WY P&T Committee Meeting Minutes
Wednesday, May 11, 2016
Cheyenne, WY
10 a.m – 1 p.m.

Members present: Andrew Beaulieu, Joe Horam, Scott Johnston, Rhonda McLaughlin, Robert Monger, Garry Needham, Scot Schmidt, David Sy, Tonja Woods, Pat Yost

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

Guests: Sara Howe (GHS), Nikki Yost (GHS), Chris Samuel (GHS), Sandra Deaver, Melissa Eames, Garrick Campbell (Otsuka), Karen Nguyen (Allergan), Sean McGan (Allergan), Tony Borton (Pfizer), Mark Schwartz (GSK), Paul Bonhan (Novo), Jeff Knappen (Allergan), Lorraine Barker (Allergan), Sandra Bellino (Merck), Chris Samuel (GHS)

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

Introductions were made.

Approval of Minutes

The minutes of the February 11, 2016 meeting were approved as submitted.

Department of Health

A. Pharmacy Program Manager Report: The new contract with GHS is complete and the planning phase for the new system is in process. The DUR amendment is complete, extending the contract for two years.

B. Medical Director Report: A new vendor, Optum, has been selected for medical case management services. The WyHealth name will continue to be used. Services will be transitioned to on-site regional offices and will focus on highly complex cases. The CMS proposed final rule for MACRA has been published. Payment under Medicaid and Medicare will switch to the merit-based incentive payment system (MIPS) which can be up to a 9.5% difference over current methods. The Primary Care Medical Home is recognized as an alternative payment method, which is the only way to bypass MIPS and avoid lower payments. Currently there are nine practices enrolled, with potential for 29 participating practices.

C. DUR Manager Report: We welcome Dr. Johnston back to the P&T Committee after a few years off.

Old Business

A. Per a request at the last meeting, utilization of immediate release vs. extended release clonidine and guanfacine was reviewed. 88% of clonidine and 68% of guanfacine utilization remains in the immediate release formulations. From a pharmacokinetic perspective, there is no significant difference in half-life between the immediate release and the extended release formulations. However, there is a very significant cost

difference. At this time, the requirement for a trial of immediate release product will not be changed.

New Business

A. PA Criteria

1. Review existing PA criteria:

i. The use of diabetic agents for weight loss in the absence of a diabetes diagnosis was discussed. The main concern at this time is Victoza.

There was a motion, second and all were in favor of placing a dose limit of 1.8 mg per day on Victoza.

ii. The Medical Advisory Group asked the P&T Committee to consider the rationale of requiring an ADHD diagnosis in children. Also, they asked if the lookback period could be extended to fourteen months instead of twelve.

There was a motion, second and all were in favor of removing the diagnosis edit for children aged 4 – 17. The lookback will be 14 months instead of 12 for other patients.

2. New Drugs

i. Zepatier is a new hepatitis C treatment approved for genotype 1 and 4. It received fast track approval for its impact in renal patients. It requires a specific lab test for NS5A polymorphisms. Patients who test positive must receive Ribavirin in combination.

There was a motion, second and all were in favor of applying the class criteria for hepatitis C agents plus a requirement for polymorphism testing.

ii. Vraylar is a second generation antipsychotic approved for schizophrenia and bipolar disorder. Karen Nguyen (Allergan) provided public comment. It has preferential binding at the dopamine D3 receptor along with partial agonist activity at the serotonin 1A receptor. It's long half-life (1-3 weeks) may prove beneficial in patients who are non-compliant with their medications. Many studies have been completed but are only available in poster form. Studies focused on the negative symptoms showed benefit compared to risperidone. 72 week studies show sustained efficacy and a two-fold lower relapse rate in schizophrenia. Studies are out to 16 weeks in bipolar.

There was a motion, second and all were in favor of referring Vraylar to the Department of Health for cost analysis and determination of PDL placement.

iii. Taltz is an IL-17 antagonist approved for the treatment of plaque psoriasis. Studies show superiority to etanercept.

There was a motion, second and all were in favor of referring Taltz to the Department of Health for cost analysis and determination of PDL placement.

3. Determine need for criteria

i. Utilization of benzodiazepines was reviewed in combination with other benzodiazepines and narcotic medications. The data continues to grow showing the danger of benzodiazepine use, resulting in an increasing number of overdose deaths.

There was a motion, second and all were in favor of requiring prior authorization for use of a benzodiazepine in combination with another benzodiazepine or narcotic medication. This will not go into effect prior to September 1st to allow time for provider notification.

ii. The prior authorization help desk noted a couple of requests for very high dose Lyrica. It is also noted that abuse of Lyrica is on the rise.

There was a motion, second and all were in favor of limiting Lyrica to 600 mg per day.

iii. Suboxone restarts were discussed. The impact of the two year limit is questionable at this time. Further, a Pharmacy intern reviewed the use of Suboxone and found that doses tended to escalate over the two year period instead of decreasing as is expected.

There was a motion, second and all were in favor of limiting the dose of Suboxone to 16 mg/day for the first two years, and 8 mg/day after two years. This policy will be implemented over time as prior authorizations expire.

<u>Other</u>

Utilization of cystic fibrosis medications was reviewed to determine if this is a patient population who would benefit from increased case management under the new contract with Optum. This is a very small population who tends to be very compliant with their medications from a claims perspective.

The meeting adjourned and the Committee met in closed session. During closed session, pharmacists interested in the open position were reviewed. Chris Mosier was selected to fill the opening.

Respectfully Submitted,

Aimee Lewis
WYDUR Manager