

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

**Pharmacy and Therapeutics (P&T) Committee Meeting**  
**May 3, 2006**  
**MINUTES**

**1. Call To Order**

A meeting of the P&T Committee convened at 4:00 p.m. on Wednesday, May 3, 2006.

**2. Welcome**

Dr. LaCroix called the meeting to order and welcomed members, guests, and staff.

Tracy Russell welcomed attendees on behalf of the South Carolina Pharmacy Association.

Dr LaCroix introduced new committee members, Dr. Tan Platt and Dr. Charmaine George.

Dr. LaCroix then 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:**

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.
Kelly Jones, Pharm.D.	James M. Lindsey, M.D.	Ed Vess, Pharm. D.
Charmaine George, M.D.	Tan Platt, M.D.	

**DHHS Staff Present:**

James M. Assey, R.Ph.  
Wanda Metts  
Byron Roberts, J.D.  
Caroline Sojourner, R.Ph.

**Other Representation:**

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

#### 4. Discussion Topics

##### A. Committee Meeting Minutes, Wednesday, February 1, 2005.

The draft minutes from the previous P&T Committee meeting were emailed to the members so that they could review the document prior to the meeting. A change was recommended in the language regarding contact between committee members and representatives from the pharmaceutical industry.

“Members of the pharmaceutical industry are requested to submit information regarding potential PDL drugs to the South Carolina Department of Health and Human Services and should not directly contact or send mailings to P&T Committee Members or their staff regarding the PDL status of drug products. Committee members must not discuss issues regarding PDL status of drugs with members of the pharmaceutical industry.”

##### B. Public Comment

The rules for public comment were outlined. Dr. LaCroix instructed the speakers that presentations would be limited to three minutes. The following speakers (in the following order) discussed the drugs listed below:

	<b>Company</b>	<b>Speaker</b>	<b>Drug</b>
1)	AstraZeneca	Christy S. Scott, Pharm. D.	Pulmicort Turbuhaler®
2)	GlaxoSmithKline	Frederick M. Schaffer, M.D.	Flovent HFA®
3)	KOS Pharmaceuticals	Angela Robinson, Pharm.D.	Azmacort®
4)	Schering-Plough	John F. Howard, Pharm.D.	Asmanex Twisthaler®
5)	Sanofi-Aventis	Jeffery G. Harless, Ph.D., MBA	Ambien CR®
6)	Sepracor	Judith Elaine Tolhurst, M.D.	Lunesta®
7)	Takeda	Ricardo Jose Fermo, M.D.	Rozerem®

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 the discussion of PDL selections.

**C. Drug Class for Re-Review**

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

- Sedative Hypnotics
- Inhaled Corticosteroids – Oral Inhalation Devices
- Second Generation Antihistamines and Decongestant Combination
- Angiotensin Receptor Blockers and Diuretic Combinations
- Short Acting Beta Adrenergic Inhalation Devices
- Antihyperkinesis

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

No PA Required “Preferred”	PA Required
<b>SEDATIVE HYPNOTICS</b>	
TEMAZEPAM LUNESTA®	AMBIEN® AMBIEN CR® DALMANE® (BRAND AND GENERIC) DORAL® HALCION® (BRAND AND GENERIC) PROSOM® (BRAND AND GENERIC) RESTORIL® (ALL STRENGTHS) ROZEREM® SOMNOTE® SONATA®
<b>INHALED CORTICOSTEROIDS – ORAL INHALATION DEVICES</b>	
ASMANEX® AZMACORT® FLOVENT HFA® QVAR®	AEROBID® AEROBID M® PULMICORT TURBUHALER®
<b>ANTIHISTAMINES – SECOND GENERATION</b>	
LORATADINE OTC ZYRTEC® ZYRTEC® SYRUP ( <i>children under 2 years</i> )	ALLEGRA® CLARITIN® RX CLARINEX® FEXOFENADINE

