MEDICAID PHARMACY PRIOR AUTHORIZATION ADVISORY COMMITTEE

Recommendations Summary May 11, 2016

In Attendance:

	Committee Member	Yes or No
1	Rosanne Barber	Yes
2	Ward Brown, M.D.	Yes
3	Catherine Decker, PharmD	Yes-Arrived @ 11:30 am
4	Ronald Diamond, M.D.	No
5	John J. W. Fangman, M.D.	Yes
6	Lawrence Fleming , M.D.	Yes
7	Kevin Izard, M.D.	Yes-Arrived @12:27 pm
8	Steve Maike, RPh	Yes
9	William E. Raduege, M.D.	Yes
10	Robert Rohloff, M.D.	Yes
11	Pat Towers	Yes
12	Alicia Walker, PharmD	Yes
13	Michael Witkovsky, M.D.	Yes-Arrived @ 9:15 am

MAY 2016 THERAPEUTIC DRUG CLASS

ANGIOTENSIN MODULATORS

ANGIOTENSIN MODULATOR COMBINATIONS

BETA BLOCKERS

CALCIUM CHANNEL BLOCKERS

LIPOTROPICS, OTHER

LIPOTROPICS, STATINS

PAH AGENTS, ORAL AND INHALED

ANTICOAGULANTS

PLATELET AGGREGATION INHIBITORS

HYPOGLYCEMICS, ALPHA-GLUCOSIDASE INHIBITORS

HYPOGLYCEMICS, INCRETIN MIMETICS/ENHANCERS

HYPOGLYCEMICS, INSULIN AND RELATED AGENTS

HYPOGLYCEMICS, MEGLITINIDES

HYPOGLYCEMICS, OTHER

HYPOGLYCEMICS, SULFONYLUREAS

HYPOGLYCEMICS, TZD

ANTIEMETIC/ANTIVERTIGO AGENTS

PANCREATIC ENZYMES

PROTON PUMP INHIBITORS

ULCERATIVE COLITIS AGENTS

H. PYLORI TREATMENT

ANTIBIOTICS, GI

ANTIBIOTICS, INHALED

ANTIBIOTICS, VAGINAL

ANTIFUNGALS, ORAL

ANTIVIRALS, ORAL

CEPHALOSPORINS AND RELATED AGENTS

PENICILLINS

FLUOROQUINOLONES, ORAL

MACROLIDES/KETOLIDES

TETRACYCLINES

ACNE AGENTS, TOPICAL

ANTIBIOTICS, TOPICAL

ANTIFUNGALS, TOPICAL

ANTIPARASITICS, TOPICAL

ANTIVIRALS, TOPICAL

ANALGESICS, MISCELLANEOUS

ANALGESICS, NARCOTICS LONG

ANALGESICS, NARCOTICS SHORT

OPIATE DEPENDENCY

ANTIMIGRAINE AGENTS

SKELETAL MUSCLE RELAXANTS

BLADDER RELAXANT PREPARATIONS

BONE RESORPTION SUPPRESSION AND RELATED AGENTS

GROWTH HORMONE

ANDROGENIC AGENTS

BPH TREATMENTS

PHOSPHATE BINDERS

HEPATITIS B AGENTS

HEPATITIS C AGENTS

MULTIPLE SCLEROSIS AGENTS

GI MOTILITY CHRONIC

Recommendations Summary:

The following drug classes presented for review had no recommended changes since the May 13, 2015 Wisconsin Medicaid Pharmacy PA Advisory Committee (PAC) meeting. The PAC had no additional discussion regarding these drug classes.

