

**LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS
Medicaid Pharmaceutical and Therapeutics Committee Meeting**

628 North Fourth Street
Baton Rouge, LA
Bienville Building
Room #118

November 02, 2011
MINUTES

MEMBERS PRESENT:

Damion Cummins, PhD
Julio Figueroa, MD
John E. Firestone, Jr., MD
Amy Givler, MD
Larry J. Hebert, MD
James E. Hussey, MD
Edward C. Mader, Jr, MD
Marty R. McKay, RPh
Paul Miller, MD
Melvin Murrill, MD
James Patterson, MD
Rep. Rogers Pope
Mohammad Suleman, MD
Leonard Weather, Jr, MD
Julie Wilkinson, PharmD
Rodney Wise, MD
Pamela Wiseman, MD
Neil Wolfson, MD

MEMBERS ABSENT:

Lolie C. Yu, MD
Conchetta Fulton, PharmD
Mary Gauthier-Lewis,
PharmD

Call to Order:

Dr. Larry Hebert, Chairman, called the meeting to order at 8:05 a.m. He introduced Dr. Kris Rawlings with Provider Synergies and Ms. Rebecca DeLaSalle, the new DHH legal counsel for the Committee.

Parliamentary Business:

- A. Roll Call.** Roll was called. Fourteen members were present. Absent were Dr. Fulton, Dr. Gauthier-Lewis, Dr. Mader, Dr. Suleman, Dr. Wiseman, Dr. Wolson and Dr. Yu.
- B. Approval of Minutes.** Mr. McKay offered a motion to approve the minutes of the April 27, 2011 meeting as submitted. Dr. Weather seconded the motion which passed.
- C. Executive Session – Ethics.** Dr. Hebert made a motion to go into Executive Session. Mr. McKay seconded the motion.

**DHH PHARMACY
PROGRAM STAFF
PRESENT:**

M. J. Terrebonne, RPh
Director
Rachel Broussard, RPh
Germaine Becks-Moody,
PhD, BHSF
Program Manager
Timothy Williams, BHSF
Program Manager

**OTHER DHH STAFF
PRESENT:**

Rebecca DeLaSalle, Attorney

CONTRACTORS

PRESENT:

Kris Rawlings, PharmD,
Provider Synergies
Melissa Dear, PharmD,
Northeast La
University School of
Pharmacy
Jennifer Pickett, Certified
Court Reporter

OTHERS PRESENT:

Presenters are listed in the minutes, and sign in sheets of others in attendance are available from DHH, Bureau of Health Services Financing, Pharmacy Benefits Section upon request.

Dr. Hebert stated the purpose of the Executive Session was to have Mr. Mike Dupree from the Louisiana Board of Ethics discuss with the Committee the ramifications of complying with the ethics laws. Executive Session permitted the members to Q and A with Mr. Dupree. Only Committee members and DHH Executive staff were permitted at the meeting. After a vote, with no objection, the Committee went into Executive Session.

After Executive Session, Dr. Hebert asked Dr. Becks-Moody to call the roll again as several members arrived after the first roll call. The count was eighteen members.

Dr. Hebert reported the Executive Session consisted of a presentation by Mr. Mike Dupree from the Louisiana Board of Ethics on the issues of ethics concerning the activities both professional and financial of the P&T members and provided Q and A for the members.

- D. Bylaws Subcommittee Appointment.** Dr. Hebert reported that the Bylaws needed updating, and there had been some recommendations for revisions. He appointed a Bylaws Subcommittee, and Mr. Marty McKay was appointed to serve as Chair. Other members appointed were Dr. Lollie Yu, Dr. Julie Wilkinson, and Dr. Melvin Murrill.
- E. Announcement of Election of Officers.** Dr. Hebert announced the Committee would have the election officers at the next April or May meeting (depending on date set). He said there were two reasons. First, there was a change in the times the Committee meets per year, and second, it will give the Governor, in his new term, time to appoint new members by that time.

Old Business – Reports Requested by the Committee During the 4/24/2011 Meeting:

- A. Coverage of New Drugs to be Listed on Preferred Drug List (PDL).** Ms. M. J. Terrebonne told the group one of the questions asked at the last meeting pertained to the coverage of new drugs to be listed on the PDL.

Ms. Terrebonne explained, “Under the federal statute, state Medicaid programs are required to reimburse for those FDA approved products for which a pharmaceutical company has entered into a rebate agreement with the federal government. There are just a limited number of excluded drug classes. In addition to that, the state statutes state that any drug approved by the United States Food and Drug Administration shall be added to the formulary as soon as it becomes commercially available. Additionally, the State Plan, which is the Louisiana Medicaid agreement with the federal government, states that FDA approved drugs are covered drugs if the drug manufacturer has signed the federal rebate agreement. When we established the PDL, the feds allowed the establishment of a prior authorization program with a PDL. There are only a selected number of therapeutic classes that are actually on the PDL and require prior authorization. Those drugs that are not in the therapeutic classes on the PDL are considered automatically prior authorized. So I just wanted to clarify that question. I believe there was a question last meeting. So that it would be clear to everyone that if there is an FDA approved drug that comes out, the Medicaid agencies are required to go ahead and cover those products.”

In response to a question from Dr. Givler, Ms. Terrebonne explained, “If the drug class is not one reviewed, then those drugs that are FDA approved and the drug manufacturer has signed the federal rebate are covered.”

- B. Notice of Intent Revising Length of a Prescription.** Ms. Terrebonne told the Committee that at the last meeting members inquired if DHH would consider lengthening prescription refills. She said she discussed that item with executive management and was approved to move forward with that change.

Ms. Terrebonne reported staff has begun the rule making and State Plan amendment process to allow the change for payment of prescription refills for drugs other than controlled substances not more than eleven times or more than one year after the issue date, and only to the extent indicated by the prescriber on the original prescription and as restricted by state and federal laws. The targeted effective date is February 20, 2012.

- C. EPO Agents – Report from DHH/PBM Drug Utilization Review Board.** Ms. Terrebonne reported Dr. Hebert met with the Drug Utilization Review Board members at their August meeting regarding guidelines and edits for ESA agents.

She reported, “At this meeting, Dr. Larry Humbles, with the University of Louisiana in Monroe College of Pharmacy presented data on Pharmacy claims billed for ESA’s in state fiscal year 2011. The members of the DUR Board were provided tables highlighting the number of pharmacy claims billed for ESA’s as well as the specialties of these prescribing providers. The use of EPO at doses greater than 20,000 units was discussed. Following up on this meeting, I believe, in June, 2011, the FDA considered a request to impose an upper limit on the recommended dose of EPO in chronic kidney disease. The FDA denied the request to impose an upper limit citing a lack of evidence. Per the FDA, the dose is dependent, among other things, on the hemoglobin target and treatment response with the dose potentially changing over time. For state fiscal year 2011, Medicaid pharmacy claims and prescription photocopies for EPO were reviewed. Most doses were from 20,000 units to 40,000 units per week. Additionally, it should be noted that we looked at the pharmacy outpatient claims and did not include a review of the utilization of these products in other outpatient areas such as dialysis centers. In June, 2011, the FDA also responded to a request to specify a safer target hemoglobin range for ESA use in chronic kidney disease. As a result, the product labeling for ESA’s, with regard to chronic kidney disease, was updated to reflect the risk associated with a target hemoglobin greater than 11 grams per deciliter. As a result, the DUR Board, at their meeting voted to review ESA pharmacy claims retrospectively, to send those prescribing providers who prescribe ESA agents, information regarding the FDA modified dosing recommendations for the use of ESA’s in chronic kidney disease as well as to send patient profiles.”

