glucocorticosteroids, Inhaled (includes nebulized solutions, metered dose inhalers and combinations)
 - Intranasal Rhinitis (includes Antihistamines and Corticosteroids)
 - Leukotriene Formation Inhibitors and Modifiers *(moved from the spring meeting)*

Confidential Meeting (Pricing Information Discussion)

**P&T Committee, DMAS & PS Staff
Pursuant to 42 USC §1396r-8**

PDL Recommendations and Vote

P&T Committee Members

Criteria Discussion of Phase II New Drugs*

P&T Committee Members

Criteria Discussion of PDL Phase I Drug Classes*

P&T Committee Members

Next Meeting – April 24, 2014

Tim Jennings, Pharm. D., Chairman

**Criteria discussions will be held for classes only if deemed PDL eligible by the P&T Committee during Drug Class Discussions.*

Oral Presentations: The P&T Committee in conjunction with the Department will be allocating time slots for interested parties to present scientific and clinical information on **only** the drug classes in Phase I which are scheduled for review at the October meeting and new drugs in PDL Phase II listed on the Agenda. **All presentations must include information published in a peer reviewed journal (per guidelines below) that is clinical in nature and based on scientific material. The references used to authorize presentations must be within the following timeframes:**

- PDL Phase I Annual Reviews – October 2012 to present
- New Drugs in PDL Phase I or II Drug Classes – October 2011 to present

No anecdotal accounts are to be given. Each speaker will be allocated no more than 3 minutes to present. The actual speakers will be decided by the Chairperson based on relevancy of the information. **Speakers must receive a confirmation number to verify the presentation is scheduled.**

Anyone interested in providing specific clinical information to the Committee at the meeting must submit an outline of discussion points, clinical references (within the stated guidelines above) and a written request to speak with the name/title of the presenter. Please send requested information to pdlinput@dmas.virginia.gov and dfmoody@magellanhealth.com by 5 p.m. EST on **Friday, September 27, 2013.**

Written information/comments: The P&T Committee will also accept written comments for consideration. Please send statements to pdlinput@dmas.virginia.gov by 5 p.m. EST on **September 27, 2013.**