

South Carolina
Department of Health and Human Services
Post Office Box 8206
Columbia, South Carolina 29202-8206

Pharmacy and Therapeutics (P&T) Committee Meeting
November 2, 2005
MINUTES

1. Call To Order

A meeting of the P&T Committee convened at 4:00 p.m. on Wednesday, November 2, 2005.

2. Welcome

Dr. LaCroix called the meeting to order and welcomed members, guests, and staff. Dr. LaCroix recognized Mr. James Bracewell, Executive Vice-President of the South Carolina Pharmacy Association (SCPhA) who also welcomed meeting attendees to the SCPhA office building. Mr. Bracewell mentioned that the SCPhA Pharmaceutical Industry Advisory Council is open for membership and participation. Dr. LaCroix expressed appreciation to the SCPhA for providing their building as a meeting location for the P&T Committee.

Following these introductory remarks, Dr. LaCroix opened the meeting by stating that the P&T Committee meetings are held in compliance with the Freedom of Information Act's (FOIA) mandate that the public is notified when the public's business is being done, and that furthermore, the public has been notified that this facility is accessible to individuals with disabilities, and special accommodations could have been provided if requested in advance.

3. Committee Members Present:

| | | |
|---------------------------|------------------------|--------------------------|
| J. Kevin Baugh, M.D. | Kelly Jones, Pharm.D. | James M. Lindsey, M.D. |
| Edward M. Behling, M.D. | Jerome E. Kurent, M.D. | Thomas Phillips, R.Ph. |
| Gregory V. Browning, M.D. | Robin K. LaCroix, M.D. | Deborah J. Tapley, R.Ph. |
| | | George E. Vess, Pharm.D. |

DHHS Staff Present:

James M. Assey, R.Ph.
Marion Burton, M.D.
Byron Roberts, J.D.
Deirdra Singleton, J.D.
Caroline Sojourner, R.Ph.
Linda Van Hoose

Other Representation:

First Health Services. – Mary Roberts, R.Ph.
Pharmaceutical Industry Representatives

4. Discussion Topics

A. Committee Meeting Minutes, Wednesday, May 4, 2005.

The draft minutes from the previous P&T Committee meeting were emailed to the members so they could review the document prior to the meeting. Those minutes were unanimously approved. Dr. LaCroix explained that the minutes were from the May 4, 2005 meeting; the September 7, 2005 P&T meeting was cancelled due to statewide travel restrictions.

B. General Issues

PDL Process - Mary Roberts, R.Ph., delivered a presentation on the PDL process. The presentation addressed the following issues: 1) determination of PDL classes, 2) bidding process, 3) P&T Committee review, 4) re-review and discussion of classes, 5) DHHS review of P&T recommendations, 6) implementation, 7) post-implementation, and 8) expenditure trends.

Discussion of PDL Process - Discussion was held regarding who performs the clinical reviews for PDL drug classes. All were informed that a number of clinicians including physicians and pharmacists provide input for the drug reviews. It was pointed out that beginning with the November 2005 P&T meeting, a document that communicates the starting point for P&T reviews will be posted at <http://southcarolina.fhsc.com> several days prior to the P&T meeting.

Discussion was held regarding FDA-approved studies in general. Additionally, drugs for insomnia were briefly discussed. Problems with flurazepam in the elderly were discussed. All were reminded that flurazepam is not a preferred drug on SC Medicaid's PDL. Drugs for overactive bladder were briefly discussed. It was pointed out that Medicaid bulletins are the official source of information regarding which drugs are on the PDL.

The PDL compliance rate was briefly discussed when it was pointed out that almost 94% of the prescriptions for drugs belonging to PDL therapeutic classes are written for preferred drugs.

There was discussion regarding whether hospitalizations increase or decrease as a result of formularies.

Presentations – Due to time constraints, Dr. LaCroix advised the speakers that presentations are limited to two (2) minutes in duration.

C. Public Comment

The following speakers (in the following order) discussed the drugs listed below:

| | Company | Speaker | Drug |
|----|----------------|---|---------------|
| 1) | Takeda | Donald R. Williams, Pharm.D., MBA, Regional Scientific Manger, Takeda Pharmaceuticals America | ACTO PlusMet® |

| | Company | Speaker | Drug |
|----|----------------------------|--|-------------|
| 2) | Sankyo Pharma | Steven R. Ross, M.D., F.A.C.P., Internal Medicine Associates of Florence, SC, Specialist in Clinical Hypertension | Welchol® |
| 3) | KOS Pharmaceutical | Angela G. Robinson, Pharm.D., BCPS, Medical Science Liaison, Medical Affairs, KOS Pharm. | Niaspan® |
| 4) | Reliant Pharmaceuticals | Elaine G. Warner, MS, RN, JD, Assoc. Director, Medical Science Liaisons, Reliant Pharmaceuticals | Antara® |
| 5) | Abbott Pharmaceuticals | Green B. Neal, M.D., Internal Medicine & Cardiology, Columbia, SC | Tricor® |
| 6) | First Horizon | Jennifer Zarintash, D.O., Medical Science Liaison, First Horizon Pharmaceutical Corp. | Triglide® |

Following the period of public comment, Dr. LaCroix thanked each speaker for his or her individual presentation. Dr. LaCroix also reminded Committee members of the requirement to disclose any potential conflicts of interest at this time, prior to discussion of PDL selections.