- D. Growth Hormones – Clinical Criteria Used by other Medicaid States.** Dr. Kris Rawlings, Provider Synergies, reported on the Committee request that Provider Synergies look at the growth hormone criteria that other states are using. Dr. Rawlings reported she surveyed 33 states which had publicly available either prior authorization criteria or prior authorization forms available on the web. Thirteen of these states are states in which Magellan and Medicaid administration are and Provider Synergies is a part of. So it’s beyond just states that Provider Synergies manages or is involved with pharmacists’ services. She reported that she found prior authorization criteria vary greatly from state to state. She said there are very lenient or non-existent programs on one hand and on the other there are very detailed comprehensive forms which require a lot of documentation of the underlying diagnosis, the labs identifying growth hormone deficiency as well as growth charts and many other pieces of documentation. There are also specialized forms

for adults, pediatrics, HIV, and the detail required on each of these forms varies. She reported she submitted a report to the Department of her findings.

New Business:

A. Therapeutic Classes Reviews/Drug Manufacturer Testimony. Thirty two (32) therapeutic classes in *Group Two* of the *Tenth Review Cycle* were reviewed. Dr. Hebert explained the Committee’s review procedures. Monograph summaries were sent to the Committee prior to the meeting. In accordance with state law and the P&T Committee’s Bylaws, the following provided public testimony or answered questions raised by the Committee during the Committee’s review of the therapeutic classes.

PRESENTER	REPRESENTING	DRUG/ISSUE
Alan Blout, MD	Forest Laboratories	Namenda
Paul Dammers, MD	NeuroMedical Center	Namenda
Julia Compton, PharmD	Novartis	Exelon Patch
Ann Wicker	Pfizer	Flector Patch
Jolyn Rosenthal	Forest	Viibryd
Paul Dammers , MD	NeuroMedical Center	Viibryd
Kirsten Mar	Eli Lilly	Cymbalta
Ann Wicker	Pfizer	Pristiq
Fran Kaiser, MD	Merck	Saphris
Michele Arledge, PharmD	Janssen	Invega Sustenna
Tarlyn Carlton, MD	Bristol Myers Squibb	Abilify
Tim Burke	Astra Zeneca	Seroquel XR
Guy Brannon, MD	Brentwood	Latuda
Manny Garcia, MD	Sunovion	Latuda
Julia Compton, PharmD	Novartis	Fanapt
Jennie Jantz	NAMI LA	Antipsychotics
Brittany Howard	Mental Health America of LA	Antipsychotics
James Barbee, MD	Bristol Myers Squibb	Antipsychotics
James Osborne	GSK	Ventolin HFA
Shane Perrilloux	TEVA	ProAir HFA
Julia Compton, PharmD	Novartis	Arcapta
Alan Blau	Forest Laboratories	Daliresp
Brad Clay	Amgen	Enbrel
Curt Griffin	UCB	Cimzia
Gary Riley	Abbott Labs	Humira
James Osborne	GSK	Advair; Flovent
Fran Kaiser, MD	Merck	Dulera
Sarah Caffery	Astra Zeneca	Symbicort; Pulmicort Flexhaler
Eileen Jaraez	Astellas Pharma	Protopic
Fran Kaiser, MD	Merck	Singulair
Tim Burke	Astra Zeneca	Vimovo
Christopher Murphy	GSK	Voltrient;Tykerb
John Rainey, MD	La Oncology Society	Oncology Agents, Oral
Anne Smallworth, MD	Bristol Myers Squibb	Sprycal
Lonnie Wen	Pfizer	Sutent
B. Provitula	Alcon	Pataday; Patanal

Robert Gonzales	Alcon	Pataday; Patanal
B. Provitula	Alcon	Moxezal; Vigamox
Robert Gonzales	Alcon	Moxezal; Vigamox
B. Provitula	Alcon	Ciprodex
Robert Gonzales	Alcon	Ciprodex
Hunter Hardner	La Sleep Foundation	Lunesta
Ann Wicker	Pfizer	Chantix
Kirsten Mar	Eli Lilly	Strattera
John M. Giblin, MD	Shionogi	Kapvay
Angela Day	Shire	Vyvanase; Intuniv
Michele Arledge, PharmD	Janssen	Xarelto
Fran Kaiser, MD	Merck	Vitreolis
Dan Petty	Vertex	Incivek
Robert Mahumunca		Incivek
Dr. Derek Tevada	Boehringer Ingelheim	Tradjenta

(Transcripts of testimonies are available from DHH, Bureau of Health Services Financing, Pharmacy Benefits Section, upon request.)

Class Review

Number

10-2;1. Alzheimer's Agents

Dr. Figueroa offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Suleman. Mr. McKay asked if the state was planning to place a state Maximum Allowable Cost on the generics in this class. Ms. Terrebonne responded that she would check with Myers and Stauffer, the contractor and report to the Committee at the next meeting. After discussion and manufacturers' presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Donepezil (Aricept)
 Donepezil (Aricept ODT)
 Memantine Sol (Namenda Sol)
 Memantine Tab (NamendaTab)
 Memantine Tab DS Pk (Namenda Tab DS Pk)
 Rivastigmine Cap (Exelon Cap)
 Rivastigmine Transdermal (Exelon Transdermal)

Committee Recommendations for the NPD are:

Donepezil (Generics only)
 Donepezil ODT (Generics only)
 Donepezil 23 mg (Aricept 23mg)
 Galantamine Tab
 Galantamine ER
 Galantamine Oral Sol (Generics; Razadyne)
 Rivastigmine Cap (Generic)
 Rivastigmine Oral Solution (Generic; Exelon Solution)

Note: Tacrine (Cognex) is no longer available.

10-2;2. Analgesics-Anesthetics, Topical

Dr. Wolfson offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Weather. Dr. Wilkinson asked why Qutenza or Capsicin patches were not included in the review. Dr. Rawlings explained that was not a covered product because it is a physician administered drug in the physician's office. After discussion and manufacturers' presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:
Diclofenac Sodium Gel (Voltaren)
Lidocaine Patch (Lidoderm)

Committee Recommendations for the NPD L are:
Diclofenac Epolamine Patch (Flector)
Diclofenac Sodium (Pennsaid)

10-2;3. Antidepressants, Other

Dr. Hussey offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. The pharmaceutical manufacturers' presentations and discussion followed.

Dr. Mader commented that several antidepressants have other indications, for example in the treatment of fibromyalgia. He asked would these drugs be reviewed later on in the fibromyalgia category. Dr. Rawlings explained that Louisiana does not currently have a fibromyalgia category. She clarified that each drug is only in one category so a conflict doesn't occur in the situation as stated in Dr. Mader's question.

