

Michigan Pharmacy and Therapeutics Committee
Meeting of June 2, 2009
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Introductions and Approval of Minutes of March 3, 2009 Meeting;

Committee members present: Drs. Arend, Inman, Dillon, Fiechtner, Perri, Bradley, Dake, Thill, Dorfman

First Health Staff present: Annette Paul, RPh

State Staff present: Susan Moran, RN, Debera Eggleston, MD, Nina Mattarella, MD, Carla Patrick-Fagan

The Minutes of the March 3, 2009 meeting were approved

New Drug Reviews

Following presentation of information on these drug products and discussion, the Committee recommended to the Department the following:

Prandimet; add to the Preferred Drug List (PDL) class "Oral Hypoglycemics-Combinations" with prior authorization (PA)

Sancuso: add to the PDL class "Nausea Agents-Oral" with a step edit looking for trial of oral agent(s)

Aczone: Continue non formulary until all acne products are reviewed by Miscellaneous Drug Class workgroup

Moxatag; add to the Michigan Pharmaceutical Product List (MPPL) with PA

Epiduo: Continue non formulary until all acne products are reviewed by Miscellaneous Drug Class workgroup

Astepro: [discussion occurred as part of review of PDL classes] add to the PDL class "nasal Antihistamines"

Trilipix: add to the PDL class "Lipotropics-Non Statins: Fibrin Acid Derivatives" with PA

Xenazine: add to the MPPL; conduct a drug utilization review study to look for usage and co-morbid condition of depression, use of anti depressants etc

Line Extensions

Hycamtin: add to the MPPL

Spectracef: continue with PA in PDL class "Cephalosporin 3rd Generation"

Veripred: add to the MPPL with PA

Review of Asthma Allergy PDL Classes:

The Committee reviewed the Workgroup recommendations for these drug classes and recommended to the Department:

Inhaled Anticholinergics

No change to current classification of the drug products

Antihistamines 2nd Generation

No change to current classification of the drug products

Beta Adrenergics Short Acting

Add ProAir HFA and Proventil HFA without prior authorization

Work on a messaging system at Point of Service to influence beneficiaries to return to their doctors when the number of prescriptions for these rescue inhalers dispensed per beneficiary exceeds a limit

Beta Adrenergics Long Acting

No change to current classification of the drug products

Beta Adrenergics for Nebulizers

No change to current classification of the drug products

Beta Adrenergic/ Corticosteroid Inhaler Combinations

No change to current classification of the drug products

Inhaled Glucocorticoids

Add Alvesco and Pulmicort flexihaler without prior authorization

Construct a Drug Utilization Review project to identify patients receiving BID dosing of Pulmicort nebulizer solution, and review if QD dosing of a higher amount is suitable for the patient

Leukotriene Inhibitors

No change to current classification of the drug products

Nasal Steroids

Require prior authorization on Nasacort AQ

In addition, the Committee recommended adding a new drug class, “Nasal Antihistamines” for inclusion as a PDL class. The drug products in the class would consist of the following:

Nasal Antihistamines

Astelin

Astepro

Requires Prior Authorization

Patanase

Review of Antibiotics PDL Classes

The Committee reviewed these drug classes and recommended the following:

Antifungals-Onychomycosis

No change to current classification of the drug products

Antifungals-Oral

No change to current classification of the drug products

Antivirals-Herpes

No change to current classification of the drug products

Antivirals-Influenza

No change to current classification of the drug products

Cephalosporin 1st Generation

No change to current classification of the drug products

Cephalosporin 2nd Generation

No change to current classification of the drug products

Cephalosporin 3rd Generation

Place prior authorization on Cedax

Add cefpodoxime generic available without prior authorization

Hepatitis C

No change to current classification of the drug products

Ketolides

No change to current classification of the drug product

Macrolides

No change to current classification of the drug products

Oxalodinones

No change to current classification of the drug product

Quinolones

The Committee asked Chris Farnum, DO to speak about the use of Levaquin for treatment, and a motion to remove PA from the 750mg strength of Levaquin with a quantity limit of 5-7 was introduced. The motion did not pass. The Committee asked the Department to look at hospitalization data to see if there were failures when beneficiaries were started first on another quinolone, and to look for complications such as C. difficile in such beneficiaries. The committee voted to leave the classification the same at this time

Ophthalmic Fluoroquinolones

No change to current classification of the drug products

Otic Quinolones

No change to current classification of the drug products

Ophthalmic Macrolides

No change to current classification of the drug product

The Committee was asked to review a new class of topical antibiotics, and recommended to the Department to add the following to the PDL:

Topical Antibiotics

Mupiricin ointment

Altabax

Requires PA

Bactroban

Review of Skeletal Muscle Relaxants as a new Class

The Committee reviewed skeletal muscle relaxants as a new class for the PDL. Following discussion, the group recommended to the Department the following classification for the PDL in the Central Nervous System category:

Skeletal Muscle Relaxants

Chlorzoxazone

Cyclobenzaprine HCl

Methocarbamol

Tizanidine HCl

Baclofen

Orphenadrine Citrate

Dantrolene Sodium

Requires Prior Authorization:

Zanaflex capsules, tablets

Robaxin

Skelaxin

Amrix

Dantrium

Orphenadrine Compound

Fexmid
Parafon Forte DSC
Lioresal Intrathecal
Dantrium vial
Norflex
Robaxin vial

Update on Executive Order Impacting Medicaid Services

The Committee received an update on the Governor's Executive Order, which includes a provision for placing behavioral health drugs back on the Preferred Drug List. In order for that to occur, the Legislature would need to rescind PA 248 Of 2004 and Section 9709 of PA 250 of 2004. The P and T would be asked to give clinical advice to the Department on how to proceed with behavioral health drugs. The Committee was asked to schedule an extraordinary meeting. The group asked to solicit best times for a meeting via email correspondence.

Public Comment

The following persons made comment and answered Committee questions:

G. Ruoff, MD, Uloric
S. Mehta, PharmD, Amgen, Aranesp and Enbrel
K. Murphy, PharmD, Roche, Boniva
B. Moreland, PhD, Astellas, Vesicare, Protopic
P. Denbleycker, Allergan, Sanctura XR
G. Anderson, PhD, AstraZeneca, Nexium
R. Rood, MD, Humalog insulins
G. Rigoni, PharmD, Abbott, Humira
A. Palmer, PhD, UCB, Cimzia
C. Gammons, Nephron Pharmaceuticals, Albuterol Sulfate 0.042%
K. Baila, PharmD, J. Roney, PharmD, NovoNordisk, Norditropin , Levemir

The next scheduled meeting is Tuesday, September 1, 2009

The Diabetes, Gastrointestinal and Miscellaneous PDL classes will be reviewed