No PA Required "Preferred"	PA Required
<b>ANTI-HISTAMINES – SECOND GENERATION/DECONGESTANT COMBINATION</b>	
LORATADINE-D OTC	ALLEGRA-D® CLARITIN-D® RX CLARINEX-D® ZYRTEC-D®
<b>ANGIOTENSIN RECEPTOR BLOCKERS</b>	
AVAPRO® BENICAR® COZAAR® DIOVAN® MICARDIS® TEVETEN®	ATACAND®
<b>ANGIOTENSIN RECEPTOR BLOCKERS/DIURETIC COMBINATIONS</b>	
AVALIDE® BENICAR HCT® DIOVAN HCT® HYZAAR® MICARDIS HCT® TEVETEN HCT®	ATACAND HCT®
<b>SHORT ACTING BETA ADRENERGIC INHALATION DEVICES</b>	
ALBUTEROL (CFC AND HFA) XOPENEX® HFA	ALUPENT® MAXAIR AUTOHALER®
<b>ANTIHYPERKINESIS</b>	
ADDERALL XR® AMPHETAMINE SALT COMBINATIONS CONCERTA® DEXTROAMPHETAMINE DEXTROAMPHETAMINE SR FOCALIN® FOCALIN XR® METADATE CD® METADATE ER® METHYLIN® SWALLOW TABS/LIQUID METHYLIN® METHYLIN ER® METHYLPHENIDATE METHYLPHENIDATE SR RITALIN LA®	ADDERALL® DEXOSYN® DEXEDRINE® DEXTROSTAT® PEMOLINE (ALL BRANDS) PROVIGIL® RITALIN® RITALIN SR® STRATTERA® ( <i>step edit is in place</i> )

The P&T Committee validated previous decisions for the following classes:  
ACE Inhibitors  
ACE Inhibitor/Diuretic Combinations  
ACE/Calcium Channel Blocker Combinations  
Beta Blockers  
Beta Adrenergic – Long Acting Inhalers  
Beta Adrenergic Nebulizers  
Beta Adrenergic/Corticosteroid Combination  
Cephalosporins – Second and Third generation  
Calcium Channel Blockers – Dihydropyridines and Non-Dihydropyridines  
Histamine-2 Receptor Blockers  
Leukotriene Modifiers  
Nasal Steroids  
Non-Steroidal Anti-Inflammatory Agents  
Osteoporosis  
Proton Pump Inhibitors – Prevacid® (*no PA for children under 12 years of age*)  
Serotonin Receptor Agonists – Migraine Therapy

Regarding Sedative Hypnotics, the P&T Committee discussed whether an “age edit” should be placed on this therapeutic class. The Committee requested that DHHS staff provide a report on the age ranges of beneficiaries receiving sedative hypnotics. The Committee decided to discuss this topic further after they have had an opportunity to review the report.

## **5. 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.

Committee members discussed the potential for conflict of interest when approached by members of the pharmaceutical industry in regard to PDL status of drugs.

## **6. New Business**

Mary Roberts reviewed statistics that reflect the changes that have occurred with South Carolina’s Medicaid program as a result of the implementation of Medicare Part D.

Dr. Kurent discussed the policy of full disclosure that many organizations have in regard to speakers. He proposed that some type of disclosure declaration would be appropriate for speakers (other than an employee of a company) appearing before the P&T Committee. DHHS staff will provide the Committee with an example of a disclosure form that may be used by the P&T Committee.

7. **Resolved Items**

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

Sedative Hypnotics  
Inhaled Corticosteroids – Oral Inhalation Devices  
Second Generation Antihistamines and Decongestant Combination  
Angiotensin Receptor Blockers and Diuretic Combinations  
Short Acting Beta Adrenergic Inhalation Devices  
Antihyperkinesia  
ACE Inhibitors  
ACE Inhibitor/Diuretic Combinations  
ACE/Calcium Channel Blocker Combinations  
Beta Blockers  
Beta Adrenergic – Long Acting Inhalers  
Beta Adrenergic Nebulizers  
Beta Adrenergic/Corticosteroid Combination  
Cephalosporins – Second and Third generation  
Calcium Channel Blockers – Dihydropyridines and Non-Dihydropyridines  
Histamine-2 Receptor Blockers  
Leukotriene Modifiers  
Nasal Steroids  
Non-Steroidal Anti-Inflammatory Agents  
Osteoporosis  
Proton Pump Inhibitors  
Serotonin Receptor Agonists – Migraine Therapy

8. **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, August 2, 2006.

9. **Adjournment**

The meeting adjourned at 6:50 p.m.