Discussion continued on the Provider Synergies' recommendation to exclude Cymbalta from the PDL. Dr. Rawlings explained that Eli Lilly submitted its bid for Cymbalta after the deadline passed, and therefore could not be considered as it was out of the process.

Dr. Givler then offered a motion, seconded by Dr. Suleman, that the Committee reconsider Cymbalta at the spring meeting on the basis of Lilly's belated offer. Dr. Rawlings clarified that the rebate contracts are for one year, and Dr. Givler withdrew her motion until after the Committee voted on the recommendations presented for the class at today's meeting. A roll call vote followed with all members voting favorably, except Dr. Cummins. The motion passed.

Dr. Givler then offered a motion to reconsider Cymbalta at the spring meeting. Dr. Weather seconded the motion. Discussion followed, and Ms. Terrebonne clarified that the Cymbalta bid came in very late and was out of conformity with the bid process that requires bids to be submitted by the 30th of the month. Dr. Wolfson called for question. Roll call vote followed. There were nine yeas and eight nays. (Dr. Figueroa, Dr. Firestone, Dr. Hussey, Dr. Murrill, Mr. McKay, Dr. Patterson, Dr. Wilkinson and Dr. Wise voted nay.) The motion passed.

It was clarified the Committee would reconsider Cymbalta at its spring meeting. Dr. Rawlings explained it would be the same cost sheet with the Cymbalta offer added. There will be no solicitation for offers for the other drugs. Dr. Becks-Moody explained the process would be like having a new drug considered.

Committee Recommendations for the PDL are:

Bupropion IR
Bupropion SR
Bupropion XL
Mirtazapine (Generics only)
Mirtazapine ODT (Generics only)
Trazodone
Venlafaxine ER Cap (Effexor XR)
Venlafaxine IR Tab

Committee Recommendations for the NPD L are:

Bupropion HBr ER (Aplenzin)
Bupropion HCl IR (Wellbutrin)
Bupropion HCl SR (Wellbutrin SR)
Bupropion HCl XL (Wellbutrin XL)
Desvenlafaxine (Pristiq)
Duloxetine (Cymbalta)
Mirtazapine (Remeron)
Mirtazapine ODT (Remeron ODT)
Nefazodone
Selegiline Patch (Emsam)
Trazodone ER (Oleptro)
Venlafaxine ER Cap (Generic)
Venlafaxine ER Tab (Generic; Schwarz; Upstate)
Vilazodone (Viibryd)

10-2;4. Antidepressants, Selective Serotonin Reuptake Inhibitors (SSRIs)

Dr. Hussey offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Citalopram Tab (Generic)
Fluoxetine Cap (Generic)
Fluoxetine Tab 10mg
Fluoxetine Sol
Fluvoxamine Oral
Paroxetine Susp (Paxil)
Paroxetine CR Tab (Paxil CR)
Paroxetine Tab (Paxil)
Paroxetine Tab (Generic)

Sertraline Tab (Generic)

Committee Recommendations for the NPD L are:

Citalopram Sol
Citalopram Tab (Celexa)
Escitalopram Sol (Lexapro)
Escitalopram Tab (Lexapro)
Fluoxetine Tab 20 mg
Fluoxetine Cap (Prozac; Sarafem)
Fluoxetine DR Cap (Generic; Prozac Weekly)
Fluvoxamine CR (Luvox CR)
Paroxetine Susp (Generic)
Paroxetine CR Tab (Generic)
Paroxetine Mesylate (Pexeva)
Sertraline Conc (Zoloft; Generic)
Sertraline Tab (Zoloft)

10-2;5. Antihistamines, Minimally Sedating

Dr. Wolfson asked if all of the drugs mentioned in this category were available over the counter. Upon receiving an affirmative answer, he questioned why these drugs were being subjected to the PDL process at all and asked if the Committee could recommend deleting this class from the process. Discussions and clarifications followed. Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Weather. Ms. Terrebonne explained that the category could be removed from program coverage if after several months of state rulemaking, the federal government approved a state plan amendment encompassing this change. It was also explained the current agenda was recommending Committee voting on Provider Synergies' recommendations. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed with fourteen yeas and three nays by Drs. Cummings, Miller and Wolfson in a roll call vote.

Committee Recommendations for the PDL are:

Cetirizine Syr OTC (Generic)
Cetirizine Syr Rx (Generic)
Cetirizine Tab OTC (Generic)
Cetirizine-D OTC (Generic)
Fexofenadine Tab 30mg, 60mg, 180mg (Generic)
Fexofenadine-D 12-hour (Generic)
Fexofenadine-D 24-hour (Generic)
Loratadine Tab OTC (Generic)
Loratadine ODT Tab OTC (Generic)
Loratadine-D Tab (Generic)
Loratadine Syrup OTC (Generic)

Committee Recommendations for the NPD L are:

Acrivastin/Pseudoephedrine (Semprex-D)
Cetirizine Chewable Tab OTC (Generic)
Cetirizine Sol 5mg/5cc OTC (Generic)

Desloratadine Tab (Clarinet)
Desloratadine Chew OTC (Clarinet Chew OTC)
Desloratadine ODT (Clarinet ODT)
Desloratadine Syrup (Clarinet)
Desloratadine/Pseudoephedrine (Clarinet-D 12-hour)
Fexofenadine Tab 30mg, 60mg, 180mg (Allegra)
Fexofenadine ODT Tab (Allegra ODT)
Fexofenadine/Pseudoephedrine (Allegra-D 12-hour)
Fexofenadine/Pseudoephedrine (Allegra-D 24-hour)
Fexofenadine Syrup (Allegra Syrup)
Levocetirizine Tab (Generic; Xyzal)
Levocetirizine Syrup (Generic ; Xyzal)
Loratadine Cap OTC (Claritin)
Loratadine Syrup OTC (Claritin)
Loratadine Tab OTC (Claritin)
Loratadine Chewable Tab OTC (Claritin)
Loratadine ODT Tab OTC (Claritin)
Loratadine-D 12 hours Tab OTC (Claritin)
Loratadine-D 24 hours Tab (Claritin)
Loratadine-D Tab (Claritin)

10-2-6. Antihyperuricemics

Mr. McKay offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Weather. Upon a question from Dr. Givler, Dr. Rawlings stated a rebate offer for Colcrys was made, but the cost remained at a premium. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Allopurinol
Probenecid
Probenecid/Colchicine

Committee Recommendations for the NPDL are:

Colchicine (Colcrys)
Febuxostat (Uloric)

10-2;7. Antiparkinson's Agents

Mr. McKay offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Figueroa. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Benzotropine
Carbidopa /Levodopa

Carbidopa /Levodopa ER (Generic)
Levodopa/Carbidopa/Entacapone (Stalevo)
Pramipexole (Generic)
Ropinirole (Generic)
Selegiline Tab (Generic)
Trihexyphenidyl Elix
Trihexyphenidyl Tab

Committee Recommendations for the NPD L are:

Bromocriptine
Carbidopa /Levodopa ER (Sinemet CR)
Carbidopa /Levodopa ODT
Entacapone (Comtan)
Pramipexole (Mirapex)
Pramipexole ER (Mirapex ER)
Rasagiline (Azilect)
Ropinirole (Requip)
Ropinirole ER (Requip XL)
Selegiline Cap
Selegiline (Zelapar)
Tolcapone (Tasmar)

10-2;8. Antipsychotics

Mr. McKay offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Givler. Discussions and pharmaceutical manufacturers' presentations followed. Dr. Guy Brannen, Brentwood Hospital, stated the employees at the DHH Office of Behavioral Health mental health centers in Shreveport and Baton will not request PAs. He said if they don't see a drug on the list, they will not use it. Chairman Hebert, said he was shocked to hear those comments. He referred the speaker to Dr. Hussey who said this was not accurate to his knowledge. Dr. Hussey said that if the patient needs a particular medication it is the clinician's responsibility to perform the work necessary for the PA.

