

New York State Medicaid Pharmacy and Therapeutics Committee Meeting Agenda

The Pharmacy & Therapeutics (P&T) Committee will meet April 15, 2011, from 8:45 a.m. to 4:30 p.m., Meeting Room 6, Concourse, Empire State Plaza, Albany, New York

Agenda Items

A. Preferred Drug Program: Initial Review

Description: The Committee will review the following therapeutic classes for Preferred Drug Program inclusion and recommend preferred and non-preferred status.

1. Tetracyclines

Drugs Affected: Adoxa (doxycycline monohydrate), demeclocycline, Doryx (doxycycline hyclate DR), doxycycline hyclate, doxycycline hyclate DR, doxycycline monohydrate, Dynacin (minocycline HCL), minocycline HCL, minocycline ER, Oracea (doxycycline monohydrate), Periostat (doxycycline hyclate), Solodyn ER (minocycline ER), tetracycline, Vibramycin (doxycycline hyclate), Vibra-tabs (doxycycline hyclate)

B. Preferred Drug Program: Re-review

Description: The Committee will re-review therapeutic classes subject to the Preferred Drug Program periodically as described and listed below. The following therapeutic classes to be re-reviewed contain new relevant clinical and/or financial information. Therapeutic classes not included on this agenda may be re-reviewed at a later date pending new relevant clinical information.

- The Committee will review new clinical and financial information as required, to recommend preferred and non-preferred drugs. ^
- The Committee will **only** consider clinical information which is new since the previous review of the therapeutic class and then consider financial information.
- New clinical information may include a new drug or drug product information, new indications, new safety information or new published clinical trials (comparative evidence is preferred, or placebo controlled when no head-to-head trials are available). Information in abstract form alone, posters, or unpublished data are poor quality evidence for the purpose of re-review and submission is discouraged.
- Those wishing to submit new clinical information must do so in an electronic format by **April 1, 2011** or the Committee may not have ample time to review the information.

^The current preferred and non-preferred status of drugs subject to the Preferred Drug List (PDL) may be viewed at https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PDL.pdf

1. Prescription Non-Steroidal Anti-Inflammatory Agents

(previous review date September 16, 2010)

Drugs Affected: Anaprox (naproxen sodium), Anaprox DS (naproxen sodium DS) Arthrotec (diclofenac sodium/misoprostol), Cambia (diclofenac potassium), Cataflam (diclofenac potassium), Clinoril (sulindac), Daypro (oxaprozin), diclofenac potassium, diclofenac sodium, diclofenac sodium XR, diflunisal, etodolac, etodolac SA, Feldene (piroxicam), fenoprofen, Flector (diclofenac epolamine), flurbiprofen, ibuprofen, Indocin (indomethacin), indomethacin, indomethacin SR, ketoprofen, ketoprofen SA, ketorolac, meclofenamate, mefenamic acid, meloxicam, Mobic (meloxicam), nabumetone, Nalfon (fenoprofen), Naprelan (naproxen sodium CR), Naprosyn (naproxen), Naprosyn EC (naproxen EC), naproxen, naproxen sodium, naproxen EC, oxaprozin, Pennsaid (diclofenac sodium topical solution), piroxicam, Ponstel (mefenamic acid), sulindac, tolmetin, Vimovo (naproxen and esomeprazole magnesium), Voltaren (diclofenac sodium), Voltaren XR (diclofenac sodium DR), Voltaren Gel (diclofenac sodium), Zipsor (diclofenac potassium)

2. Angiotensin Receptor Blockers (ARBs)

(previous review date March 11, 2010)

Drugs Affected: Atacand (candesartan cilexetil), Avapro (irbesartan), Benicar (olmesartan medoxomil), Cozaar (losartan), Diovan (valsartan), Edarbi (azilsartan medoxomil), losartan, Micardis (telmisartan), Teveten (eprosartan mesylate)

3. ARB/Calcium Channel Blockers

(previous review date March 11, 2010)

Drugs Affected: Azor (olmesartan/amlodipine), Exforge (valsartan/amlodipine), Exforge HCT (valsartan/amlodipine/HCTZ), Tribenzor (olmesartan/amlodipine/HCTZ), Twynsta (telmisartan/amlodipine)

4. ARB/Diuretic Combinations

(previous review date March 11, 2010)

