## **March 2024 PDL/DUR Board Meeting Minutes**

**Date:** March 13, 2024

Members Present: Barnhill, Blake, Blank, Brown (logged on after 2pm), Caldwell, Jost, McGrane, Nauts

Members Absent: Anglim, Putsch, Stone

**Others Present:** Katie Hawkins, Shannon Sexauer, Dani Feist (DPHHS); Kathy Novak (Magellan); Bahny, Miranda, Zody (MPQH); and representatives from the pharmaceutical industry.

Public Comment: Speaker information is as follows:

- Kimberly Simpson, United Therapeutics Corporation Tyvaso®/Tyvaso® DPI
- Tracey Maravilla, Ascendis Pharma Inc Skytrofa®
- James Templeton, Astellas Pharma Veozah®
- Marcus Stanaland, GSK Jesduvrog®
- Shiley Quach, Novartis Leqvio®
- Josh Wageman, Amgen PCSK9 recommendation updates
- Shannon Payne, BioCryst Orladeyo®

Meeting Minutes Review: Minutes from the February 2024 DUR Board meeting were reviewed and approved as written.

Department Update: No Department update.

## PREFERRED DRUG LIST MEETING

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

CLASS	DRUGS	2024 RECOMMENDATIONS	Grandfather
BILE SALTS	Reviewed NI-Livmarli® Bylvay®	Must have one ursodiol.	NO
COLONY STIMULATING FACTORS	NI- Stimufend®	Therapeutic alternatives. Must have one filgrastim-like agent and one pegfilgrastim-like agent.	NO
ERYTHROPOIESIS STIMULATING AGENTS- HEMATOPOIETIC AGENTS	ND- Jesduvroq® NI-Reblozyl®	Therapeutic alternatives.	NO
ESTROGEN, OTHERS: ORAL, TRANSDERMAL, & VAGINAL	ND-Veozah®	ORAL/TRANSDERMAL: Class effect. Must have one topical and one oral.  VAGINAL: Therapeutic alternatives.	NO
GI MOTILITY, CHRONIC	NI-Linzess®	Therapeutic alternatives for each of the following categories: OIC: Movantik®, Relistor®, Amitiza®, Symproic® IBS-D: Alosetron®, Viberzi® IBS-C/CIC: Amitiza®, Ibsrela®, Linzess®, Trulance®, Motegrity® Continue with existing PA Criteria.	NO

GROWTH HORMONE	ND-Ngenla® Sogroya®	Therapeutic alternatives.	NO
HYPOGLYCEMICS, INCRETIN MIMETICS/ENHANCERS	ND-Zituvio®	DPP-IV Inhibitors: Therapeutic alternatives. Must have one single ingredient agent. GLP-1/GIP AND COMBINATIONS: Therapeutic alternatives. Must have one single ingredient agent. Must have one agent with cardiovascular benefit.	NO
HYPOGLYCEMICS, INSULINS	ND- Rezvoglar®	Class effect for each group. Must have one from each. (Human R, N, Rapid-acting, Long-Acting, Rapid/Intermediate, Reg/Intermediate Combos). Must have U-500 pen, do not add U-500 vial.	NO
HYPOGLYCEMICS, SGLT2	ND-Inpefa®  NI-Synjardy® Farxiga® Jardiance®	Must have one agent with cardiovascular disease benefit. All others class effect.	NO
LIPOTROPICS, OTHERS	NI-Leqvio®	Must have gemfibrozil and one fenofibrate.	NO
LIPOTROPICS, STATINS	NI-Ezallor®	Must have one high potency agent, must have ezetimibe.	NO
PAH AGENTS: ORAL AND INHALED	NI-Revatio®	Must have one ERA and one PDE-5. Retain GF & existing PA criteria.	YES
PHOSPHATE BINDERS	ND-Xphozah®	Class effect.	NO
PROTON PUMP INHIBITORS, OTHERS/ H. PYLORI AGENTS	ND- Konvomep® NEWLY REBATE	Class effect.	NO
	ELIGIBLE- Voquezna®	Previously, Voquezna® did not have a rebate so it was not reviewed at previous PDL meetings.	

The Board reviewed the **blue category** in advance of the meeting. Kathy from Magellan reported on new doses and discontinued items in this category, as well as guideline updates. This category of drugs has no new clinically significant information since last review. Board recommendations for Group 2 (Blue category) from 2023 were retained. Blue category recommendations are as follows:

CLASS	2024 RECOMMENDATIONS	Grandfather
ANDROGENIC AGENTS, TOPICAL	Class effect.	NO
ANGIOTENSIN MODULATORS & COMBO	Angiotensin Modulator Combinations: Therapeutic alternatives.  Angiotensin II Receptor Blockers & Combinations: Therapeutic alternatives.  ACE Inhibitors & Combinations: Class effect. Do Not Add Tekturna® or Tekturna® HCT (due to aliskiren).	NO
ANTIANGINAL/ANTI-ISCHEMIC AGENTS	May add with PA criteria.	NO
ANTICOAGULANTS	Must have one LMWH, warfarin, Eliquis®, and Xarelto®.	NO
ANTIEMETIC AGENTS	Must have one 5-HT3 agent and one metoclopramide product. Continue with existing PA criteria.	NO

ANTIHYPERURICEMICS	Must have allopurinol and a single ingredient colchicine product. Continue with existing PA criteria.	NO
BETA-BLOCKERS	Must have metoprolol ER and carvedilol in some form. All other single ingredient agents have a class effect. Do not add combo agents containing diuretics-not first line agents and issues of concern with thiazides.	NO
BONE RESORPTION SUPPRESSION & RELATED AGENTS	Nasal Calcitonins: Class effect with existing PA criteria.  Bisphosphonates & Bone Resorption. Others: Class effect.	NO
CALCIUM CHANNEL BLOCKERS (DHP & non-DHP) and COMBOS	Must have a long-acting diltiazem and a long-acting verapamil.  Must have amlodipine. All others are class effect.	NO
GLUCAGON AGENTS	Therapeutic alternatives.	NO
HAE TREATMENT	Therapeutic alternatives. Must include one on-demand treatment and one prophylactic treatment. Continue with existing PA criteria.	NO
HYPOGLYCEMICS: ALPHA GLUCOSIDASE INHIBITORS	Class effect.	NO
HYPOGLYCEMICS: MEGLITINIDES	Class effect.	NO
HYPOGLYCEMICS: METFORMINS	Must have metformin IR. Class effect for others.	NO
HYPOGLYCEMICS: SULFONYLUREAS	Class effect.	NO
HYPOGLYCEMICS: TZDs	Class effect.	NO
IDIOPATHIC PULMONARY FIBROSIS	Therapeutic alternatives. Continue with existing PA criteria.	NO
PANCREATIC ENZYMES	Class effect with patients being grandfathered on current treatment.	YES
PLATELET AGGREGATION INHIBITORS	Must have immediate release aspirin. Must have one of prasugrel, clopidogrel, ticagrelor, or vorapaxar. Class effect for other agents. Grandfathered	YES
POTASSIUM BINDERS	Therapeutic alternatives.	NO
PROGESTINS FOR CACHEXIA	Class effect.	NO
ULCERATIVE COLITIS AGENTS	Class effect. Must have more than one route.	NO
UTERINE DISORDER TREATMENTS	Therapeutic alternatives.	NO

One green category was not reviewed as all chemical entities are preferred at this time.

Class
PITUITARY SUPPRESSIVE AGENTS, LHRH

Meeting adjourned at 2:16 p.m.

The next PDL meeting will be April 17, 2024 in this same format. Additional information will be posted by the Department.