Dr. Rawlings replied, in response to a question, Seroquel XR was currently on the PDL, but was recommended for PA. When questioned further, Dr. Rawlings acknowledged she could not say if program savings would change in any way by adding Seroquel XR to the PDL as CMS had not released clear guidance on how the federal rebate would be handled with the XR or ER formulations of drugs. She stated that Provider Synergies had received a rebate offer on Seroquel XR, and it would be budget neutral to the state at this time. She acknowledged the rebate offer had been made timely.

Discussion followed, and the motion then passed unanimously with a roll call vote.

ORAL

Committee Recommendations for the PDL are:

Amitriptyline/Perphenazine Oral Sol (Generic)
Aripiprazole Discmelt (Abilify)
Aripiprazole Tab (Abilify)

Asenapine (Saphris)
Chlorpromazine
Clozapine (Generic)
Fluphenazine Elix (Generic)
Fluphenazine Tab (Generic)
Haloperidol Oral (Generic)
Haloperidol Lactate Conc (Generic)
Iloperidone Dskpak (Fanapt)
Iloperidone Tab (Fanapt)
Molindone (Moban)
Perphenazine
Pimozide (Orap)
Quetiapine (Seroquel)
Risperidone ODT (Generic)
Risperidone Sol (Generic)
Risperidone Tab (Generic)
Thioridazine
Thiothixene (Generic; Navane)
Trifluoperazine (Generic)
Ziprasidone (Geodon)

Committee Recommendations for the NPDL are:

Aripiprazole Oral Sol (Abilify Oral Sol)
Clozapine (Clozaril; Fazaclo)
Lurasidone (Latuda)
Olanzapine (Zyprexa; Zyprexa Zydis)
Olanzapine/Fluoxetine (Symbyax)
Paliperidone ER (Invega)
Quetiapine ER (Seroquel XR)
Risperidone ODT (Risperdal)
Risperidone Sol (Risperdal)
Risperidone Tab (Risperdal)

INJECTIONS

Committee Recommendations for the PDL are:

Aripiprazole (Abilify)
Fluphenazine Decanoate
Haloperidol Decanoate (Generic)
Haloperidol Lactate (Generic)
Risperidone (Risperdal Consta)
Ziprasidone (Geodon)

Committee Recommendations for the NPDL are:

Haloperidol Decanoate (Haldol)
Olanzapine (Zyprexa)
Olanzapine (Zyprexa Relprevv)
Paliperidone (Invega Sustenna)

10-2;9. Bile Acid Salts

Dr. Wolfson offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Weather. After no discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed by roll call vote with sixteen yeas and one nay by Dr. Miller.

Committee Recommendations for the PDL are:

Ursodiol Cap (Generic)

Committee Recommendations for the NPDL are:

Chenodiol (Chenodal)

Ursodiol Tab (Generic)

Ursodiol USP (Actigall)

Ursodiol (URSO 250)

Ursodiol (URSO Forte)

10-2;10. Bronchodilators, Beta Adrenergic Agents

Dr. Givler offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and pharmaceutical manufacturers' presentations, the motion passed unanimously with a roll call vote.

INHALATION

Committee Recommendations for the PDL are:

Albuterol Sulfate Nebulizer Sol 100mg/20ml (Generic)

Albuterol Sulfate Nebulizer Sol 2.5mg/3ml (Generic)

Albuterol Sulfate Nebulizer Sol 2.5mg/0.5ml (Generic)

Albuterol Sulfate Nebulizer Low-Dose (Accuneb)

Albuterol Sulfate HFA (ProAir HFA)

Albuterol Sulfate HFA MDI (Proventil HFA)

Committee Recommendations for the NPDL are:

Albuterol Sulfate HFA MDI (Ventolin HFA)

Albuterol Sulfate Nebulizer Low-Dose (Generic)

Arformoterol Inhalation Solution (Brovana)

Formoterol DPI (Foradil)

Formoterol Inhalation Solution (Perforomist)

Indacaterol for Inhalation (Arcapta)

Levalbuterol HCL Neb Sol (generic; Xopenex)

Levalbuterol HFA (Xopenex HFA)

Pirbuterol MDI (Maxair Autohaler)

Salmeterol Xinafoate (Serevent Diskus)

ORAL

Committee Recommendations for the PDL are:

Albuterol Sulfate Syrup

Albuterol Sulfate Tab
Albuterol Sulfate ER
Metaproterenol Sulfate Syrup
Terbutaline Sulfate

Committee Recommendations for the NPDL are:
Albuterol Sulfate ER Tab (Generic; Vospire ER Tab)
Metaproterenol Sulfate Tab

10-2;11.Bronchodilators, Anticholinergic (COPD)

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Weather. After discussion and pharmaceutical manufacturers' presentations, the motion passed by roll call vote with sixteen yeas and one nay by Dr. Murrill.

INHALATION

Committee Recommendations for the PDL are:
Albuterol Sulfate/Ipratropium MDI (Combivent)
Albuterol Sulfate/Ipratropium Nebulizer Sol (Duoneb)
Ipratropium Nebulizer
Ipratropium Inhalation Aerosol MDI (Atrovent HFA)
Tiotropium Inhalation Powder (Spiriva)

Committee Recommendations for the NPDL are:
Albuterol Sulfate/Ipratropium Nebulizer (Generic)

ORAL

Committee Recommendations for the PDL are:
None

Committee Recommendations for the NPDL are:
Roflumilast (Daliresp)

10-2;12.Cytokine and CAM Antagonists

Dr. Wolfson offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Mr. McKay. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed by roll call vote with sixteen yeas and one nay by Dr. Miller.