D. Drug Classes for Re-Review Or Initial Review

Mary Roberts, R.Ph., First Health Corporation led the discussion for the following drug classes:

- Oral Hypoglycemics – Biguanide Combination Products
- Lipotropics – Bile Acid Sequestering Resins
- Lipotropics – Niacin Derivatives
- Lipotropics – Fibric Acid Derivatives

The P&T Committee voted to submit the following recommendations to DHHS:

| No PA Required “Preferred” | PA Required |
|---|--------------------|
| ORAL HYPOGLYCEMICS – BIGUANIDE COMBINATION PRODUCTS | |
| ACTOPLUS MET® AVANDAMET® GLUCOVANCE® GLYBURIDE/METFORMIN | METAGLIP® |

| No PA Required "Preferred" | PA Required |
|---|--|
| LIPOTROPICS – BILE ACID SEQUESTERING RESINS | |
| CHOLESTYRAMINE CHOLESTYRAMINE LIGHT COLESTID® WELCHOL® | PREVALITE® QUESTRAN® QUESTRAN LIGHT® |
| LIPOTROPICS – NIACIN DERIVATIVES | |
| NIACOR® NIASPAN® | |
| LIPOTROPICS – FIBRIC ACID DERIVATIVES | |
| GEMFIBROZIL TRICOR® | ANTARA® LOPID® LOFIBRA® TRIGLIDE® |

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E. Drug Classes for P&T Discussion

Lipotropics – Statins
 Urinary Tract Antispasmodics

The P&T Committee voted to submit the following recommendations to DHHS:

| No PA Required "Preferred" | PA Required |
|--|--|
| LIPOTROPICS – STATINS | |
| ADVICOR® ALTOPREV® CRESTOR® LESCOL® LESCOL XL® LIPITOR® LOVASTATIN PRAVACHOL® ZOCOR® | ALTOCOR® MEVACOR® PRAVIGARD PAC® |
| URINARY TRACT ANTISPASMODICS | |
| DETROL LA® ENABLEX® OXYBUTYNIN OXYTROL® SANCTURA® VESICARE® | DETROL® DITROPAN® DITROPAN XL® |

6. Old Business

Dr. LaCroix reminded Committee members that the recommendations of the P&T Committee will be submitted to DHHS for approval. Final decisions will be communicated to providers in a Medicaid bulletin.

7. New Business

There was discussion regarding the need for First Health provider education representatives to help explain the PDL process to providers. Some difficulty has been encountered when some pharmacists think that a product requires prior authorization (PA) when in fact, it does not.

There was discussion about the ARB's. The Committee was reminded that when there is a dosing change for a specific ARB, no PA is required; however if HCTZ is needed for a patient currently taking an ARB, then PA is required since that is a new/different drug.

There was discussion about the rebates that DHHS receives as a result of the PDL. The Committee was informed that significant savings have been realized as a result of the PDL. P&T members were reminded that DHHS realizes all of the monies obtained through both the Federal Drug Rebate and Supplemental Rebate [Preferred Drug List (PDL)] programs. Upon receipt of the rebates, DHHS returns the federal share to CMS and retains the state share.

8. Resolved Items

Recommendations regarding PDL status for drugs in the following drug classes were approved for submission to DHHS:

- Oral Hypoglycemics – Biguanide Combination Products
- Lipotropics – Bile Acid Sequestering Resins
- Lipotropics – Niacin Derivatives
- Lipotropics – Fibric Acid Derivatives
- Lipotropics – Statins
- Urinary Tract Antispasmodics

The P&T Committee re-validated previous P&T Committee recommendations regarding PDL status for drugs in the following drug classes:

- Insulins
- Oral Hypoglycemics – Biguanides
- Oral Hypoglycemics – Alpha-Glucosidase Inhibitors
- Oral Hypoglycemics - Meglitinides
- Oral Hypoglycemics - Thiazolidinediones
- Oral Hypoglycemics – Sulfonylureas, Second Generation
- Analgesics – Long Acting Narcotics
- Glaucoma Agents – Alpha-2 Adrenergic Agents
- Glaucoma Agents – Beta blockers
- Glaucoma Agents – Carbonic Anhydrase Inhibitors
- Glaucoma Agents – Prostaglandin Agonists
- Antiemetics – Serotonin Receptor Antagonists

Anticholinergics – COPD Therapy
Antibiotics – Macrolides/Ketolides
Pegylated Interferons
Oral Ribavirins
Alzheimer’s Agents – Cholinesterase Inhibitors
Herpes Antivirals
Onychomycosis Antifungals
Topical Immunomodulators
Lipotropics – Adjunct Therapy

9. Unresolved Items

The P&T Committee voted to re-review the Quinolone Antibiotic class at the next P&T meeting.

10. Closing Comments

Dr. LaCroix thanked the Pharmacy Association for hosting the P&T Committee meeting and announced that the next P&T Committee meeting will be held at the South Carolina Pharmacy Association office on Wednesday, February 1, 2006.

11. Adjournment

The meeting adjourned at 6:30 p.m.