Drug Classes included in the committee block vote:

- Analgesics, Narcotics Short
- Antibiotics, GI
- Antibiotics, Topical
- Antibiotics, Vaginal
- Antiparasitics, Topical
- Antivirals, Oral
- Antivirals, Topical
- Beta Blockers
- BPH Treatments
- Fluoroquinolones, Oral
- Hepatitis B
- Hypoglycemics, Alpha-Glucosidase Inhibitors
- Hypoglycemics, Sulfonylureas
- Pancreatic Enzymes
- Penicillins
- Skeletal Muscles Relaxants
- Ulcerative Colitis Agents

Drug Class removed from the committee block vote based on discussion:

- Antibiotics, Inhaled
- Discussion: Robert Rohloff inquired about whether Cystic Fibrosis Centers have an
 awareness of the Wisconsin Medicaid's Prior Authorization (PA) processes. Rachel
 Currans-Henry stated she believed Cystic Fibrosis Centers are aware of Wisconsin
 Medicaid's coverage and PA processes given she had met with center providers in the
 past. She also noted that if necessary, staff would reach out to them.
- Ward Brown made a motion to accept staff recommendations for a block vote on the drug classes listed above.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
ANTIBIOTICS, INHALED						
	Current	Current				
	Market	PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
KITABIS PAK (INHALATION)	44.4%	ON	Yes			
BETHKIS (INHALATION)	52.6%	ON	Yes			
TOBI (INHALATION)	0.7%	OFF	No			
TOBRAMYCIN PAK (AG) (INHALATION)	0.0%	OFF	No-Gen			
TOBRAMYCIN SOLUTION (AG) (INHALATION	0.0%	OFF	No-Gen			
TOBI PODHALER (INHALATION)	0.0%	OFF	No			
TOBRAMYCIN SOLUTION (INHALATION)	0.0%	OFF	No-Gen			
CAYSTON (INHALATION)	2.2%	OFF	No			

- Discussion: Catherine Decker requested that staff review the clinical PA criteria for drugs in this class for children and adults with Cystic Fibrosis.
- Kevin Izard made a motion to accept staff recommendations as presented.
 - o Second-Ward Brown
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
ANGIOTENSIN MODULATORS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
LISINOPRIL HCTZ (ORAL)	11.3%	ON	Yes-Gen			
ENALAPRIL HCTZ (ORAL)	0.2%	ON	Yes-Gen			
QUINAPRIL HCTZ (ORAL)	0.0%	OFF	No-Gen			
MOEXIPRIL HCTZ (ORAL)	0.0%	OFF	No-Gen			
CAPTOPRIL HCTZ (ORAL)	0.0%	OFF	No-Gen			
FOSINOPRIL HCTZ (ORAL)	0.0%	OFF	No-Gen			
BENAZEPRIL HCTZ (ORAL)	0.0%	OFF	No-Gen			
LISINOPRIL (ORAL)	47.6%	ON	Yes-Gen			
BENAZEPRIL (ORAL)	2.7%	ON	Yes-Gen			
FOSINOPRIL (ORAL)	0.1%	ON	Yes-Gen			
RAMIPRIL (ORAL)	0.3%	ON	Yes-Gen			
PERINDOPRIL (ORAL)	0.0%	OFF	No-Gen			
TRANDOLAPRIL (ORAL)	0.0%	OFF	No-Gen			
QUINAPRIL (ORAL)	0.0%	OFF	No-Gen			
ENALAPRIL (ORAL)	4.5%	ON	Yes-Gen			
MOEXIPRIL (ORAL)	0.0%	OFF	No-Gen			
CAPTOPRIL (ORAL)	0.4%	ON	Yes-Gen			
EPANED (ORAL)	0.3%	OFF	No			
MICARDIS (ORAL)	0.0%	OFF	No			
LOSARTAN (ORAL)	19.5%	ON	Yes-Gen			
DIOVAN (ORAL)	0.2%	NR	No			
VALSARTAN (AG) (ORAL)	0.4%	ON	Yes-Gen			
IRBESARTAN (ORAL)	0.1%	OFF	No-Gen			
BENICAR (ORAL)	0.2%	OFF	No			
VALSARTAN (ORAL)	4.6%	ON	Yes-Gen			
EDARBI (ORAL)	0.0%	OFF	No			
CANDESARTAN (AG) (ORAL)	0.0%	OFF	No-Gen			
TELMISARTAN (ORAL)	0.0%	OFF	No-Gen			
TELMISARTAN (AG) (ORAL)	0.0%	OFF	No-Gen			
CANDESARTAN (ORAL)	0.0%	OFF	No-Gen			
EPROSARTAN (ORAL)	0.0%	OFF	No-Gen		<u> </u>	
ENTRESTO (ORAL)	0.0%	NR	No			
MICARDIS HCT (ORAL)	0.0%	OFF	No			
LOSARTAN HCTZ (ORAL)	5.6%	ON	Yes-Gen			
IRBESARTAN HCTZ (ORAL)	0.0%	OFF	No-Gen			
BENICAR HCT (ORAL)	0.1%	OFF	No			
VALSARTAN HCTZ (ORAL)	0.0%	ON	Yes-Gen			
DIOVAN HCT (ORAL)	1.5%	ON	No			
EDARBYCLOR (ORAL)	0.0%	OFF	No			
CANDESARTAN HCTZ (ORAL)	0.0%	OFF	No-Gen			
TELMISARTAN HCTZ (AG) (ORAL)	0.0%	OFF	No-Gen			
TELMISARTAN HCTZ (ORAL)	0.0%	OFF	No-Gen		<u> </u>	
TEKTURNA (ORAL)	0.1%	OFF	No			
TEKTURNA HCT (ORAL)	0.0%	OFF	No			