Committee Recommendations for the PDL are:
Adalimumab Inj (Humira IJ Kit; Humira Kit)
Certolizumab Pegol (Cimzia Kit; Syringe Kit)
Etanercept Inj (Enbrel Kit; Pen; Disp Syringe)

Committee Recommendations for the NPDL are:

Abatacept (Orencia Inj; Orencia Sub-Q)
Afacept Injection (Amevive)
Anakinra Injection (Kineret)
Golimumab (Simponi Pen; Disp Syringe)
Infliximab Injection (Remicade)
Tocilizumab (Actemra)

10-2;13.Glucocorticoids, Inhaled

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Beclomethasone MDI (QVAR)
Budesonide Respules 0.25mg; 0.5mg - **8 years old & under**
Budesonide Respules 0.25mg; 0.5mg (Pulmicort Respules) - **8 years old & under**
Budesonide Respules 1mg (Pulmicort Respules) - **8 years old & under**
Fluticasone MDI (Flovent)
Fluticasone MDI (Flovent HFA Inhaler)
Fluticasone/Salmeterol DPI (Advair Diskus)
Fluticasone/Salmeterol MDI (Advair HFA)
Mometasone DPI (Asmanex)
Mometasone/Formoterol MDI (Dulera)

Committee Recommendations for the NPDL are:

Budesonide DPI (Pulmicort Flexhaler)
Budesonide Respules 0.25mg; 0.5mg - **9 years old & over**
Budesonide Respules 0.25mg; 0.5mg (Pulmicort Respules) - **9 years old & over**
Budesonide Respules 1mg (Pulmicort Respules) - **9 years old & over**
Budesonide/Formoterol MDI (Symbicort)
Ciclesonide MDI (Alvesco)

Note: Flunisolide MDI (Aerobid) and Flunisolide MDI (Aerobid-M) are no longer available.

10-2;14.Immunomodulators, Atopic Dermatitis

Mr. McKay offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Suleman.

Dr. Murrill offered an amendment to also include Tacrolimus (Protopic). Dr. Suleman seconded the motion for the amendment. The amendment passed unanimously with a roll call vote. After discussion and pharmaceutical manufacturers' presentations, the original motion as amended passed unanimously with a roll call vote to include Elidel and Protopic on the PDL.

Committee Recommendations for the PDL are:

Pimecrolimus (Elidel)
Tacrolimus (Protopic)

Committee Recommendations for the NPDL are:
None

10-2;15. Intranasal Rhinitis Agents

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Murrill. Discussion followed.

Dr. Givler offered an amendment to add Flonase to the PDL. Dr. Wiseman seconded the motion. Discussion followed. The amendment passed unanimously in a roll call vote.

After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion to approve Provider Synergies recommendations as amended to include Flonase in the PDL passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:
Azelastine (Astelin; Astepro)
Fluticasone Propionate (Flonase)
Ipratropium Nasal
Mometasone (Nasonex)
Olopatadine (Patanase)

Committee Recommendations for the NPDL are
Azelastine (Generic)
Beclomethasone (Beconase AQ)
Budesonide Aqua (Rhinocort Aqua)
Ciclesonide (Omnaris)
Flunisolide
Fluticasone Furoate (Veramyst)
Fluticasone Propionate (Generic)
Triamcinolone (Generic; Nasacort AQ)

10-2;16. Leukotriene Modifiers

Dr. Wolfson offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. W eather. After discussion and pharmaceutical manufacturers' presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:
Montelukast Chew Tab (Singulair)
Montelukast Tab (Singulair)
Zafirlukast (Accolate)

Committee Recommendations for the NPDL are

Montelukast Gran Pack (Singulair Gran Pack)
Zafirlukast (Generic)
Zileuton CR (Zyflo CR)

10-2;17.Nonsteroidal Anti-Inflammatories (NSAIDS)

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Mr. McKay. After discussion and pharmaceutical manufacturers' presentations, the motion passed in a roll call vote with sixteen yeas and one nay by Dr. Miller.

Committee Recommendations for the PDL are:

Diclofenac Potassium Oral (Generic)
Diclofenac Sodium Oral (Generic)
Esomeprazole/naproxen (Vimovo)
Etodolac
Flurbiprofen
Ibuprofen Rx Susp (Generic)
Ibuprofen Rx Tab (Generic)
Indomethacin Cap (Generic only)
Indomethacin Susp (Indocin)
Ketoprofen
Ketorolac
Meloxicam Susp (Mobic)
Meloxicam Tab (Generic only)
Naproxen EC (Generic only)
Naproxen Sod (Generic Only)
Naproxen Susp (Generic only)
Naproxen Tab (Generic only)
Oxaprozin
Piroxicam (Generic; Feldene)
Sulindac

Committee Recommendations for the NPD are:

Celecoxib (Celebrex)
Diclofenac/Misoprostol (Arthrotec)
Diclofenac Potassium (Zipsor)
Diclofenac SR
Diflunisal (Generic; Dolobid)
Etodolac SR
Fenoprofen (Generic; Nalfon)
Indomethacin Rectal (Indocin)
Indomethacin ER Cap (Generic)
Ketoprofen ER
Ketorolac Nasal Spray (Sprix)
Meclofenamate
Mefenamic Acid (Generic; Ponstel)
Meloxicam Susp (Generic only)
Meloxicam Tab (Mobic)

Nabumetone
Naproxen EC (Naprosyn)
Naproxen Susp (Naprosyn)
Naproxen Tab (Naprosyn)
Naproxen 500mg (Naprelan)
Tolmetin Cap
Tolmetin Tab

10-2;18. Oncology Agents, Oral (*New Category*)

Dr. Weather offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Givler. Discussion followed.

There were many questions regarding availability, prior authorizations and other procedures regarding access to these drugs. Also Provider Synergies, in its cost savings estimates, estimated only 20% of the patients could be switched.

Dr. Rainey with the Louisiana Oncology Society expressed his concerns and those of his colleagues to the Committee. He commented there may or may not be rebate monies had from the process, but basically the prescribers are specialists, and the pharmacies used are specialty pharmacies (only about three or four in the state).

After discussion and pharmaceutical manufacturers' presentations, the motion passed in a roll call vote with sixteen yeas and one nay by Dr. Miller.

Dr. Hebert then asked the Committee what it would like to do at the next meeting regarding this class. Dr. Miller offered a motion, seconded by Dr. Wolfson, to re-discuss this class at the next meeting. The motion passed unanimously.

Discussion continued, and it was noted by Dr. Rawlings that no supplemental rebate offers were received for this class.

Dr. Miller inquired if the Committee could consider proposing tiered structures. Dr. Hebert replied affirmatively, but said that would come under other business.

In summary, this motion is to review this class again at the spring meeting with the information regarding this class and the impact on access as well as provider restrictions and possible roles for the DHH DUR Board. Dr. Rawlings responded to Ms. Terrebonne's question concerning the policies for this class in other TOPS states, and said Louisiana is one of three TOPS states using the PDL process for this class. She added that even large states, like Florida, are not reviewing this class because of its complexity.

