

GATEWAY HEALTH PLAN®

PHARMACY AND THERAPEUTICS COMMITTEE MEETING

DATE: June 9, 2010

TIME: 5:00PM

The attached minutes of the June 9, 2010 meeting of the Pharmacy and Therapeutics (“P & T”) Committee have participants’ names redacted and will remain in draft until approved at the next scheduled meeting of the P & T Committee, September 8, 2010. No actions taken by the P & T Committee constitute formulary changes unless and until approved by the Department of Public Welfare.

GATEWAY HEALTH PLAN®
PHARMACY AND THERAPEUTICS COMMITTEE MEETING

DATE: June 9, 2010
TIME: 5:00PM

PRESENT:

Dennis Sebastian, RPh, MS

[redacted] R.Ph.

[redacted] PharmD

[redacted] RPh.

[redacted] PharmD

[redacted] MD

[redacted] MD

[redacted] MD

[redacted] PharmD

[redacted] MD

[redacted], MD

[redacted] RPh

[redacted] MD

[redacted] MD

[redacted] DO

Pharmacy Director, Gateway
Clinical Pharmacist, Gateway
Clinical Pharmacist, Gateway
Manager, Clinical Pharmacy, Gateway
Clinical Pharmacist, Gateway
Medical Director, Gateway
Medical Director, Gateway
Family Practitioner, Mercer County
University of Pittsburgh, School of Pharmacy
Pediatrician, Allegheny County
Metro Family Practice
Duquesne University / Giant Eagle Pharmacy
Family Practice, Allegheny County
Community Care Behavioral Health
Value Behavioral Health

Guest:

[redacted]

Pharmacy Student, University of Pittsburgh

CALL TO ORDER

Having confirmed quorum, Mr. Sebastian called the meeting to order at 5:13 p.m.

I. REVIEW OF MINUTES

Discussion: The committee reviewed the minutes from the March 10, 2010 P&T committee meeting.

Action: With two corrections noted, the minutes from the March 10, 2009 meeting were unanimously approved.

II. OLD BUSINESS – Conflict of Interest

Discussion: Mr. Sebastian reminded the committee to complete and return the Conflict of Interest form if they have not yet done so.

III. NEW BUSINESS – FORMULARY REVIEW (New Products)

Velaglucerase alfa (Vpriv)

Discussion: The committee discussed the clinical details of Vpriv.

Action Taken: With no further comments, the committee voted Vpriv as a “may add.” (10 “may add”/ 2 “do not add”)

Sipuleucel-T (Provenge)

Discussion: The committee discussed the clinical details of Provenge.

Action Taken: With no further comments, the committee voted Provenge as a “do not add.” (4 “may add”/8 “do not add”)

Carglumic acid (Carbaglu)

Discussion: The committee discussed the clinical details of Carbaglu.

Action Taken: With no further comments, the committee voted Carbaglu as a “may add.” (10 “may add”/2 “do not add”)

IV. ABBREVIATED REVIEWS:

Hydromorphone HCl extended release (Exalgo)

Discussion: The committee discussed the clinical details of Exalgo.

Action taken: With no further comments, the committee voted gave Exalgo “do not add” status. (1 “may add”/13 “do not add”)

Aztreonam (Cayston)

Discussion: The committee discussed the clinical details of Cayston.

Action taken: With no further comments, the committee voted Cayston “may add” status. (1 “must add”/12 “may add”/1 “do not add”)

Pramipexole extended-release (Mirapex ER)

Discussion: The committee discussed the clinical details of Mirapex ER.

Action taken: With no further comments, the committee unanimously voted Mirapex ER “may add” status.

Doxepin (Silenor)

Discussion: The committee discussed the clinical details of Silenor.

Action taken: With no further comments, the committee unanimously voted Silenor “do not add” status.

Triptorelin pamoate (Trelstar)

Discussion: The committee discussed the clinical details of Trelstar.

Action taken: With no further comments, the committee unanimously voted Trelstar “do not add” status.

Immunoglobulin (Hizentra)

Discussion: The committee discussed the clinical details of Hizentra.

Action taken: With no further comments, the committee unanimously voted Hizentra “do not add” status.

Pancrelipase (Pancreaze)

Discussion: The committee discussed the clinical details of Pancreaze.

Action taken: With no further comments, the committee voted Pancreaze “may add” status. (11 “may add”/3 “do not add”)

Adapalene 0.1% lotion (Differin)

Discussion: The committee discussed the clinical details of Differin lotion.

Action taken: With no further comments, the committee unanimously voted Differin “may add” status.

Imiquimod 3.75% (Zyclara)

Discussion: The committee discussed the clinical details of Zyclara.

Action taken: With no further comments, the committee unanimously voted Zyclara “may add” status.

Everolimus (Zortress)

Discussion: The committee discussed the clinical details of Zortress.

Action taken: With no further comments, the committee unanimously voted Zortress “may add” status.

Miconazole buccal tablets (Oravig)

Discussion: The committee discussed the clinical details of Oravig.

Action taken: With no further comments, the committee unanimously voted Oravig “do not add” status.

Esomeprazole magnesium/naproxen (Vimovo)

Discussion: The committee discussed the clinical details of Vimovo.