Drugs Affected: Atacand HCT (candesartan cilexetil/hctz), Avalide (irbesartan/hctz), Benicar HCT (olmesartan medoxomil/hctz), Diovan HCT (valsartan/hctz), Hyzaar (losartan/hctz), losartan/HCTZ, Micardis HCT (telmisartan/hctz), Teveten HCT (eprosartan/hctz)

5. Direct Renin Inhibitors

(previous review date February 26, 2009)

Drugs Affected: Amturnide (aliskiren/amlodipine/hydrochlorothiazide), Tekamlo (aliskiren/amlodipine), Tekturna (aliskiren), Tekturna HCT (aliskiren/HCTZ), Valturna (valsartan/aliskiren)

6. HMG-CoA Reductase Inhibitors/Statins

(previous review March 11, 2010)

Drugs Affected: Advicor (lovastatin/niacin extended-release), Altoprev (lovastatin extended-release), Caduet (atorvastatin/amlodipine), Crestor (rosuvastatin), Lescol (fluvastatin), Lescol XL (fluvastatin XL), Lipitor (atorvastatin), Livalo (pitavastatin), lovastatin, Mevacor (lovastatin), Pravachol (pravastatin), pravastatin, Simcor (simvastatin/niacin extended-release), simvastatin, Vytorin (simvastatin/ezetimibe), Zocor (simvastatin)

7. Triglyceride Lowering Agents

(previous review date March 11, 2010)

Drugs Affected: Antara (fenofibrate), fenofibrate, fenofibric acid, Fenoglide (fenofibrate), Fibricor (fenofibric acid), gemfibrozil, Lipofen (fenofibrate), Lofibra (fenofibrate), Lopid (gemfibrozil), Lovaza (Omega-3 acid ethyl esters), Tricor (fenofibrate), Triglide (fenofibrate), Trilipix (fenofibric acid delayed release)

8. Anti-Fungals

(previous review date September 16, 2010)

Drugs Affected: ciclopirox laquer, Grifulvin V (griseofulvin), Gris-PEG (griseofulvin), griseofulvin, itraconazole, Lamisil (terbinafine), Penlac (ciclopirox), Sporanox (itraconazole), terbinafine

9. Central Nervous System Stimulants

(previous review date April 29, 2010)

Drugs Affected: Adderall (amphetamine salt combo), Adderall XR (amphetamine salt combo XR), amphetamine salt combo, amphetamine salt combo ER, Concerta (methylphenidate), Daytrana (methylphenidate), Desoxyn (methamphetamine), Dexedrine Spansule (dextroamphetamine), dexamethylphenidate, dextroamphetamine sulfate, dextroamphetamine sulfate SA, Focalin (dexamethylphenidate), Focalin XR (dexamethylphenidate XR), Metadate CD (methylphenidate CD), Metadate ER (methylphenidate ER), methamphetamine, Methylin (methylphenidate), Methylin ER (methylphenidate ER), methylphenidate, methylphenidate ER/SA, Nuvigil (armodafinil), Procentra (dextroamphetamine sulfate), Provigil (modafinil), Ritalin (methylphenidate), Ritalin LA (methylphenidate LA), Ritalin SR (methylphenidate SR), Vyvanse (lisdexamfetamine dimesylate)

10. Multiple Sclerosis Agents

(previous review date June 11, 2010)

Drugs Affected: Avonex (interferon beta-1a), Betaseron (interferon beta-1b), Copaxone (glatiramer acetate), Extavia (interferon beta-1b), Gilenya (fingolimod), Rebif (interferon beta-1a)

11. Sedative Hypnotics/Sleep Agents

(previous review date April 29, 2010)

Drugs Affected: Ambien (zolpidem), Ambien CR (zolpidem CR), chloral hydrate, Dalmane (flurazepam), Doral (quazepam), Edluar (zolpidem sublingual tablet), estazolam, flurazepam, Halcion (triazolam), Lunesta (eszopiclone), Prosom (estazolam), Restoril (temazepam), Rozerem (ramelteon), Silenor (doxepin), Somnote (chloral hydrate), Sonata (zaleplon), temazepam, triazolam, zaleplon, zolpidem, zolpidem ER, Zolpimist (zolpidem)

12. Serotonin Receptor Agonists (Tryptans)

(previous review date April 29, 2010)

Drugs Affected: Amerge (naratriptan), Axert (almotriptan), Frova (frovatriptan), Imitrex (sumatriptan), Maxalt (rizatriptan), Maxalt-MLT (rizatriptan), naratriptan, Relpax (eletriptan), sumatriptan, Treximet (sumatriptan/naproxen), Zomig (zolmitriptan)

