

**Michigan Pharmacy and Therapeutics Committee
Meeting of June 6, 2006, 6PM
Kellogg Center, East Lansing MI**

Minutes

Welcome and Introductions

Dr. Nedd welcomed committee members and guests. Drs. Arend, Bradley, Dake, Dillon, Dorfman, Fiechtner, Inman, Nedd, Perri, Rogers, and VanLoo were in attendance. State staff included Sue Moran, RN, Medicaid Director, Trish O'Keefe, RN, Pharmacy Manager, Tom Welch, Pharmacy Analyst. Don Tatum RPh, Account Manager, and Karen Parker, RPh, Clinical Manager, First Health Services Corporation were also present.

Approval of Minutes of March 7, 2006 Meeting

The minutes were approved by Committee vote

New Drug Reviews

Following presentation and discussion, the Committee recommended to the Department the following:

Triglide®: Add to the MPPL and to the PDL with prior authorization

Orencia®: Cover as a physician service using the appropriate J-Code

Increlix®: Add to the MPPL with prior authorization

Iplex®: Add to the MPPL with prior authorization

Myozyme®: Cover as a physician service with prior authorization

Review of PDL Classes

Antibiotics Anti- Infectives:

Following review of the drugs listed in these classes on the Preferred Drug List, the Committee recommended to the Department:

Antifungals-Onychomycosis

No change to the listings as currently presented

Anti-fungals-Oral

No change to the current listings

Antivirals-Herpes

No change to the current listings

Antivirals-Influenza

Return prior authorization to Tamiflu® and Relenza®

The Department will monitor CDC advisories during upcoming flu season and make changes according to the recommendations

Cephalosporin-First Generation

No change to the current listings

Cephalosporin-Second Generation

No change to the current listings

Cephalosporin-Third Generation

No change to the current listings

Hepatitis C

Extensive discussion took place on weight-based versus other treatment. The Oregon Drug Effectiveness Review Project will be conducting an analysis of these drugs, and the Department will bring back to the Committee the results of that review within six months.

Add generic ribavirin as available without prior authorization

Require prior authorization on brand name Copegus®

Ketolides

Require prior authorization on Ketek® to review for awareness of toxicity and appropriate use per licensed indications. Bring back for Committee review when there is an update on the FDA actions regarding the toxicity of this drug

Macrolides

Add azithromycin without prior authorization

Add clarithromycin without prior authorization

Require prior authorization on Zithromax®, Biaxin®, BiaxinXL®

Quinolones

There was extensive discussion on the use of high dose, short course Levaquin® for responsive infections and the idea of removing prior authorization only from the 750mg strength. This motion was rejected.

Require prior authorization for CiproXR®

Asthma Allergy:

Following discussion the Committee recommended to the Department the following:

Inhaled Anticholinergics

Remove prior authorization from Combivent®

Antihistamines-2nd Generation

Remove prior authorization from generic fexofenadine

Beta Adrenergics-Short Acting

Extensive discussion occurred on the use of Xopenex in selected patient populations, the literature on the efficacy of Xopenex versus albuterol, the problems being encountered with shortages of inhalers because of shortages in CFC propellant and availability issues with HFA propellant. The Committee was most concerned that patients have access to needed rescue medications. The Department will obtain further background information on these issues and the Committee will review again in September

Beta Adrenergics-Long Acting

No changes to current designations

Beta Adrenergics for Nebulizers

Add prior authorization requirement for metaproterenol

Beta Adrenergic/ Corticosteroid Combinations

No change to current designations

Inhaled Systemic Corticoids

Add Flovent HFA® to list without prior authorization

Remove prior authorization from Azmacort®

Leukotriene Inhibitors

No change to current designations

Nasal Steroids

Remove Nasalide®

Remove prior authorization from Nasacort AQ®

Add generic fluticasone propionate without prior authorization

Public Comment:

The following public comment was presented to the Committee:

P. Glover, PharmD., , TAP, Prevacid®

Dr. Rosenberg, Family Practitioner, Jackson, MI, Ditropan XL and other overactive bladder agents

L. Macione, PharmD., Lilly, Humalog® products

L. Lemon, MD, M. McDermott, MD, Allergan, Lumigan®, Alphagan P®, Zymar®, Restasis®

B. Facca, PharmD, GSK, , Imitrex®, Requip®

D. Kirks, MD, Henry Ford Hospital, Urology, Vesicare®

J. Zarintash, DO, First Horizon, Triglide®

S. Ryu, PharmD, Amgen, Enbrel®

B. McKeon, PharmD., Merck, Emend®

G. Anderson, PhD, AstraZeneca, Nexium®

A. Bickensdorfer, PharmD, Amylin, Byetta®, Symlin®

U. Khanderia, PharmD, Takeda, Actos®, ActosplusMet®

M. DeShawn, PharmD., CRTX, Zyflo®

M. Honasoge, MD, HFH, Roche, Boniva®

C. .Guzman, MD, Henry Ford, NovNordisk, Levemir®

L. Katz, Sanofi-Aventis, Apidra®, Lantus®

B. Kaplan-Machlis, PharmD, Pfizer, Chantix®

S. Rifkin, PharmD., Santarus, Zegerid®

M. Faber, MD, Henry Ford Hospital, Renagel®

J. Roney, PharmD, P&G Pharmaceuticals, Actonel®, PrilosecOTC®

E. Strati, PharmD, BMS, Orenicia®

Dr. M. Hall, Ophthalmologist, Inspire, Elestat®

Next Meeting

Tuesday, September 12, 2006 6PM