#### 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 1, 2013 MINUTES

#### 1. Call to Order

A meeting of the P&T Committee convened at 4:00 p.m. on Wednesday, May 1, 2013.

#### 2. Welcome

Deborah Tapley, R.Ph., called the meeting to order and welcomed members, guests, and staff members.

Ms. Tapley 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:

Deborah Tapley, R.Ph. Thomas Phillips, R.Ph. Tan Platt, MD Jony Bollinger, MD Kelly Jones, PharmD, BCPS James Lindsey, MD Edward Behling, MD

#### **SC DHHS Staff:**

Jim Assey, R.Ph. Janet Giles Marion Burton, MD Shealy Reibold, JD

#### **Magellan Medicaid Administration:**

Lisa Correll, PharmD

## 4. <u>Discussion Topics</u>

#### A. Committee Meeting Minutes, Wednesday, February 6, 2013.

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. The minutes were approved unanimously.

## **B.** Public Comment

Company	Speaker	Drug/Class
Sanofi Pasteur, Inc.	Ellen Shannon, PhD, RN	Sklice® 5% Lotion
Pfizer	†Barbara Phillips, PharmD	Lyrica®
Novartis Pharmaceuticals	Sharon Hernandez, PharmD	Fanapt®
Sunovion Pharmaceuticals	†Lizbhet Delgado, PharmD	Latuda <sup>®</sup>
AstraZeneca	†William Pottorf, PhD	Seroquel XR®
Teva Respiratory, LLC	Chris Picknell	ProAir® HFA

<sup>†</sup> Speakers gave their time back to the Committee.

## C. <u>Drug Classes for Review</u>

Lisa Correll led the discussion for the following drug classes:

**Laxatives & Cathartics** 

Antihypertensives, Sympatholytics

Antiparasitics, Topical

Beta Agonist Agents, Short Acting Oral Agents

Neuropathic Pain

Antipsychotics, Oral

Bronchodilators, Beta Agonist Short Acting Inhalers

Bronchocilators, Beta Agonist Long Acting Inhalers

**Sedative Hypnotics** 

Immunomodulators, Atopic Dermatitis

The chart below represents the recommendations from the P & T Committee:

LAXATIVES & CATHARTICS	
Preferred	Non-Preferred
Milk of Magnesia	Colyte, GoLYTELY, NuLYTELY®
Magnesium Citrate	Kristalose®
Lactulose	MoviPrep <sup>®</sup>
PEG 3350/Electrolyte	OsmoPrep™
MiraLAX OTC	PEG 3350 OTC
	PEG 3350 with Flavor Packs

ANTIHYPERTENSIVES, SYMPATHOLYTICS	
Preferred	Non-Preferred
	Catapres Oral
Guanfacine, Oral	Clonidine, Transdermal
Methyldopa, Oral	Clorpres

Methyldopa/HCTZ Reserpine

ANTIPARASITICS, TOPICAL	
Preferred	Non-Preferred
Permethrin, OTC	Eurax®, Cream/Lotion
Ulesfia <sup>®</sup>	Lindane
Permethrin 5% Cream	Malathion
	Natroba™
	Ovide®
	Sklice <sup>®</sup>
	Spinosad

BETA AGONIST AGENTS, SHORT ACTING ORAL AGENTS	
Preferred	Non-Preferred
Albuterol Syrup	Albuterol Tablet (ER)
Albuterol IR Tablet	Metaproterenol Tablet
	Metaproterenol Syrup
	Terbutaline Tablet

NEUROPATHIC PAIN	
Preferred	Non-Preferred
Gabapentin Capsule/Solution	Gabapentin Tablet
Lyrica®, Capsule/Solution	Gralise <sup>®</sup>
Savella® Dose Pack/Tablets	Horizant®
	Lidoderm® Patch
	Neurontin <sup>®</sup>
	Qutenza <sup>®</sup>

ANTIPSYCHOTICS, ORAL	
Preferred	Non-Preferred
Clozapine ODT	Abilify <sup>®</sup>
Fanapt <sup>®</sup>	Clozaril <sup>®</sup>
Fazaclo <sup>®</sup>	Invega®
Olanzapine	Geodon <sup>®</sup>
Latuda <sup>®</sup>	Olanzapine ODT
Risperidone	Risperdal® Solution/ODT
Quetiapine	Seroquel <sup>®</sup>
Saphris®	Zyprexa <sup>®</sup>
Seroquel XR®	
Ziprasidone Cap	

BRONCHODILATORS, BETA AGONIST SHORT ACTING INHALERS		
Preferred Non-Preferred		
Proventil® HFA	Ventolin® HFA	
ProAir® HFA		

BRONCHODILATORS, BETA AGONIST LONG ACTING INHALERS		
Preferred	Non-Preferred	
Foradil <sup>®</sup>	Arcapta™	
	Serevent® Diskus	

SEDATIVE HYPNOTICS	
Preferred	Non-Preferred
Temazepam (15mg, 30mg)	Ambien®/CR
Zolpidem IR	Doral®
Chloral Hydrate†	Edluar®
	Halcion/Triazolam
	Flurazepam
	Intermezzo®
	Lunesta®
	Restoril®
	Temazepam (7.5mg, 22.5mg)
	Silenor®
	Zaleplon
	Zolpidem ER
†Covered for children 0 -12 years of age only	ZolpiMist™

IMMUNOMODULATORS, ATOPIC DERMATITIS	
Preferred	Non-Preferred
Elidel®	Protopic <sup>®</sup>

## 5. Old Business

Jim Assey advised the Committee that the Universal Prior Authorization (PA) form, developed by the CCIG Workgroup, has been finalized and posted on each plan's website.

## 6. New Business

Jim Assey advised the Committee that the open Pharmacy Forum, originally scheduled for Friday, May 3, 2013 was rescheduled to Monday, May 20, 2013 and a SC Medicaid bulletin would be forthcoming.

Jim Assey introduced Bryan Amick as the new Pharmacy Director at SC DHHS.

## 7. Resolved Items

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

**Laxatives & Cathartics** 

Antihypertensives, Sympatholytics

Antiparasitics, Topical

Beta Agonist Agents, Short Acting Oral Agents

Neuropathic Pain

Antipsychotics, Oral

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**Sedative Hypnotics** 

Immunomodulators, Atopic Dermatitis

## 8. Closing Comments

The next meeting will be held on Wednesday, August 7, 2013, at 4:00 p.m.

## 9. Adjournment

The meeting adjourned at 5:35 p.m.