WY P&T Committee Meeting Minutes  
Wednesday, February 8, 2018  
Cheyenne, WY  
10 a.m – 1 p.m.

Members present: Hoo Fang Choo, Joseph Horam, Paul Johnson, Scott Johnston, Rhonda McLaughlin, Chris Mosier, Garry Needham, Scot Schmidt, David Sy, Tonja Woods, Pat Yost

Ex-officio: Melissa Hunter, Cori Cooper, Donna Artery

Excused: Robert Monger

Guests: Nikki Yost (CHC), Sandra Deaver, Melissa Eames, Amy Stockton (CHC), Amy Bodenburg (Allergen), Keri Smith (ViiV Healthcare), Christy Skibicki (Indivior), Elizabeth Ariano (Indivior), Ray Kall (Sanufi), Lillian Chen (Spark Therapeutics), Susan Kelly (Spark Therapeutics), Jason Smith (Gilead), J. Mussack (Otsuka), Mark Schwartz (GSK), Rick Kegler (Otsuka), Britt Boehner (Lilly)

Dr. Sy called the meeting to order at 9:58 a.m.

Introductions were made. David welcomed Dr. Choo to the Committee. He will be replacing Dr. Beaulieu.

Approval of Minutes  
The minutes of the November 9, 2017 meeting were approved as submitted.

Department of Health  
A. Pharmacy Program Manager Report: The DUR RFP should be released by A&I in the next week or so. They are currently going through the process of certifying the PBMS through CMS.

B. Medical Director Report: Dr. Bush continues to work with the Attorney General’s office and the Board of Pharmacy on access to the PDMP for the Department of Health.

C. DUR Manager Report: The Adult ADHD criteria requiring patients to meet the full DSM-V criteria including demonstrable symptoms in two or more locations (one being school or work) will be implemented March 14. Amy has already started to receive PA requests in advance.

Old Business: No Old Business.
New Business

A. PA Criteria

1. Review existing criteria
   i. None

2. New Drugs

   i. Trelegy is indicated for maintenance treatment of COPD. It is a triple combination of medications currently available on the market. The Committee unanimously agreed that there was no evidence of a difference in safety or efficacy and referred to the Department of Health for a cost analysis and to determine placement on the PDL.

   ii. Symproic is approved for treatment of opioid-induced constipation in adults. There being no evidence of a difference in safety or efficacy, the Committee referred it to the Department of Health for cost analysis and PDL placement.

   iii. Ozempic is a new GLP-1 receptor agonist for type 2 diabetes. There is no evidence of a difference in safety or efficacy, so it, too, was referred to the Department of Health for cost analysis and PDL placement.

   iv. Sublocade is a long-acting injectable form of buprenorphine approved for treatment of moderate to severe opioid use disorder in patients who have initiated treatment with transmucosal forms. It forms a precipitate under the skin at the injection site which slowly dissolves over the course of the month. Dr. Christy Skibicki (Indivior) provided public comment. Sublocade should only be given subcutaneously, never IV. It is physician-administered only and has an associated REMS program. Dr. Johnston noted that blockade of opiate receptors is a surrogate marker. Dr. Skibicki indicated that additional studies are complete but have not yet been published. There are definite compliance benefits with this formulation. Stage 3 studies showed therapeutic levels for weeks to months following the last injection. No withdrawal symptoms were noted in studies. Hot packs may cause early release from the injection site. It is recommended that no irritation be caused to the site including belts or tight clothing. The Committee asked that we defer this medication until May when additional studies should be published.

3. Determine need for criteria

   i. Xenazine has a maximum dose of 50 mg per day, up to 100 mg per day for intermediate and rapid metabolizers. Prior authorization requests are seen at much higher doses. There was a motion, second and all were in favor of limiting the dose of Xenazine to 50 mg per day.

Other: Aimee gave an overview of the newer CAR-T and gene therapies that have been recently approved. The technology behind these agents is incredible, but comes with a hefty price tag. These therapies will not affect the pharmacy budget at this time, but we should be aware of these types of therapies as they will continue to come to the market.
There being no further business, the open portion of the meeting at was adjourned at 10:51 and the Committee met in closed session.

Respectfully Submitted,

Aimee Lewis
WYDUR Manager