

February 2015 DUR Board Meeting Minutes

Date: February 18, 2015

Members Present: Lisa Sather, Caldwell, Bradley, Burton, Brown, Maxwell (phone), Fitzgerald, Crichton, and Anglim

Others Present: Dave Campana and Dan Peterson from Medicaid; Woodmansey, Doppler, Barnhill, and Bahny from Drug Case Management/Drug PA; and representatives of drug manufacturers and public.

Lisa Sather opened the meeting.

Public Comment:

There was no public comment.

Meeting Minute Review:

Meeting minutes from January were approved.

Department Update:

Dave Campana presented the Board with the following update:

We are now in our 12th year with the PDL (the first meeting was September 2004). This is my fourth year with the Montana Medicaid PDL Program. The Department would like again to thank the Board for your hard work on bringing medications with good clinical value to Montana Medicaid clients. While making clinical decisions on medications in therapeutic classes and going forward we ask the Board to review grandfathering of classes, does it make sense to grandfather and provide reasons for grandfathering.

Make decisions according to the following types:

Class Effect – where all drugs in the therapeutic class have similar indications.

May Add – where there may be additional evidence for a standout drug in a therapeutic class.

Must Have – where there is exceptional evidence for a single standout drug in a therapeutic class.

Therapeutic Alternatives – diverse FDA approved indications for the drugs in the therapeutic class.

DURB and PDL information have moved to a new location on the Department website. If you have not found please email dcampana@mt.gov.

We also remind all those in attendance to not mention the cost of the drugs as this goal of this meeting is to review the clinical nature of the medications.

PREFERRED DRUG LIST MEETING

Results of the Board review of Group 1 (Red category)

CLASS	DRUG NAME	2015 RECOMMENDATIONS	Grandfather
ANDROGENIC AGENTS, TOPICAL	FDA updates; ND Vogelxo®	Class effect	<u>NO</u>
ANGIOTENSIN MODULATORS & Combos	FDA Benicar® update; NI Epaned®	<ul style="list-style-type: none"> • ACE Inhibitors and Diuretic Combinations- Class effect, Do not add Tekturna® or Tekturna HCT® (due to aliskiren) • ARBs and Diuretic Combinations-Class effect • Angiotensin Modulator Combos-Therapeutic alternatives, Do not add Amturnide® or Tekamlo® (due to aliskiren) • <i>The board requested status of combo agents with diuretics be discussed again at a future meeting.</i> 	<u>NO</u>
ANTICOAGULAN TS	NI Elixquis®, Pradaxa®	Must have one LMWH, one new oral anticoagulant and warfarin. May add others. Continue with existing clinical criteria.	<u>NO (may re-evaluate if needed)</u>