- Discussion: None
- Pat Towers made a motion to accept staff recommendations as presented.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
ANGIOTENSIN MODULATOR COMBINATIONS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AZOR (ORAL)	37.1%	ON	Yes			
TRIBENZOR (ORAL)	32.8%	ON	Yes			
AMLODIPINE / BENAZEPRIL (ORAL)	9.2%	ON	Yes-Gen			
EXFORGE HCT (ORAL)	6.7%	ON	Yes			
TRANDOLAPRIL / VERAPAMIL (AG) (ORAL)	0.0%	OFF	No-Gen			
EXFORGE (ORAL)	13.4%	ON	Yes			
AMLODIPINE / VALSARTAN (AG) (ORAL)	0.0%	OFF	No-Gen			
AMLODIPINE / VALSARTAN / HCTZ (AG) (ORAL	0.1%	OFF	No-Gen			
AMLODIPINE / VALSARTAN (ORAL)	0.1%	NR	No-Gen			
TARKA (ORAL)	0.6%	ON	No			
TWYNSTA (ORAL)	0.0%	OFF	No			
AMLODIPINE / VALSARTAN / HCTZ (ORAL)	0.0%	OFF	No-Gen			
TRANDOLAPRIL / VERAPAMIL (ORAL)	0.1%	OFF	No-Gen			
PRESTALIA (ORAL)	0.0%	NR	No			
TELMISARTAN / AMLODIPINE (ORAL)	0.0%	OFF	No-Gen			

- Discussion: None
- Steve Maike made a motion to accept staff recommendations as presented.
 - Second-John Fangman
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
CALCIUM CHANNEL BLOCKERS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AMLODIPINE (ORAL)	73.3%	ON	Yes-Gen			
ISRADIPINE (ORAL)	0.2%	OFF	No-Gen			
FELODIPINE ER (ORAL)	0.1%	OFF	No-Gen			
NIFEDIPINE ER (ORAL)	5.3%	ON	Yes-Gen			
NIFEDIPINE IR (ORAL)	0.3%	ON	Yes-Gen			
NISOLDIPINE (ORAL)	0.0%	OFF	No-Gen			
NICARDIPINE (ORAL)	0.0%	OFF	No-Gen			
NIMODIPINE (ORAL)	0.0%	ON	Yes-Gen			
NYMALIZE (ORAL)	0.0%	OFF	No			
VERAPAMIL TABLET (ORAL)	1.1%	ON	Yes-Gen			
VERAPAMIL TABLET ER (ORAL)	3.3%	ON	Yes-Gen			
DILTIAZEM TABLET (ORAL)	1.3%	ON	Yes-Gen			
VERAPAMIL 360 MG CAPSULE (ORAL)	0.0%	OFF	No-Gen			
DILTIAZEM CAPSULE ER (ORAL)	13.7%	ON	Yes-Gen			
VERAPAMIL CAPSULE ER (ORAL)	1.1%	ON	Yes-Gen			
VERAPAMIL ER PM (ORAL)	0.0%	OFF	No-Gen			
DILTIAZEM LA (AG) (ORAL)	0.0%	OFF	No-Gen			
MATZIM LA (ORAL)	0.0%	OFF	No-Gen			
CARDIZEM LA (ORAL)	0.3%	ON	No			

