

May 2024 PDL/DUR Board Meeting Minutes

Date: May 22, 2024

Members Present: Barnhill, Anglim, Blake, Blank, Brown, Caldwell, Jost, McGrane, Nauts, Oley, Stone (arrived after 1:45pm)

Members Absent: Putsch

Others Present: Shannon Sexauer, Dani Feist, Katie Hawkins (DPHHS); Kathy Novak (Magellan); Bahny, Zody (Mountain Pacific); representatives from the pharmaceutical industry.

Meeting Minute Review: The meeting minutes from the April 17, 2024, PDL meeting were approved as written.

Public Comment: Speaker information is as follows:

- Paul Thompson, Alkermes – antipsychotics, atypical
- Jessica Jay, Indivior - Opvee®
- Tanu Thote, Intra-Cellular Therapies - Caplyta®
- Rochelle Yang, Teva - Uzedy®
- Daphne Ni, Biogen - Zurzuvae®
- Rejena Ameen, UCB Pharma - Nayzilam® and Briviact®
- Jennifer Shear, Jazz Pharmaceuticals - Epidiolex®

Written public comment was submitted to the Board prior to the meeting. It consisted of two manufacturer documents regarding Epidiolex® and Nayzilam®. The Board had no comments on these medications.

Department Update: No Department update.

PREFERRED DRUG LIST MEETING

Results of the Board review of **Group 3 (Red category):**

CLASS	DRUG NAME	2024 RECOMMENDATIONS	Grandfathered
ANTIDEPRESSANTS, OTHER	ND-Zurzuvae®	Must have bupropion XL, trazodone, mirtazapine, venlafaxine ER. Grandfathered class.	Yes
ANTIDEPRESSANTS, SSRIs	NI-Lexapro®	Class effect. Grandfathered class. <i>Removed “must have a diagnosis of VMS associated with menopause” for Brisdelle®, as this is part of Brisdelle® clinical criteria.</i>	Yes
ANTIMIGRAINE AGENTS	ND-Zavzpret®	Must have 1 nasal formulation, 1 injection and 1 short-acting agent (short-acting agents have class effect).	No

ANTIPSYCHOTICS, ATYPICAL	ND-Rykindo®, Abilify Asimtufii®, Uzedy® NI-Rexulti®, Fanapt®	Must have aripiprazole, risperidone, quetiapine, olanzapine, ziprasidone, lurasidone and clozapine. Continue clinical criteria. Grandfathered class.	Yes
MOVEMENT DISORDERS	NI-Ingrezza®	<i>Added class effect</i> and continue with PA criteria.	No
OPHTHALMICS, ANTI- INFLAMMATORY/IMMU NOMODULATOR	ND-Miebo®	Therapeutic alternatives. May add with PA criteria for appropriate use.	No
SUBSTANCE USE DISORDER TREATMENTS	ND-Opvee®	OPIOID USE DISORDER TREATMENTS -Therapeutic alternatives. Must have buprenorphine/naloxone film. <i>Removed “Do not add buprenorphine monotherapy tablet or buprenorphine/naloxone tablet.”</i> <i>Added “Must have buprenorphine monotherapy tablet.”</i> <i>Criteria discussion will be had at a future DUR meeting.</i> OPIOID REVERSAL – Must have injection and nasal naloxone. Do not add high dose nasal naloxone, 8mg. <i>Added “Do not add nalmeffene”.</i>	No

The Board reviewed the **blue category** in advance of the meeting. Kathy from Magellan reported on new generics in this category. This category of drugs has no new clinically significant information since last review. The Board recommendations for Group 2 (Blue category) from 2023 were retained. The recommendations are as follows:

CLASS	2024 RECOMMENDATIONS	Grandfathered
ALZHEIMER’S AGENTS	Must have oral donepezil and a transdermal product. Grandfathered class.	Yes
ANALGESICS, NARCOTIC LONG ACTING	Must have 1 long-acting formulation of morphine or oxycodone. Must have buprenorphine transdermal formulation. Continue clinical criteria. Grandfathered class.	Yes