Committee Recommendations for the PDL are:

Abiraterone acetate (Zytiga)
Capecitabine (Xeloda)
Dasatinib (Sprycel)
Erlotinib (Tarceva)

Everolimus (Afinitor)
Gefitinib (Iressa)
Imatinib (Gleevec)
Lapatinib (Tykerb)
Pazopanib (Votrient)
Sorafenib (Nexavar)

Committee Recommendations for the NPD L are:

Nilotinib (Tasigna)
Sunitinib malate (Sutent)
Vandetanib (Caprelsa)
Vemurafenib (Zelboraf)

10-2;19. Ophthalmic Antibiotic-Steroid Combos (New Category)

Dr. Givler offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Gentamicin /Prednisolone (Pred-G; Pred-G S.O.P.)
Neomycin/Polymyxin B/Dexamethasone
Sulfacetamide /Prednisolone Oint (Blephamide S.O.P.)
Sulfacetamide /Prednisolone Sol (Generic; Blephamide)
Tobramycin /Dexamethasone Oint (Tobradex)
Tobramycin /Dexamethasone Susp (Tobradex)
Tobramycin /Loteprednol (Zylet)

Committee Recommendations for the NPD L are:

Neomycin/PolymyxinB /Hydrocortisone
Neomycin/Bacitracin/PolymyxinB /Hydrocortisone
Tobramycin/Dexamethasone Susp (Generic)
Tobramycin /Dexamethasone ST (Tobradex ST)

NOTE: *Neomycin/Polymyxin B/ Prednisolone (Poly-Pred) is no longer available.*

10-2;20. Ophthalmic Antibiotics

Dr. Wolfson offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Mader. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Besifloxacin (Besivance)
Ciprofloxacin Oint (Ciloxan)

Ciprofloxacin Sol (Generic)
Erythromycin
Garamycin Drops
Garamycin Oint
Gatifloxacin 0.3% (Zymar)
Gentamicin Drops
Gentamicin Oint
Moxifloxacin (Moxeza; Vigamox)
Neomycin-Polymyxin-Bacitracin Oint
Ofloxacin Sol (Generic)
PolymyxinB/Trimethoprim (Generic; Polytrim)
Sulfacetamide (Generic; Bleph-10)
Tobramycin (Generic; Tobrex)

Committee Recommendations for the NPDL are:

Azithromycin (Azasite)
Bacitracin
Bacitracin Polymyxin B Oint
Gatifloxacin 0.5% (Zymaxid)
Levofloxacin (generic; Iquix; Quixin)
Natamycin (Natacyn)
Neomycin-Polymyxin-Gramacidin
Ofloxacin Sol (Ocuflax)

10-2;21.Ophthalmics For Allergic Conjunctivitis

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wilkinson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Cromolyn Sodium
Loteprednol (Alrex)
Olopatadine HCl (Pataday)

Committee Recommendations for the NPDL are:

Alcaftadine (Lastacaft)
Azelastine HC (Generic; Optivar)
Bepotastine (Bepreve)
Emedastine Difumarate (Emadine)
Epinastine (Generic; Elestat)
Lodoxamide Tromethamine (Alomide)
Nedocromil Sodium (Alocril)
Olopatadine HCl (Patanol)
Pemirolast Potassium (Alamast)

Note: Azelastine (Optivar) is now available as a generic.

10-2;22.Ophthalmic Anti-Inflammatories

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Dexamethasone (Generic; Maxidex)
Diclofenac
Fluorometholone 0.1% Oint (FML S.O.P.)
Fluorometholone 0.1% Susp (Generic)
Fluorometholone 0.25% Susp (FML Forte)
Flurbiprofen
Loteprednol Drops (Lotemax)
Loteprednol Oint (Lotemax)
Prednisolone Acetate 0.12% Sol (Generic; Pred Mild)
Prednisolone Acetate 1% (Generic)

Committee Recommendations for the NPDL are:

Bromfenac (generic; Bromday;Xibrom)
Difluprednate (Durezol)
Fluorometholone 0.1% Susp (FML)
Fluorometholone Acetate 0.1% Sol (Flarex)
Ketorolac (Generic; Acular)
Ketorolac LS (Generic; Acular LS)
Ketorolac (Acuvail)
Nepafenac (Nevanac)
Prednisolone Acetate 1% (Pred Forte)
Prednisolone Sodium Phosphate
Rimexolone (Vexol)

10-2;23.Ophthalmics, Glaucoma Agents

Dr. Wolfson offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Murrill. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Betaxolol
Betaxolol (Betoptic S)
Brimonidine 0.15% (Alphagan P 0.15%- Brand Only)
Brimonidine 0.2% (Generic)
Brimonidine/Timolol (Combigan)
Brinzolamide (Azopt)
Carteolol
Dipivefrin (Propine)
Dorzolamide (Generic only)
Dorzolamide/Timolol (Generic only)

Latanoprost (Generic only)
Levobunolol(Generic only)
Metipranolol (Generic; Optipranolol)
Pilocarpine
Timolol (Generic; Betimol)
Timolol-LA (Istalol)
Travoprost (Travatan Z)

Committee Recommendations for the NPDL are:

Apraclonidine (Iopidine)
Bimatoprost (Lumigan 2.5ml; 5ml; 7.5ml)
Brimonidine 0.1% (Alphagan P 0.1%)
Brimonidine 0.15% (Generic only)
Dorzolamide (Trusopt)
Dorzolamide/Timolol (Cosopt)
Latanoprost (Xalatan)
Levobunolol(Betagan)
Timolol (Timoptic)

Note: Latanoprost (Xalatan) is now available as a generic. Travatan is no longer available while Travatan Z remains available.

10-2;24.Otic Anti-Infectives and Anesthetics (New Category)

Mr. McKay offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Murrill. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are

Acetic Acid
Acetic Acid/Aluminum
Antipyrine/Benzocaine
Benzocaine (Pinnacaine)
Chloroxylenol/Pramoxine
Chloroxylenol/Pramoxine (Pramotic)
Pramoxine HC

Committee Recommendations for the NPDL are:

Acetic Acid/HC
Acetic Acid/Antipyrine/Benzocaine/Polycosanol (Otic Care; PR Otic; Treagan)
Antipyrine/Benzocaine/Zinc (Neotic; Otozin)
Chloroxylenol/Benzocaine/Hydrocortisone (Myoxin; Trioxin)
Chloroxylenol/Pramoxine/Zinc/Glycerine (Zinotic; Zinotic ES)

Note: Chloroxylenol/pramoxine/hydrocortisone (Cortamox), antipyrine/benzocaine/phenylephrine (Chlorphenylcaine), and acetic acid Borofair) have been discontinued.

10-2;25.Otic Antibiotics

Mr. McKay offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Givler. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Ciprofloxacin/Dexamethasone (Ciprodex)
Neomycin/Polymyxin/HC (Generic; Cortisporin)
Ofloxacin (Generic; Floxin)

Committee Recommendations for the NPDL are:

Ciprofloxacin (Cetraxal Otic)
Ciprofloxacin/Hydrocortisone (Cipro HC Otic)
Neomycin/Colistin/Thonzonium/HC (Coly-mycin S)
Neomycin/Colistin/Thonzonium/HC (Cortisporin-TC)

10-2;26.Sedatives/Hypnotics

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Chloral Hydrate Syrup
Temazepam (Generic)
Triazolam (Generic)
Zaleplon (Generic)
Zolpidem

Committee Recommendations for the NPDL are:

Chloral Hydrate (Somnote)
Doxepin (Silenor)
Estazolam
Eszopiclone (Lunesta)
Flurazepam
Quazepam (Doral)
Ramelteon (Rozerem)
Temazepam (Restoril)
Temazepam 7.5mg (Generic; Restoril)
Temazepam 22.5 mg (Generic; Restoril)
Triazolam (Halcion)
Zalepon (Sonata – Brand Only)
Zolpidem (Ambien)
Zolpidem Sublingual (Edluar; Zolpimist)
Zolpidem ER (Generic; Amben CR)

10-2;27.Smoking Cessation (New Category)

Dr. Patterson offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and one pharmaceutical manufacturer's presentation, the motion passed with eight yeas and three nays by Drs. Miller, Wilkinson and Wolfson in a roll call vote.