- Discussion: None
- Lawrence Fleming made a motion to accept staff recommendations as presented.
 - Second-William Raduege
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
LIPOTROPICS, OTHER						
	Current	Current				
	Market	PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
COLESTID GRANULES (ORAL)	0.0%	OFF	No			
WELCHOL POWDER PACK (ORAL)	0.2%	OFF	No			
COLESTIPOL TABLET (ORAL)	2.2%	ON	Yes-Gen			
CHOLESTYRAMINE/ASPARTAME (ORAL)	2.2%	ON	Yes-Gen			
COLESTIPOL GRANULES (ORAL)	0.0%	OFF	No-Gen			
CHOLESTYRAMINE/SUCROSE (ORAL)	4.3%	ON	Yes-Gen			
WELCHOL TABLET (ORAL)	1.3%	OFF	No			
REPATHA SURECLICK (SUBCUTANEOUS)	0.0%	NR	No			
REPATHA SYRINGE (SUBCUTANEOUS)	0.0%	NR	No			
PRALUENT PEN (SUBCUTANEOUS)	0.0%	OFF	No			
PRALUENT SYRINGE (SUBCUTANEOUS)	0.0%	OFF	No			
LOVAZA (ORAL)	0.9%	ON	Yes			
FENOFIBRATE TABLET (AG) (TRICOR) (ORAL	0.2%	OFF	No-Gen			
FENOFIBRIC ACID (FIBRICOR) (ORAL)	0.0%	OFF	No-Gen			
FENOGLIDE (ORAL)	0.0%	NR	No			
GEMFIBROZIL (ORAL)	14.3%	ON	Yes-Gen			
TRIGLIDE (ORAL)	0.0%	OFF	No			
TRILIPIX (ORAL)	7.7%	ON	Yes			
TRICOR (ORAL)	40.8%	ON	Yes			
FENOFIBRATE TABLET (TRICOR) (ORAL)	0.4%	OFF	No-Gen			
ZETIA (ORAL)	13.3%	OFF	Yes			
FENOFIBRATE (FENOGLIDE) (AG) (ORAL)	0.0%	NR	No-Gen			
FENOFIBRATE CAPSULE (LIPOFEN) (ORAL)	0.0%	OFF	No-Gen			
FENOFIBRIC ACID (TRILIPIX) (AG) (ORAL)	0.0%	OFF	No-Gen			
FENOFIBRIC ACID (TRILIPIX) (ORAL)	0.0%	OFF	No-Gen			
FENOFIBRATE CAPSULE (LOFIBRA) (ORAL)	0.4%	OFF	No-Gen			
FENOFIBRATE TABLET (LOFIBRA) (ORAL)	1.5%	OFF	No-Gen			
ANTARA (ORAL)	0.0%	OFF	No			
FENOFIBRATE (ANTARA) (AG) (ORAL)	0.0%	OFF	No-Gen			
LIPOFEN (ORAL)	0.0%	OFF	No			
FENOFIBRATE (ANTARA) (ORAL)	0.0%	OFF	No-Gen			
VASCEPA (ORAL)	0.0%	OFF	No			
OMEGA-3 ACID ETHYL ESTERS (ORAL)	0.6%	OFF	No-Gen			
LOFIBRA TABLET (ORAL)	0.0%	OFF	No-Gen			
KYNAMRO (SUBCUTANE.)	0.0%	OFF	No			
JUXTAPID (ORAL)	0.0%	OFF	No			
NIACOR (ORAL)	0.0%	ON	Yes-Gen			
NIACIN ER (ORAL)	0.1%	ON	Yes-Gen			

