

April 2020 PDL/DUR Board Meeting Minutes

Date: April 22, 2020

Members Present: Stone, Brown, King, Maxwell, Caldwell, Nauts, Jost, Anglim, McGrane, Putsch, Blank

Members Absent: Miller

Others Present: Peterson, Sexauer, Feist (DPHHS); Novak (Magellan); Sather, Barnhill, Woodmansey, Artis, Doppler, Opitz (MPQH); Various representatives from the pharmaceutical industry.

Tony King introduced himself and opened the meeting.

Public Comment: There was no public comment.

Meeting Minute Review: The March meeting minutes were reviewed and approved as written.

Department Update:

Dani Feist provided the Department update. She reminded the Board and other attendees that in February the Department lifted all provider and fibrosis score restrictions for Hepatitis C prior authorization and have transitioned responsibility for psychosocial readiness determination to the provider. The Department addressed the fact that PDL recommendations made today are long term decisions and should not be affected by current COVID-19 events. The Department, along with MPQH, are monitoring the COVID-19 situation closely and are making coverage adjustments as needed.

The Department is submitting the Montana Medicaid Disaster Relief SPA today. This requires CMS approval before the Department can proceed. This SPA works with the other documents the state has submitted, 1135 Waiver and the Appendix K. Of note this SPA will temporarily change the items below – this list is not an extensive list.

- Outlines Telehealth Changes
- Allows for all drugs to be available for 90 day refill with the exception of schedule II drugs
- Allows for refill edits to be lowered
- Prior authorizations for medications is expanded by automatic renewal without clinical review, or time/quantity extensions
- Makes exceptions to their published Preferred Drug List if drug shortages occur. This would include options for covering a brand name drug product that is a multi-source drug if a generic drug option is not available
- Increase payment rates for Skilled Nursing and Intermediate Care services

PREFERRED DRUG LIST MEETING

Results of the Board review of Group 3 (Red category):

CLASS	DRUG NAME	2020 RECOMMENDATIONS	Grandfathered
ACNE AGENTS	Aklief®, Amzeeq®-ND Aczone®-NI	<ul style="list-style-type: none"> • Benzoyl Peroxide Combos – Class effect. • Benzoyl Peroxide Agents– Class effect. • Clindamycin Agents – Class effect. • Sodium Sulfacetamide Agents – Class effect. • Azelaic Acid – May add. • Dapsone topical – May add. • Topical Retinoids & Combos – Class effect. 	No

CLASS	DRUG NAME	2020 RECOMMENDATIONS	Grandfathered
		• Erythromycin topical – Class effect.	
ANTI-ALLERGENS, ORAL	Palforzia®-ND	May add with clinical criteria.	No
ANTIBIOTICS, GI	Difucid®-NI	Must have metronidazole and vancomycin - May add others. <i>Note: Difucid® criteria will be updated to include allowing approval if the patient is at a high risk for relapse.</i>	No
ANTIPSORIATICS, TOPICAL	Sorilux®-NI	Class effect; Must have one topical formulation and a scalp formulation. Continue PA criteria.	No
ANTIVIRALS, Oral (HSV/Influenza)	Xofluza®-NI	HSV Antivirals - Class effect. INFLUENZA Antivirals - Must have a CDC recommended agent. May add others. <i>Note: CDC recommendations and criteria for Xofluza® will be discussed at a future DUR meeting.</i>	No
COPD AGENTS	Duaklir Pressair®-ND	Class effect. Must have a nebulizer product and a long - acting combination product.	No
CYTOKINES & CAM ANTAGONIST	Skyrizi®, Rinvoq® - ND; Cosentyx®, Otezla®, Stelara®, Taltz®, Xeljanz®/Xeljanz XR®- NI	Therapeutic alternatives; Do not add anakinra (Kineret®) due to inferior efficacy and increased toxicity.	Yes
FLUOROQUINOLONES, ORAL	Baxdela®-NI	2nd Generation -_Class effect; must have ciprofloxacin. 3rd Generation - Class effect.	No
GLUCOCORTICOIDS, Inhaled	Dulera®, Asmanex® HFA-NI	Class effect.	No
GLUCOCORTICOIDS, Oral	Emflaza®- NI	SHORT ACTING - cortisone, hydrocortisone - Therapeutic alternatives. INTERMEDIATE ACTING - methylprednisolone, prednisone, and prednisolone - Therapeutic alternatives, must include a dosepak. LONG ACTING - betamethasone, dexamethasone - Therapeutic alternatives. BUDESONIDE -_Must have 1 budesonide. <u>Emflaza®</u> - May add, continue PA criteria.	No
HEPATITIS C AGENTS	Mavyret®, Sovaldi®, Harvoni®-NI	Ribavirins - Class effect. Pegylated interferons - Do not add since these are no longer standard of care. All others - Therapeutic alternatives. Must have a pangenotypic agent. Continue with existing PA criteria.	Yes
IMMUNOMODULATORS- Atopic Dermatitis	Dupixent®-NI	Class effect - Must have one. Continue PA criteria.	No
LEUKOTRIENE MODIFIERS	FDA-montelukast	<i>Class to be revisited at May PDL meeting for final decision after further Board research on FDA warning for montelukast.</i>	No