Action taken: With no further comments, the committee unanimously voted Vimovo “do not add” status.

Estradiol valerate/dienogest (Natazia)

Discussion: The committee discussed the clinical details of Natazia.

Action taken: With no further comments, the committee voted Natazia “do not add” status. (5 “may add”/9 “do not add”)

Keorolac tromethamine (Sprix)

Discussion: The committee discussed the clinical details of Sprix.

Action taken: With no further comments, the committee unanimously voted Sprix “do not add” status.

Gatifloxacin (Zymaxid)

Discussion: The committee discussed the clinical details of Zymaxid.

Action taken: With no further comments, the committee unanimously voted Zymaxid “may add” status.

V. NEW FDA INDICATIONS

Xifaxan

New Indication: As of March 2010 the FDA approved Xifaxan for the reduction in risk of overt hepatic encephalopathy (HE) recurrence in patients \geq 18 years of age.

Previous Status: Nonformulary

Voted Status: No change in status

Botox

New Indication: As of March 2010, the FDA approved Botox for the treatment of upper limb spasticity in adult patients.

Previous Status: Nonformulary Medicaid/Formulary with PA for Medicare

Voted Status: No change in status

Tarceva

New Indication: As of April 2010, the FDA approved Tarceva for the maintenance treatment of patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) whose disease has not progressed after four cycles of platinum-based first-line chemotherapy and for the treatment of locally advanced or metastatic non-small cell lung cancer after failure of at least one prior chemotherapy regimen

Previous Status: Nonformulary Medicaid/Formulary with PA for Medicare

Voted Status: No change in status

Creon

New Indication: As of April 2010, the FDA approved Creon for the treatment of exocrine pancreatic insufficiency due to chronic pancreatitis or pancreatectomy.

Previous Status: Formulary

Voted Status: No change in status

Omnitrope

New Indication: As of April 2010 the FDA approved Omnitrope for the treatment of children with growth failure due to Prader-Willi Syndrome or Small for Gestational Age.

Previous Status: Nonformulary

Voted Status: No change in status

VI. CLASS REVIEWS

Central Nervous System:

Discussion: The committee reviewed and discussed the existing central nervous system class as published in the Gateway Medicaid Formulary.

Action taken: With no further comments on the class, the committee unanimously approved the central nervous system class as currently published on the Gateway Medicaid Formulary.

Dermatology:

Discussion: The committee reviewed and discussed the existing dermatology class as published in the Gateway Medicaid Formulary.

Action taken: With no comments, the committee unanimously approved the dermatology class currently published on the Gateway Medicaid Formulary.

Endocrine:

Discussion: The committee reviewed and discussed the existing endocrine class as published in the Gateway Medicaid Formulary

Action taken: With no further comments, the committee unanimously approved the endocrine class currently published on the Gateway Medicaid Formulary.

Respiratory:

Discussion: The committee reviewed and discussed the existing respiratory class as published in the Gateway Medicaid Formulary.

Action taken: With no comments, the committee unanimously approved the respiratory class currently published on the Gateway Medicaid Formulary.

VII. POLICY REVIEWS

Medicaid Annual Policy Review:

Discussion: The committee reviewed the changes to the existing policies.

Action taken: The committee unanimously approved all policies as presented.

VIII. MEDICAID ANNUAL FORMULARY REVIEW:

Discussion: The committee reviewed the existing Medicaid formulary.

Action taken: The committee unanimously approved the Medicaid formulary as presented

IX. MISCELLANEOUS

1Q10 CDUR

Discussion: There were no significant changes to the CDUR reports as compared to 4Q09 data.

Prenatal Vitamins with DHA

Discussion: The committee discussed the prenatal vitamin options presented.

Action taken: The committee unanimously approved the addition of two generic formulations of prenatal vitamins with DHA.

Cultural Competency E-learning

Discussion: The committee was reminded to complete the cultural competency e-learning course if they have not yet done so.

Drug Rebate Equalization Act (DRE) Update

Discussion: Mr. Sebastian updated the committee regarding the impact that the passing of the DRE act has on pharmaceutical contract/rebate offerings related to Gateway's Medicaid LOB. The passing of this provision, effective March 23, 2010, extends discounts offered under the Medicaid Drug Rebate Program to Medicaid beneficiaries who receive prescription drugs through Medicaid MCO's. Previously these federal rebates were only provided for purchases made directly by a State for the Medicaid population. Effective 3/23/10, DPW will begin to capture MCO rebates. Since pharmaceutical companies will now be extending far greater utilization rebate offerings based upon DRE, they are scaling back on rebate offerings to MCO's and in some cases eliminating that option. The impact to Gateway will result in termination of existing contracts with reduced and/or eliminated rebate opportunities in the future.

X. ADJOURNMENT

The next committee meeting is on Wednesday September 8, 2010. There being no further business, the committee adjourned at 6:34 p.m.

Respectfully Submitted:

Dennis Andrew Sebastian RPh, MS
Director Pharmacy Services
Gateway Health Plan®

_____ Date:

Completed by:

RPh
Manager, Clinical Pharmacy
Gateway Health Plan®

_____ Date:

DRAFT