- Discussion: Rachel Currans-Henry stated that future studies regarding health outcomes associated with PCSK9 Inhibitors will be available mid-2016.
- Alicia Walker made a motion to accept staff recommendations as presented.
 - Second-Pat Towers
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid LIPOTROPICS, STATINS						
Eli o inci ice, civiline	Current Market	Current	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
SIMVASTATIN (ORAL)	28.8%	ON	Yes-Gen			
CRESTOR (ORAL)	4.7%	OFF	No			
VYTORIN (ORAL)	0.2%	OFF	No			
LOVASTATIN (ORAL)	6.5%	ON	Yes-Gen			
ATORVASTATIN (ORAL)	45.8%	ON	Yes-Gen			
LESCOL XL (ORAL)	0.0%	OFF	No			
PRAVASTATIN (ORAL)	13.7%	ON	Yes-Gen			
ADVICOR (ORAL)	0.0%	OFF	No			
LESCOL (ORAL)	0.0%	OFF	No			
SIMCOR (ORAL)	0.0%	OFF	No			
FLUVASTATIN ER (AG) (ORAL)	0.0%	NR	No-Gen			
ALTOPREV (ORAL)	0.0%	OFF	No			
LIVALO (ORAL)	0.1%	OFF	No			
FLUVASTATIN (ORAL)	0.0%	NR	No-Gen			
AMLODIPINE-ATORVASTATIN (ORAL	0.0%	OFF	No-Gen			
FLUVASTATIN ER (ORAL)	0.0%	OFF	No-Gen			
CADUET (ORAL)	0.0%	OFF	No			

- Discussion: Rick Pope noted that generic Crestor will be reviewed during the May 2017 PAC meeting.
- Kevin Izard made a motion to accept staff recommendations as presented.
 - o Second-Michael Witkovsky
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
PAH AGENTS, ORAL AND INHALED						
	Current	Current				
	Market	PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
TYVASO (INHALATION)	3.1%	OFF	No			
VENTAVIS (INHALATION)	0.6%	OFF	No			
TRACLEER (ORAL)	9.4%	ON	Yes			
LETAIRIS (ORAL)	11.5%	ON	Yes			
OPSUMIT (ORAL)	4.2%	OFF	No			
SILDENAFIL (ORAL)	47.9%	ON	Yes-Gen			
ADCIRCA (ORAL)	15.0%	OFF	No			
REVATIO SUSPENSION (ORAL)	0.0%	OFF	No			
ADEMPAS (ORAL)	5.2%	OFF	No			
UPTRAVI TABLET DOSE PACK (ORAL	0.0%	NR	No			
UPTRAVI (ORAL)	0.0%	NR	No			
ORENITRAM ER (ORAL)	3.1%	OFF	No			

- Discussion: None
- John Fangman made a motion to accept staff recommendations as presented.
 - Second-Steve Maike
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid ANTICOAGULANTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
WARFARIN (ORAL)	70.2%	ON	Yes-Gen			
SAVAYSA (ORAL)	0.0%	OFF	No			
PRADAXA (ORAL)	1.9%	ON	Yes			
XARELTO (ORAL)	13.0%	ON	Yes			
ELIQUIS (ORAL)	6.4%	ON	Yes			
XARELTO DOSE PACK (ORAL)	0.1%	ON	Yes			
ENOXAPARIN SODIUM VIAL (AG) (SUBCUTANEOUS	0.1%	ON	Yes-Gen			
FRAGMIN VIAL (SUBCUTANE.)	0.0%	OFF	No			
ENOXAPARIN SODIUM VIAL (SUBCUTANEOUS)	0.0%	ON	Yes-Gen			
ENOXAPARIN SYRINGE (SUBCUTANE.)	7.0%	ON	Yes-Gen			
ENOXAPARIN SYRINGE (AG) (SUBCUTANE.)	1.2%	ON	Yes-Gen			
FRAGMIN DISP SYRIN (SUBCUTANE.)	0.0%	ON	No			
FONDAPARINUX (SUBCUTANE.)	0.1%	OFF	No-Gen			
ARIXTRA (SUBCUTANE.)	0.0%	OFF	No		·	