ANTIEMETIC/ ANTIVERTIGO AGENTS	ND- Akynzeo® (netupitant/ palonosetron HCl)	Must have one 5-HT3 agent and one metoclopramide product. May add others. May add Akynzeo® with PA criteria for appropriate use. Continue with existing prior authorization criteria.	<u>NO</u>
ANTI- HYPERURICEMI CS	ND- Mitigare®	Must have allopurinol and a single-ingredient colchicine product. May add others. Continue with existing prior authorization criteria.	<u>NO</u>
BETA- BLOCKERS	ND- Hemangeol® and Inderal XL®	Must have metoprolol ER and carvedilol in some form. All other single ingredient agents have a class effect. Do not add combo agents containing diuretics-not first line agents and issues of concern with thiazides. May add PA criteria for Hemangeol®	<u>NO</u>
HEPATITIS C AGENTS	ND- Harvoni®, Viekira Pak®; NI- Olysio®	Ribavirins-Class effect; Pegylated Interferons-Class effect New agents (Harvoni® and Viekira Pak®)-Therapeutic alternatives, must have one of Harvoni® or Viekira Pak®. Remove discontinued agents. Continue with existing PA criteria.	<u>YES</u>
ERYTHROPOIESIS STIMULATING PROTEINS	ND-Micera®	Therapeutic alternatives	<u>NO</u>
HYPOGLYCEMIC S, INCRETIN MIMETICS/ ENHANCERS	ND- Tanzeum®, Trulicity®	DPP-IV-Therapeutic alternatives, must have one single-ingredient agent. GLP-1-Therapeutic alternatives	<u>NO</u>
HYPOGLYCEMIC S, Insulin and Related agents	ND-Afrezza®	Class effect for each group. Must have one from each. (Human R, N, 70/30, Rapid acting, Long Acting, and Rapid/Intermediate Combos).	<u>NO</u>
HYPOGLYCEMIC S, SGLT-2	ND- Jardiance®, Invokamet®, Xigduo XR®	Therapeutic alternatives. Bring back class at a future meeting with the 2015 DM treatment guidelines to discuss place in therapy. May add PA criteria.	<u>NO</u>
PAH AGENTS- Oral and Inhaled	ND- Orenitram®	Must have one ERA and one PDE-5. May add others. Retain existing PA criteria.	<u>YES</u>
PLATELET AGGREGATION INHIBITORS	ND- Zontivity®	Must have aspirin. Must have one of prasugrel, clopidogrel, ticagrelor, or vorapaxar. Class effect for other agents.	<u>YES</u> <u>(agents</u> <u>are not</u> <u>equivale</u> <u>nt)</u>

Board recommendations for Group 2 (Blue category)- This category of drugs has no new information since last review

CLASS	2015 RECOMMENDATIONS	Grandfather
BONE RESORPTION SUPPRESSION & RELATED	Class effect for nasal calcitonins. Continue with existing PA criteria. Class effect for bisphosphonates and others.	<u>NO</u>
CALCIUM CHANNEL BLOCKERS (DHP & non-DHP)	Must have a long acting diltiazem and a long acting verapamil. Must have amlodipine. All others are Class effect.	<u>NO</u>
COLONY STIMULATING FACTORS	Therapeutic alternatives.	<u>NO</u>
ESTROGEN, Oral & Transdermal	Class effect. Must have one topical and one oral.	<u>YES (continuity of care)</u>
ESTROGENS, Vaginal and others	Therapeutic alternatives.	<u>NO</u>
GROWTH HORMONE	Therapeutic alternatives. Class grandfathering discontinued at this meeting.	<u>NO</u>
ENDOCRINOLOGY: Meglitinides	Class effect.	<u>NO</u>
HYPOGLYCEMICS: Metformins	Must have metformin IR. Class effect for others.	<u>NO</u>
HYPOGLYCEMICS: Sulfonylureas 2nd gen	Class effect.	<u>NO</u>
HYPOGLYCEMICS: TZDs	Class effect. Continue with existing PA criteria.	<u>NO</u>
GI Motility (formerly IBS)	Amitiza® and Linzess® are therapeutic alternatives. May add Lotronex®. Continue existing PA criteria.	<u>NO</u>
LIPOTROPICS: Others	Must have gemfibrozil and one fenofibrate. May add others.	<u>NO</u>
LIPOTROPICS: Statins & Combos	Must have 1 high potency agent (atorvastatin or rosuvastatin). Do not add Simcor® because it is a combination product. May add others.	<u>NO</u>
PANCREATIC ENZYMES	Class effect.	<u>YES (drugs are not equivalent)</u>
PROGESTINS FOR CACHEXIA	Class effect.	<u>NO</u>
GI-PROTON PUMP INHIBITORS	Class effect.	<u>NO</u>
ULCERATIVE COLITIS	Class effect. Must have more than one route.	<u>NO</u>
ALPHA-GLUCOSIDASE INHIBITORS	Class effect.	<u>NO</u>

The next meeting is March 25, 2015 at the Great Northern.
Meeting adjourned at 4:35.