Introductions: Derek Quinn, PharmD, was introduced as newest member of the Committee. Members present: Drs. Forshee, Quinn, Inman, Nedd, Perri, Dake, Thill, Ryan, Dillon, Casher; State staff present: Debera Eggleston, MD, Nina Mattarella, MD, Sue Moran, RN, Helen Walley; Magellan staff present, Donna Johnson, PharmD, Annette Paul, RPh

Approval of Minutes of March 8, 2011 Meeting: Approved by voice vote

New Drug Reviews: Following presentation of drug monographs, review and discussion, the Committee recommended to the Department the following:

1. Alsuma (sumatriptan): add to the Michigan Pharmaceutical Product List (MPPL) and to the Preferred Drug List (PDL) class Serotonin Receptor Agonists with prior authorization (PA)
2. Atelvia (risedronate): add to the MPPL and to the PDL class Osteoporosis Agents: Bisphosphonates with PA
3. Butrans (buprenorphine): Create a sub class of the Narcotics-Long Acting class in the PDL to include the transdermal products, and add to the MPPL and to that new PDL class without PA
4. Cuvposa (glycopyrrolate): add to the MPPL
5. Cycloset (bromocriptine): add to the MPPL and create a class in the Diabetes section of the PDL for this drug; add to the PDL without PA –
6. Egrifta (tesamorelin): add to the MPPL with PA; the Committee would like to review the PA criteria when developed to give oversight regarding excluding cosmetic reasons for approving this product
7. Ella (ulipristal): add to the MPPL and review quantity limits for this and other emergency contraceptive products on the list
8. Kapvay (clonidine): add to the MPPL and to the PDL class Drugs for ADHD; create a separate class for the agents which are not controlled substance stimulants to appear on the PDL
9. Kombiglyze XR (saxagliptan/metformin): add to the MPPL and to the PDL class Oral Hypoglycemics-Combinations –
10. Latuda (lurasidone): add to the MPPL and to the Behavioral Health PDL class Atypical Antipsychotics
11. Nexiclon XR (clonidine): add to the MPPL and PDL with PA, as part of a new Cardiac class for centrally acting alpha adrenergic blockers –
12. Nuedexta (quinidine/dextromethorphan): add to the MPPL
13. Moxeza (moxifloxacin): add to the MPPL and to the PDL class Ophthalmic Fluoroquinolones with PA
14. Vandetanib (vandetanib): add to the MPPL
Review of Preferred Drug List

Classes: Following review of the workgroup recommendations and extensive discussion the Committee recommended to the Department the following:

Anti Infectives

- Antifungals-Onychomycosis: no change to the current classification of drug products
- Antifungals-Oral: no change to the current classification of drug products
- Antivirals-Herpes: no change to the current classification of drug products
- Antivirals-Influenza: no change to the current classification of drug products
- Antivirals-Topical: no change to the current classification of drug products

Cephalosporins

- 1st Gen: no change to the current classification of drug products
- 2nd Gen: no change to the current classification of drug products
- 3rd Gen: no change to the current classification of drug products

Hepatitis C: no change to the current classification of drug products

Macrolides: Put PA on clarithromycin ER; no change to the current classification of the other drug products

Oxalodinones: no change to the current classification of drug products

Quinolones: no change to the current classification of drug products

Ophthalmic Fluoroquinolones: no change to the current classification of drug products

Otic Quinolones: no change to the current classification of drug products

Ophthalmic Macrolides: no change to the current classification of drug products

Topical Antibiotics: no change to the current classification of drug products

Asthma-Allergy

Inhaled Anticholinergics: no change to the current classification of drug products

- 2nd Gen: place PA on fexofenadine, cetirizine chewable tablets; remove PA from loratadine ODT

Nasal Antihistamines: no change to the current classification of drug products

Beta Adrenergics-Short Acting: make Ventolin HFA the only inhaler available without PA; the built in counting device is a better patient aid than the other two albuterol HFA products to ensure beneficiaries are not using an inhaler without active ingredient; allow beneficiaries currently using the Proventil and ProAir HFA inhalers up to 12 months to transition to the Ventolin (grandfathering); work with the DUR Board to construct a physician education project to deal with this issue; work with the pharmacy contractor to create messages for physicians and pharmacists notifying them of the changes; inquire of the pharmacy...
licensing authorities and the FDA about the interchangeability of albuterol HFA inhalers
Beta Adrenergics-Long Acting: no change to the current classification of drug products; a DUR Board activity did review how many beneficiaries were taking these products without concomitant corticosteroids as a patient safety concern, and that analysis was presented to the Committee
Beta Adrenergics for Nebulizers: no change to the current classification of drug products
Beta Adrenergic/ Corticosteroid Inhaler Combinations: no change to the current classification of drug products
Inhaled Glucocorticoids: no change to the current classification of drug products
Leukotiene Inhibitors: no change to the current classification of drug products
Nasal Steroids: put PA on Nasonex; no change to the current classification of the other drug products

Public Comment: the following persons addressed the Committee:
   Terry Dickson, MD, Shionogi Pharma, Kapvay
   Bob Moreland, Andy Crowe, Astellas, VESIcare, Protopic
   Dr. Gregory Oldford, Pfizer, Toviaz
   Andrea Wilson, PharmD, Fran Gardner, PhD, Novonordisk, Levemir, Novolog, Victoza, Norditropin
   Amy Palmer, PhD, UCB, Cimzia
   Maribeth Kowalski, PharmD, Purdue Pharma, Butrans
   Gary Engelmann, PhD, Avanir, Nuedexta

The next meeting of the Committee is scheduled for Tuesday, September 13, 2011.
The PDL classes in Diabetes, Gastrointestinal and Miscellaneous will be reviewed