Committee Recommendations for the PDL are:

Bupropion SR
Nicotine Gum Buccal (Generic; Nicorette)
Nicotine Lozenges (Nicorette Lozenges)
Nicotine Transdermal (Generic)

Committee Recommendations for the NPD L are:

Nicotine Inhaler (Nicotrol Inhaler)
Nicotine Lozenges OTC Buccal
Nicotine Lozenges OTC Mucous Membrane
Nicotine Nasal Spray (Nicotrol Nasal Spray)
Nicotine Transdermal (Nicoderm CQ)
Varenicline DS PK (Chantix DS PK)
Varenicline Tab (Chantix Tab)

10-2;28.Steroids, Topical High

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Amcinonide Lot (Generic)
Betamethasone Dipropionate Cr; Lot; Oint (Generic)
Betamethasone Valerate Cr; Lot; Oint (Generic)
Betamethasone Valerate Cr; Lot (Beta Val)
Fluocinonide Cr; Emollient; Gel; Oint; Sol (Generic)
Triamcinolone Acetonide Cr; Oint (Generic)

Committee Recommendations for the NPD L are:

Amcinonide Cr; Oint (Generic)
Betamethasone Dipropionate Prop Glycol Cr; Lot; Oint (Generic; Diprolene/AF)
Betamethasone Dipropionate Gel (Generic; Diprolene/AF)
Desoximetasone Cr; Gel; Oint (Generic; Topicort; Topicort LP)
Diflorasone Diacetate Cr; Oint (Generic)
Fluocinonide Cr (Vanos)
Halcinonide Cr; Oint (Halog)
Triamcinolone Acetonide Aerosol (Kenalog Aerosol; Triderm)
Triamcinolone Acetonide Lot (Generic)

10-2;29.Steroids, Topical Low

Dr. Figueroa offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Alclometasone Dipropionate (Aclovate)
Desonide Cr; Oint (Generic)
Hydrocortisone Cr; Lot; Oint (Generic)

Committee Recommendations for the NPDL are:

Alclometasone Dipropionate Cr; Oint (Generic)
Desonate Gel (Generic)
Desonide Cr; Oint (Desonil Plus)
Desonide Lotion (Generic; Desowen; Verdeso)
Desonide Cr Kit (Desowen Cr Kit)
Desonide Lotion Kit (Desowen Lot Kit)
Desonide Oint Kit (Desowen Oint Kit)
Fluocinolone Acetonide Shampoo (Capex)
Fluocinolone Acetonide (Derma-Smoothie-FS)
Hydrocortisone (Ala Cort; Caldecort; Ala-scalp; Nuzon; Scalacort; Scalacort-DK Kit; Texacort; Pediaderm HC)
Hydrocortisone Acetate Urea (Generic)
Hydrocortisone Aloe Gel (Generic)
Hydrocortisone/Min Oil/Pet Oint (Generic)
Triamcinolone (Pediaderm TA)

10-2;30.Steroids, Topical Medium

Dr. Figueroa offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Mr. McKay. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Clocortolone Pivalate (Cloderm)
Fluocinolone Acetonide Cr; Oint; Sol (Generic)
Fluticasone Propionate Cr; Oint (Generic)
Hydrocortisone Butyrate Oint; Sol (Generic)
Hydrocortisone Valerate Cr (Generic)
Prednicarbate Cr (Dermatop)

Committee Recommendations for the NPDL are:

Betamethasone Valerate (Luxiq)
Flurandrenolide Tape (Cordran Tape)
Fluticasone Propionate Cr; Lot (Cutivate)
Hydrocortisone Butyrate Cr (Generic; Lucoid Lipocream)

Hydrocortisone Probutate (Pandel)
Hydrocortisone Valerate Cr (Westcort)
Hydrocortisone Valerate Oint (Generic)
Mometasone Furoate Cr; Oint; Sol (Generic; Elocon)
Mometasone Furoate (Momexin)
Prednicarbate Cr; Oint (Generic)
Prednicarbate Oint (Dermatop)

10-2;31.Steroids, Topical Very High

Dr. Suleman offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson. After discussion and no pharmaceutical manufacturers' requests to make presentations, the motion passed unanimously with a roll call vote.

Committee Recommendations for the PDL are:

Clobetasol Propionate Cr; Emollient; Gel; Oint; Sol (Generic; Olux)
Halobetasol Propionate Cr; Oint (Generic)

Committee Recommendations for the NPDL are:

Clobetasol Propionate Cr (Temovate)
Clobetasol Propionate Foam (Generic)
Clobetasol Propionate (Clobex Lot; Shampoo; Spray)
Clobetasol Propionate (Olux-E)
Diflorasone Diacetate (Apexicon E)
Halobetasol Propionate (Halonate; Halonate PAC Ultravate PAC)

10-2;32.Stimulants and Related Agents

Mr. McKay offered the motion to accept Provider Synergies' recommendations. The motion was seconded by Dr. Wolfson.

Dr. Murrill offered a motion to amend the recommendations and include Strattera in the PDL list. Dr. Weather seconded the motion.

Discussion and pharmaceutical manufacturers' presentations followed. The Committee passed unanimously with a roll call vote to amend the original motion and add Strattera to the PDL list. Then the Committee voted to approve Provider Synergies' recommendations plus Strattera in the PDL. The motion passed unanimously, with an abstention by Dr. Miller in a roll call vote.

Committee Recommendations for the PDL are:

Amphetamine Salt Combo (Generic; Adderall)
Amphetamine Salt Combo ER (Generic; Adderall XR)
Atomoxetine (Strattera)
Dexmethylphenidate (Focalin)
Dexmethylphenidate ER (Focalin XR)
Dextroamphetamine (Generic)

DextroamphetamineE R (Procentra)
Guanfacine ER (Intuniv)
Lisdexamfetamine (Vyvanse)
Methylphenidate (Generic ; Metadate CD)
Methylphenidate ER (Generic; Concerta; Metadate CD)
Methylphenidate IR (Methylin Chewable & Solution)
Methylphenidate SR (Ritalin SR)
Methylphenidate Transdermal Patches (Daytrana)

Committee Recommendations for the NPD L are:

Amphetamine Salt Combo ER (Global; Teva)
Armodafinil (Nuvigil)
Clonidine ER (Kapay)
Dextroamphetamine ER Cap
Dexmethylphenidate (Generic)
Dextroamphetamine ER (generic; Dexadrine)
Dextroamphetamine Solution (Procentra)
Methylphenidate Sol (Generic)
Methamphetamine (Generic; Desoxyn)
Methylphenidate ER (Generic Concerta; Ritalin LA)
Modafinil (Provigil)

II. NEW DRUGS REVIEW

The new drug reviews or single drug reviews are on products that have come to the market since the last review of the class. The reviews at this meeting were on new products in classes reviewed at the April 27, 2011 meeting. Seven (7) new drugs in six (6) therapeutic classes were reviewed and recommendations were made. P&T Committee recommendations follow:

Class Review

Number

10-1;3. Androgenic Agents

Mr. McKay offered the motion to accept Provider Synergies' recommendation to place the new drug Testosterone (**Axiron**) on the **NPD L**. The motion was seconded by Dr. Wolfson and passed unanimously with a roll call vote.

