

WY P&T Committee Meeting Minutes  
Wednesday, May 3, 2018  
Cheyenne, WY  
10 a.m – 1 p.m.

Members present: Hoo Fang Choo, Paul Johnson, Scott Johnston, Robert Monger, Chris Mosier, Garry Needham, Scot Schmidt, David Sy, Pat Yost

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

Excused: Joseph Horam, Rhonda McLaughlin, Tonja Woods

Guests: Sandra Deaver, Melissa Eames, Amy Stockton (CHC), Don McCaffry (Vertex), Luis Velasquez (Vertex), Charissa Anne (J&J), Danny McNutly (J&J), Amy Rodenburg (Allergan), Roy Lindfield (Sunovion), Nick Nguyen (Sunovion), Rick Kelger (Otsuka), Jeff Mussack (Otsuka), Carson Hutchinson (Student P4), Marcie Hunt (Student P4), Lindsey Snyder (Student P4)

Dr. Monger called the meeting to order at 10:00 a.m.

Introductions were made.

Approval of Minutes

The minutes of the February 8, 2018 meeting were approved as submitted.

Department of Health

A. Pharmacy Program Manager Report: The School of Pharmacy received the DUR Contract for another three-year period with a two-year extension, for a total of five years. Certification of the PBM system continues with CMS.

B. Medical Director Report: No report.

C. DUR Manager Report: Aimee thanked everyone for writing letters to support the School of Pharmacy's proposal. She greatly appreciates the opportunity to continue this work.

Old Business: The continued Sublocade discussion will be tabled until August as the data is not yet published.

New Business

A. PA Criteria

1. Review existing criteria

i. Buprenorphine was previously allowed in pregnancy due to the contraindication with the combination product, buprenorphine/naloxone. Due to labeling changes, this is no longer applicable. Sandra provided numbers on babies born addicted in 2017. There were 18 babies born addicted, nine were in foster care, and seven had to

be transferred to Denver or Salt Lake City for a higher level of care. It is possible that, due to increased awareness, we are seeing more accurate coding of these cases. The number of pregnancy narcotic letters continue to decrease.

ii. The prior authorization help desk is seeing requests for Spiriva Respimat in pediatrics. This indication is unique to the Respimat which is non-preferred to the Handihaler. There is no research showing an advantage to ipratropium in asthma and there are no guidelines for use in pediatrics or asthma, in general. There was a motion, second and all were in favor of allowing Spiriva Respimat in patients aged 6 and older, without COPD, as an add-on to an inhaled corticosteroid and a long-acting bronchodilator.

## 2. New Drugs

i. Steglatro is a new SGLT-2 inhibitor for the treatment of type 2 diabetes. The Committee agreed that there is no evidence of a difference in safety and efficacy compared to the other agents on the market. Jardiance has outcomes data and should be a preferred agent. Because of the lack of outcomes data, Steglatro should be non-preferred.

ii. Biktarvy is indicated for treatment of HIV-1 infection. It is a triple therapy combination tablet that is non-inferior to the other agents on the market. Dr. Choo indicated that this product has a new form of tenofovir that has fewer bone and renal issues. Adherence is a major issue as these patients have a lot of comorbidities. There is not much difference in safety and efficacy, however, the resistance profile is better than the older integrase inhibitors. The Committee agreed that Biktarvy should be made available.

iii. Lonhala is a new, nebulized long-acting muscarinic agent (LAMA) for COPD. Nick (Sunovian) provided public comment. It is the first and only nebulized LAMA and comes with the Magnair device. The number needed to treat to avoid an exacerbation is 10 for Lonhala and 15 for Spiriva. Dr. Johnston mentioned that the side effect profile looks twice as bad as Spiriva. Nick indicated that long-term studies showed adverse reactions were consistent with other placebo-controlled trials and showed no major cardiac adverse events. There is no data comparing inhaled to nebulized agents. The device was shown at the request of the Committee. There was a motion, second and all were in favor of allowing Lonhala in patients who have difficulty using an inhaler.

iv. Symdeko is a new combination of tezacaftor and ivacaftor for treatment of cystic fibrosis. Luis Velasquez (Vertex) provided public comment. It is indicated in patients aged 12 years and older. There were two trials which showed an absolute improvement in FEV-1 over placebo and ivacaftor alone. Symdeko has fewer drug interactions than the other two agents. Studies are in process for 6 – 11 year olds and it will be studied in 2 – 5 year olds after that. It was noted that the benefit is very small. Luis responded that the benefit appears small, however, given that most cystic fibrosis patients have a 1 – 3% decline every year, a 4% change is considered disease modifying. Pulmonary exacerbations decreased in 35% of patients which is significant as these exacerbations may result in permanent damage. These medications are expected to improve life expectancy. There are others in the pipeline. There was a motion, second and all were in favor of limiting this medication to indication.

v. FreeStyle Libre is a new device for continuous glucose

monitoring. It is approved for patients aged 18 and older who have type 1 or type 2 diabetes. Carson Hutchinson (Pharmacy Student) provided information on the device. The Committee agreed that any criteria should be applied to all continuous glucose monitoring devices. There was a motion, second and all were in favor of allowing these devices in patients who require three or more insulin injections per day. The devices will be limited to labeled age.

3. Determine need for criteria

i. There was discussion around limiting the first fill of opiate medications to 7 days. This is a national movement with a few states having laws in place, and several additional states having limits for Medicaid claims. There is concern about the impact on prescribers. Aimee will send this policy out for public comment to get feedback prior to making a decision.

There being no further business, the open portion of the meeting at was adjourned and the Committee met in closed session.

Respectfully Submitted,

Aimee Lewis  
WYDUR Manager