

## **JUNE 2009 DUR BOARD MEETING MINUTES**

**Date:** June 24, 2009

**Members Present:** Eichler, Brown, Harrison, Sargent, Nagy, Crichton, Cobb,

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

### **PDL Review:**

The Board first reviewed the Yellow class of drugs in which the Department proposed no changes because no new information had been submitted. The Board made the following recommendations:

**GLAUCOMA- ALPHA 2 ADRENERGICS** – No changes to 2008 recommendations

**GLAUCOMA- BETA BLOCKERS & COMBOS**- No changes to 2008 recommendations

**GLAUCOMA- PROSTAGLANDIN AGONISTS**-No changes to 2008 recommendations

**LONG ACTING NARCOTICS**- No changes to 2008 recommendations

**OPHTHALMIC ANTIHISTAMINES**- Class effect

**OPHTHALMIC QUINOLONES**- No changes to 2008 recommendations

**OTIC QUINOLONES** – No changes to 2008 recommendations

**TRIPTANS**- No changes to 2008 recommendations

The Board heard testimony and reviewed the Red class of drugs and made the following recommendations:

**ELECTROLYTE DEPLETERS**- Class effect

**ANDROGEN HORMONE INHIBITORS**- Class effect

**ALPHA BLOCKERS for BPH**- Class effect

**URINARY TRACT ANTISPASMODICS**- Short acting agents have a class effect; Must have 1 long acting agent (either by half-life or by dosage form)

**GROWTH HORMONES**- Department may choose –Therapeutic alternatives

**HEMATOPOIETIC AGENTS**- Therapeutic alternatives

**ANTIHYPERKINESIS AGENTS**- No changes from 2008

**NOVEL ANTIDEPRESSANTS**- May add Aplenzin; Must have Cymbalta; May add Venlafaxine ER tablet; all others decisions are the same as 2008

**SSRIs**- Class effect, but must have Fluoxetine or Lexapro

**ATYPICAL ANTIPSYCHOTICS**- New agents entering the market will be Non-preferred; all patients will be Grandfathered on current therapy; Department may include special dosage forms on the PDL;

Abilify or Geodon- Must have one

Clozapine- Must have

Fanapt- May add

Invega-May add

Risperidone- Must have

Seroquel, Seroquel XR, Zyprexa- Must have one

Symbyax- May add

FazaClo- May add

The atypical antipsychotics will be discussed further at the September DUR Board meeting.

The next meeting will be the 4<sup>th</sup> Wednesday in September. The meeting was adjourned at 4:45.