- Discussion: None
- Ward Brown made a motion to accept staff recommendations as presented.
 - Second-William Raduege
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
PLATELET AGGREGATION INHIBITORS Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
CLOPIDOGREL (ORAL)	91.3%	ON	Yes-Gen			
AGGRENOX (ORAL)	5.0%	ON	Yes			
DIPYRIDAMOLE (ORAL)	0.2%	ON	Yes-Gen			
TICLOPIDINE (ORAL)	0.0%	OFF	No-Gen			
BRILINTA (ORAL)	1.9%	OFF	No			
EFFIENT (ORAL)	1.5%	OFF	No			
DURLAZA (ORAL)	0.0%	NR	No			
ASPIRIN/DIPYRIDAMOLE (AG) (ORAL)	0.0%	NR	No-Gen			
ZONTIVITY (ORAL)	0.0%	OFF	No			

- Discussion: None
- Michael Witkovsky made a motion to accept staff recommendations as presented.
 - o Second-John Fangman
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
HYPOGLYCEMICS, INCRETIN MIMETICS/ENHANCERS	3					
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
KAZANO (ORAL)	0.1%	OFF	No			
OSENI (ORAL)	0.1%	OFF	No			
JENTADUETO (ORAL)	2.5%	ON	Yes			
NESINA (ORAL)	0.0%	OFF	No			
TRADJENTA (ORAL)	12.3%	ON	Yes			
JANUMET XR (ORAL)	4.6%	ON	Yes			
JANUMET (ORAL)	11.6%	ON	Yes			
ONGLYZA (ORAL)	1.1%	OFF	No			
JANUVIA (ORAL)	52.6%	ON	Yes			
KOMBIGLYZE XR (ORAL)	0.2%	OFF	No			
GLYXAMBI (ORAL)	0.4%	OFF	No			
BYETTA PENS (SUBCUTANE.)	4.7%	ON	Yes			
SYMLIN PENS (SUBCUTANE.)	0.0%	OFF	Yes			
BYDUREON (SUBCUTANE.)	0.8%	ON	Yes			
BYDUREON PENS (SUBCUTANE.)	6.2%	ON	Yes			
TANZEUM (SUBCUTANE.)	1.8%	ON	Yes			
VICTOZA (SUBCUTANE.)	0.9%	OFF	No			
TRULICITY (SUBCUTANE.)	0.1%	OFF	No			