13. Topical Anti-Virals

(previous review date June 11, 2010)

Drugs Affected: Abreva (docosanol), Denavir (penciclovir), Xerese (acyclovir/hydrocortisone), Zovirax (acyclovir)

14. Topical Agents for Psoriasis

(previous review date June 11, 2010)

Drugs Affected: calcipotriene ointment, calcipotriene solution, Calcitrene (calcipotriene), Dovonex (calcipotriene), Taclonex (calcipotriene/betamethasone dipropionate), Vectical (calcitriol)

15. Ophthalmic Antihistamines

(previous review date June 11, 2010)

Drugs Affected: azelastine, Bepreve (bepotastine), Elestat (epinastine), Emadine (emedastine), Lastacaft (alcaftadine), Optivar (azelastine), Patanol (olopatadine), Pataday (olopatadine)

16. Ophthalmic Fluoroquinolones

(previous review date date June 11, 2010)

Drugs Affected: Besivance (besifloxacin), Ciloxan (ciprofloxacin), ciprofloxacin, IQUIX (levofloxacin), levofloxacin, Moxeza (moxifloxacin), Ocuflax (ofloxacin), ofloxacin, Quixin (levofloxacin), Vigamox (moxifloxacin), Zymar (gatifloxacin), Zymaxid (gatifloxacin)

17. Non-Steroidal Anti-Inflammatory - Ophthalmic

(previous review date June 11, 2010)

Drugs Affected: Acular (ketorolac), Acular LS (ketorolac), Acuvail (ketorolac tromethamine), Bromday (bromfenac), diclofenac, flurbiprofen, ketorolac, Nevanac (nepafenac), Ocufer (flurbiprofen), Voltaren (diclofenac), Xibrom (bromfenac)

18. Ophthalmic Prostaglandin Agonists

(previous review date June 11, 2010)

Drugs Affected: Lumigan (bimatoprost), Travatan (travoprost), Travatan Z (travoprost), Xalatan (latanoprost)

19. Antihistamines- Second Generation

(previous review date June 11, 2010)

Drugs Affected: Allegra/Allegra-D (fexofenadine/fexofenadine PSE), cetirizine/cetirizine-D OTC, cetirizine Rx, Clarinex/Clarinex-D (desloratadine/desloratadine PSE), fexofenadine, fexofenadine-D, levocetirizine, loratadine/loratadine D OTC, Semprex-D (acrivastine/PSE), Xyzal (levocetirizine)

20. Urinary Tract Antispasmodics

(previous review date April 29, 2010)

Drugs Affected: Detrol (tolterodine), Detrol LA (tolterodine LA), Ditropan (oxybutynin), Ditropan XL (oxybutynin XL), Enablex (darifenacin), Gelnique (oxybutynin gel), oxybutynin, oxybutynin ER, Oxytrol (oxybutynin), Sanctura (trospium), Sanctura XR (trospium), Toviaz (fesoterodine fumarate), Vesicare (solifenacin)

Agenda Timeline (subject to change based on meeting proceedings)

8:45 – 9:00	Welcome, Introductions and DOH Updates
9:00 – 10:30	Public Comment Period
10:30 – 10:45	Break
10:45-12:15	PDP clinical review(s) and re-reviews
12:15 - 1:30	Lunch Break/Executive Session (PDP financial review)
1:30 - 1:45	Summary of final recommendations
1:45 – 3:00	PDP clinical re-reviews (cont.)
3:00 - 3:30	Afternoon Break/Executive Session (PDP financial review)
3:30 - 3:45	Summary of final recommendations
3:45 - 4:30	Final Comments and Adjournment

- Interested parties must notify DOH by **April 7, 2011** of their request to address the Committee during the public comment period. Requests may be made by calling 518-486-3209 or e-mailing pandtc@health.state.ny.us. (Please reference P&T Committee).
- Public comments are limited to therapeutic classes on the agenda and new clinical information for the PDP classes being re-reviewed. Comments must be brief (2 minutes) and the total comment period will not exceed 90 minutes.
- All written statements must be received in an electronic format by **April 7, 2011**. Written statements should summarize key points and may not exceed two (2) pages in length.
- Any studies cited should be referenced, with the primary source of funding included.
- Clinical information must be submitted in an electronic format by **April 1, 2011**, or the Committee may not have ample time to review the information. For the therapeutic classes subject to the PDP re-review, submitted clinical information must be new since the previous review of the therapeutic class.