ANTICONVULSANTS	<p>CARBAMAZEPINE DERIVATIVES - Must have carbamazepine chewable, oral tablets and suspension, a long-acting carbamazepine and oxcarbazepine immediate release.</p> <p>FIRST GENERATION - Must have phenobarbital, phenytoin, primidone, phenytoin 30mg and 50mg, divalproex IR and ER, ethosuximide capsules and suspension, valproic acid caps and suspension. Do not add felbamate.</p> <p>SECOND GENERATION AND OTHERS - Must have a rescue product that includes a nasal formulation (with corresponding PA criteria to allow for appropriate access), gabapentin, lamotrigine, levetiracetam, pregabalin, topiramate IR and zonisamide.</p>	No
ANTIPARKINSON'S AGENTS	Must have a dopamine agonist, a COMT inhibitor, a MAO-B inhibitor, trihexyphenidyl, benztropine, amantadine, IR carbidopa/levodopa, CR carbidopa/levodopa.	No
MULTIPLE SCLEROSIS AGENTS	Must have glatiramer, 1 interferon agent and an oral agent. Exclude Physician Administered Drugs. Grandfathered class.	Yes
NEUROPATHIC PAIN	Must have duloxetine and gabapentin. Continue existing specific PA criteria. Grandfathered class.	Yes
NSAIDS	Class effect. Must have 1 oral and 1 topical agent.	No
OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS	<p>ANTI-HISTAMINES - Class effect.</p> <p>MAST CELL STABILIZERS - Class effect.</p>	No
OPHTHALMIC ANTIBIOTICS	Class effect.	No
OPHTHALMIC ANTIBIOTIC-STERIOD COMBINATIONS	Class effect.	No
OPHTHALMICS, ANTI-INFLAMMATORIES	<p>NSAIDS - Class effect.</p> <p>STEROIDS - Therapeutic alternatives.</p>	No

OPHTHALMIC GLAUCOMA AGENTS	OPHTHALMIC ALPHA 2 ADRENERGIC AGENTS - Must have brimonidine due to increased efficacy. OPHTHALMIC BETA BLOCKERS - Class effect. GLAUCOMA, OTHERS (Formerly - OPHTHALMIC CARBONIC ANHYDRASE INHIBITORS/RHO KINASE INHIBITORS) Must have 1 single agent. OPHTHALMIC PROSTAGLANDINS - Class effect.	No
OTIC ANTIBIOTICS	Class effect.	No
OTIC ANTI-INFECTIVES & ANESTHETICS	Therapeutic alternatives.	No
OTICS, ANTI-INFLAMMATORY	May add.	No
SEDATIVE HYPNOTICS	Therapeutic alternatives. BENZODIAZEPINES - Must have temazepam, do not add others. BZ-1 SELECTIVE AGENTS - Must have 1 BZ-1 selective agent. Do not add ramelteon.	No
SKELETAL MUSCLE RELAXANTS	Must have baclofen and cyclobenzaprine. Other agents are therapeutic alternatives.	No
STIMULANTS & RELATED AGENTS	NON-STIMULANT ADHD AGENTS - Must have atomoxetine, guanfacine ER, and clonidine ER. STIMULANTS - Trial of 2 preferred agents required. Must have 1 long-acting agent and 1 short-acting agent each of a methylphenidate-like product and an amphetamine-like product. Grandfathered class only applies to stimulants.	NON-STIMULANTS: No STIMULANTS: Yes
ANTIHYPERTENSIVES, SYMPATHOLYTICS	Therapeutic alternatives. Must have a clonidine product and a guanfacine product.	No

There are no green category drugs to review at this time.

The meeting adjourned at 2:40 p.m.

This is the final PDL meeting of 2024. The next meeting will be the DUR Board meeting on June 19, 2024, in this same format.