10-1;5. Angiotensin Modulators: ACE Inhibitors & Direct Renin Inhibitors

Mr. McKay offered the motion to accept Provider Synergies' recommendation to place the new drug Azilsartan Meoxomil (**Edarbi**) on the **NPD L**. The motion was seconded by Dr. Wolfson and passed unanimously with a roll call vote.

10-1;6. Antibiotics, Gastrointestinal

Dr. Suleman offered the motion to accept Provider Synergies' recommendation to place the new drug Fidaxomicin (**Dificid**) on the **NPD L**. The motion was seconded by Mr. McKay and passed unanimously with a roll call vote.

10-1;10. Anticoagulants

Mr. McKay offered the motion to accept Provider Synergies' recommendation to place

the new drug Rivaroxaban (**Xarelto**) on the NPDL. Dr. Wolfson seconded the motion. After a presentation by the manufacturer representative and discussion, Dr. Wolfson offered an amendment to the motion and to approve Xarelto for the PDL. The drug had a rebate offer. The addition of Xarelto could result in a market share movement from the high cost injection of Lovenox (or generic equivalent enoxaparin) to oral Xarelto which could lower cost for Louisiana. Dr. Suleman seconded the motion. The Committee then voted unanimously in a roll call vote to pass the amendment to add Rivaroxaban (**Xarelto**) to the **PDL**. **The Committee then voted unanimously against the original motion in a roll call vote which resulted in Xarelto being placed on the PDL and not as Provider Synergies recommended.**

10-1;26.Hepatitis C Agents

Mr. McKay offered the motion, seconded by Dr. Suleman to accept Provider Synergies' recommendation to place the new drug Boceprevir (**Victrelis**) on the **PDL**. After presentations by manufacturer representatives and discussion, the motion was defeated with two yeas and nine nays. So **Victrelis** was recommended for the **NPDL**.

Provider Synergies recommended Telaprevir (**Incivek**) for the **NPDL**. The Committee in a roll call vote of 8 yeas and 3 nays approved the Provider Synergies recommendation to place **Incivek** on the **NPDL**.

10-1;27.Hypoglycemics, Incretin Mimetics/Enhancers

Mr. McKay offered the motion, seconded by Dr. Wolfson, to accept Provider Synergies' recommendation to place the new drug Linagliptin (**Tradjenta**) on the **PDL**. The motion passed unanimously in a roll call vote.

Other Business:

- A. Dr. Miller.** Dr. Miller raised several issues he thought the Committee should address, such as restricting the prescribing of certain agents to credentialed providers or in certain circumstances to include consultation with approval of credentialed providers, implementing tiered processes or an algorithm approach to certain medications, monitoring out of state and mail order pharmacies, and not paying for agents that become "unsafe". (*Entire presentation is on meeting transcript.*)
- B. Dr. Hebert.** Dr. Hebert told the Committee he wanted Dr. Miller to present his recommendations and suggestions formally to the Committee. He complimented Dr. Miller and expressed a desire to hear the members' comments on the recommendations. He then appointed a group comprised of himself, Mr. McKay, Committee ViceChair; Ms. Terrebonne, Pharmacy Program Manager; and Ms. Rebecca DeLaSalle, DHH Attorney; with Dr. Rodney Wise, DHH Medical Director, as chair to review Dr. Miller's suggestions and see what is feasible and the best approach. Dr. Hebert said the Committee and Department had to take realistic approaches.
- C. Ms. Rebecca DeLaSalle.** Ms. DeLaSalle, DHH attorney, addressed the Committee. She stated DHH staff reviewed the statute that created the P&T Committee. She said the statute states, "It shall be responsible for developing and maintaining a pharmacopeia established in conjunction with a prior approval process." She said perhaps the Committee may need some education on what DHH processes are that are already established, because the Committee's charge is to create the pharmacopeia "*in conjunction with.*"

She referred the Committee to number four of the Bylaws, and said that there is an itemization....one, two, three and four. She said if you look at it, it looks like it just stands alone, but it doesn't. It comes in a part of the statute and it is actually sandwiched between language that's all relative to the pharmacopeia. So it says, "The Committee may recommend additions and deletions relative to the pharmacopeia and the pharmacopeia may change in accordance with those recommendations."

According to Ms. DeLaSalle, this is the bulk of what the Committee does. The statute continues with, "The Committee shall also advise the Secretary of the Department on policy recommendations related to the prudent administration of the Medicaid program. "The Secretary shall assure that all actions of the Committee comply with applicable state and federal laws, rules and regulations prior to the implementation or modification of the pharmacopeia. According to Ms. DeLaSalle, some of the recommendations she heard at the meeting, in her opinion, fall outside of this purview. She stated, however, if the Committee votes and wants to make a recommendation to the Secretary, she didn't see anything that prevents that action.

Next Steps:

A. Therapeutic Classes proposed to be reviewed at Next Meeting. Therapeutic classes proposed for review at the next meeting are:

- | | |
|--|--|
| Analgesics, Narcotics Long | Cephalosporins and Related Antibiotics |
| Analgesics, Narcotics Short | Erythropoiesis Stimulating Proteins |
| Androgenic Agents | Fluorquinolones, Oral |
| Angiotensin Modulator Combinations | Growth Hormone |
| Angiotensin Modulators | Hepatitis C Agents |
| Antibiotics, GI | Hypoglycemics, Incretin Mimetics/Enhancers |
| Antibiotics, Inhaled | Hypoglycemics, Insulin |
| Antibiotics, Topical | Hypoglycemics, Meglitinides |
| Antibiotics Vaginal | Hypoglycemics, TZD |
| Anticoagulants | Lipotropics, Other |
| Antiemetics/Antivertigo Agents | Lipotropics, Statins |
| Antifungals, Oral | Macrolides/Ketolides |
| Antifungals, Topical | Multiple Sclerosis Agents |
| Antimigraine Agents | Opiate Dependence |
| Antiparasitics, Topical | PAH Agents, Oral and Inhaled |
| Antivirals, Topical | Pancreatic Enzymes |
| Beta-Blockers | Phosphate Binders |
| Bladder Relaxant Preparations | Platelet Aggregation Inhibitors |
| Bone Resorption Suppression & Related Agents | Proton Pump Inhibitors |
| BPH Treatments | Skeletal Muscle Relaxants |
| Calcium Channel Blockers | Tetracyclines, Oral |
| | Ulcerative Colitis Agents |

***Note: Therapeutic Classes scheduled for review are posted on the following websites:
DHH Medicaid - (www.lamedicaid.com) and Provider Synergies -
(<http://www.providersynergies.com/services/medicaid/default.asp?content=Louisiana>)***

Next Meeting Date:

The next Committee meeting is scheduled for Wednesday, May 2, 2012.

Public Comment:

There were no additional public comments.\

Adjournment:

The meeting adjourned at 3:00 p.m.

The meeting transcript is available for review at DHH, Bureau of Health Services Financing, Pharmacy Benefits Section, upon request.