The Board reviewed the blue category in advance of the meeting- Kathy from Magellan reported on new generics and discontinued items in this category. This category of drugs has no new clinically significant information since last review. Board recommendations for Group 2 (Blue category) from 2019 were retained. They are as follows:

CLASS	2020 RECOMMENDATIONS	Grandfathered
ANTIBIOTICS-Inhaled	Therapeutic alternatives.	No
ANTIBIOTICS-TOPICAL	Must have a mupirocin product; may have retapamulin.	No
ANTIBIOTICS, VAGINAL	Therapeutic alternatives.	No
ANTIFUNGALS, ORAL	Must have terbinafine and fluconazole; Must have 1 of clotrimazole or nystatin. May add others. Continue PA criteria on ketoconazole.	No
ANTIFUNGALS, Topical	Therapeutic alternatives for approved indications.	No
ANTIHISTAMINES, Minimally Sedating	Class effect; must have one single ingredient agent.	No
ANTINEOPLASTIC AGENTS, TOPICAL	Therapeutic alternatives.	No
ANTIPARASITICS, TOPICAL	Therapeutic alternatives. Continue PA criteria.	No
ANTIVIRALS-Topical	Class effect. <i>Note: The Board recommended removing acyclovir contingent on the addition of OTC Abreva® due to increased efficacy. The Department will research this possibility.</i>	No
BLADDER RELAXANTS	Class effect. Must have 1 long acting agent (either by half-life or dosage form). May add Myrbetriq.	No
BPH AGENTS	ALPHA BLOCKERS - Class effect. ANDROGEN HORMONE INHIBITORS/COMBOS - Class effect. PDE-5 for BPH - tadalafil will be non-preferred. Continue with PA criteria.	No
BRONCHODILATORS	Beta Agonist, Long Acting - Class effect. Beta Agonist, Short Acting - Class effect.	No
CEPHALOSPORINS & RELATED AGENTS	2nd Generation - Class effect. 3rd Generation - Class effect.	No
EPINEPHRINE, Self Injected	Class effect.	No
IMMUNOMODULATORS-Topical	Class effect.	No
IMMUNOSUPPRESSANTS	Must have all chemical entities.	Yes
INTRANASAL RHINITIS AGENTS	Nasal Steroids - Class effect. Nasal Antihistamines & others - Class effect.	No
MACROLIDES & KETOLIDES	Class effect - Must have azithromycin, clarithromycin, and erythromycin.	No
METHOTREXATE AGENTS	Must have one oral and one injectable agent.	No
PHOSPHATE BINDERS	Class effect.	No
ROSACEA AGENTS, Topical	Must have one metronidazole product; May add others.	No
SMOKING CESSATION	Must have a nicotine patch and either nicotine gum or lozenge. Must have Chantix®. May add others.	No
STEROIDS, Topical	LOW, MEDIUM, HIGH and VERY HIGH POTENCY CLASSES - Class effect for each class; must have 1 cream and 1 ointment from each category, may add other forms.	No
TETRACYCLINES	Must have doxycycline. May add others.	No

Meeting adjourned at 2:55 PM. The final PDL meeting for 2020 will be held on May 20th in this same format.