

APRIL 2010 DUR BOARD MEETING MINUTES

Date: April 28, 2010

Members Present: Eichler, Putsch, Brown, Burton, Sargent, Bradley, Nagy, Fitzgerald, Cobb (phone)

Others Present: Roger Citron, Wendy Blackwood, and Dan Peterson (Medicaid), and Kathy Novak (First Health), Marcella Barnhill, Lisa Wilkinson (Drug PA/CM unit), and various members of the public and representatives of drug manufacturers.

Mark opened the meeting and reviewed the PDL meeting format. Wendy Blackwood, the Medicaid Pharmacy Program Officer and Roger Citron, the Medicaid Pharmacist, updated the Board on current activity at the Department.

PDL REVIEW:

The Board made the following recommendations to the Department:

The Department proposed no changes to **GROUP 1** as all available chemical entities are preferred

- ALPHA-GLUCOSIDASE INHIBITORS
- SULFONYLUREAS-2ND GENERATION

The Department proposed no changes to the Formulary Committee's clinical recommendations to **GROUP 2** unless manufacturers submit **NEW** information:

- ALZHEIMER'S CHOLINESTERASE INHIBITORS
- THIAZOLIDINEDIONES & COMBOS
- ACE INHIBITORS & COMBOS
- NIACIN DERIVATIVES
- BETA BLOCKERS & COMBOS
- PROTON PUMP INHIBITORS
- CALCIUM CHANNEL BLOCKERS
- CARBAMAZEPINE DERIVATIVES
- INSULINS
- 1ST GENERATION ANTICONVULSANTS
- MEGLITINIDES

The Board considered a letter regarding Bystolic from a physician sent in as testimony, but decided to uphold the clinical recommendations as no new evidence exists in either of these classes.

The **red category** was reviewed class by class and testimony was heard. The following recommendations were made by the Board:

Multiple Sclerosis Agents:

Must have Copaxone and at least one Interferon agent. Grandfathering of patients on current therapy will occur in this category.

2nd Generation Anticonvulsants:

May add Lamictal ODT, may add Lamictal XR. The Board and Department agreed that due to the restrictions already in place on Sabril it would not be considered on the PDL.

Direct Renin Inhibitors:

May have Tekturna. Do not add Tekturna HCT or Valtorna.

AIIRBs & Combos:

Class effect. May add Exforge HCT, Twynsta.

Anti-hyper-lipidemic Agents:

No changes to last year's recommendations.

Triglyceride Lowering Agents:

Must have Gemfibrozil, must have at least one fenofibrate derivative, and may have Lovaza.

Incretin Mimetics:

Therapeutic alternatives. Grandfathering of patients on current therapy will occur in this category.

DPP-IV Inhibitors:

Therapeutic alternatives

Benzoyl Peroxide/Clindamycin:

Therapeutic alternatives. Class effect.

Non-Ergot Dopamine Receptor Agonists:

Therapeutic alternatives. Class effect.

TZDs:

No changes pending FDA update in July

Meeting adjourned 4PM. Next meeting at the Great Northern May 26, 2010.