- Discussion: None
- Roseanne Barber made a motion to accept staff recommendations as presented.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
HYPOGLYCEMICS, INSULIN AND RELATED AGENTS						
	Current	Current				
	Market	PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
HUMALOG MIX VIAL (SUBCUTANE.)	0.7%	ON	Yes			
HUMULIN 70/30 VIAL OTC (SUBCUTANE.)	2.1%	ON	Yes			
HUMULIN VIAL OTC (SUBCUTANE.)	3.8%	ON	Yes			
NOVOLOG MIX VIAL (SUBCUTANE.)	0.0%	OFF	No			
NOVOLOG MIX PEN (SUBCUTANE.)	0.1%	OFF	No			
HUMALOG MIX PEN (SUBCUTANE.)	2.9%	ON	Yes			
HUMULIN 500 U/M VIAL (SUBCUTANE.)	0.7%	ON	Yes			
NOVOLIN VIAL OTC (SUBCUTANE.)	0.1%	OFF	No			
NOVOLIN 70/30 VIAL OTC (SUBCUTANE.)	0.0%	OFF	No			
HUMULIN PEN OTC (SUBCUTANE.)	0.9%	ON	Yes			
HUMULIN 70/30 PEN OTC (SUBCUTANE.)	2.1%	ON	Yes			
HUMULIN 500 U/M PEN (SUBCUTANE.)	0.0%	OFF	No			
LEVEMIR VIAL (SUBCUTANE.)	0.9%	ON	Yes			
LEVEMIR PENS (SUBCUTANE.)	4.8%	ON	Yes			
LANTUS SOLOSTAR PEN (SUBCUTANE.)	34.8%	ON	Yes			
LANTUS VIAL (SUBCUTANE.)	11.0%	ON	Yes			
TRESIBA FLEXTOUCH 100 U/ML PEN (SUBCUTANEOUS)	0.0%	NR	No			
TRESIBA FLEXTOUCH 200 U/ML PEN (SUBCUTANEOUS)	0.0%	NR	No			
TOWEO SOLOSTAR PEN (SUBCUTANE.)	0.0%	OFF	No			
HUMALOG VIAL (SUBCUTANE.)	10.0%	ON	Yes			
APIDRA VIAL (SUBCUTANE.)	0.1%	OFF	No			
APIDRA SOLOSTAR PEN (SUB-Q)	0.0%	OFF	No			
NOVOLOG VIAL (SUBCUTANE.)	0.2%		No			
NOVOLOG PEN (SUBCUTANE.)	0.3%	OFF	No			
NOVOLOG CARTRIDGE (SUBCUTANE.)	0.0%	OFF	No			
HUMALOG PEN (SUBCUTANE.)	22.0%	ON	Yes			
HUMALOG CARTRIDGE (SUBCUTANE.)	2.5%	ON	Yes			
AFREZZA CARTRIDGE (INHALATION)	0.0%	OFF	No	•		
HUMALOG 200 U/ML PEN (SUBCUTANE.)	0.0%	OFF	No			

- Discussion: None
- Pat Towers made a motion to accept staff recommendations as presented.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid HYPOGLYCEMICS, MEGLITINIDES						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
REPAGLINIDE (ORAL)	2.3%	OFF	Yes-Gen			
PRANDIN (ORAL)	87.5%	ON	Yes			
NATEGLINIDE (ORAL)	10.1%	OFF	No-Gen			
PRANDIMET (ORAL)	0.0%	OFF	No		_	
REPAGLINIDE/METFORMIN (ORAL)	0.0%	OFF	No-Gen			

- Discussion: None
- William Radeuge made a motion to accept staff recommendations as presented.
 - Second-Steve Maike
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
HYPOGLYCEMICS, METFORMINS						
	Current	Current				
	Market	PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
METFORMIN (ORAL)	73.0%	ON	Yes-Gen			
METFORMIN ER (GLUCOPHAGE XR) (ORAL	24.9%	ON	Yes-Gen			
GLYBURIDE-METFORMIN (ORAL)	1.2%	ON	Yes-Gen			
RIOMET (ORAL)	0.2%	ON	No			
GLIPIZIDE-METFORMIN (ORAL)	0.6%	ON	No-Gen			
GLUMETZA (ORAL)	0.1%	OFF	No			
METFORMIN ER (FORTAMET) (ORAL)	0.1%	OFF	No-Gen			
METFORMIN ER (GLUMETZA) (ORAL)	0.0%	NR	No-Gen			

- Discussion: None
- Ward Brown made a motion to accept staff recommendations as presented.
 - o Second-John Fangman
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
HYPOGLYCEMICS, SGLT2						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
INVOKAMET (ORAL)	1.2%	OFF	Yes			
INVOKANA (ORAL)	85.9%	ON	Yes			
JARDIANCE (ORAL)	4.2%	OFF	No			
SYNJARDY (ORAL)	0.0%	NR	No			
FARXIGA (ORAL)	8.2%	OFF	No			
XIGDUO XR (ORAL)	0.5%	OFF	No			

- Discussion: None
- Michael Witkovsky made a motion to accept staff recommendations as presented.
 - o Second-William Radeuge
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
HYPOGLYCEMICS, TZD						
	Current Market	Current PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
PIOGLITAZONE (ORAL)	99.2%	ON	Yes-Gen			
ACTOPLUS MET (ORAL)	0.0%	OFF	No			
AVANDIA (ORAL)	0.3%	OFF	No			
PIOGLITAZONE/METFORMIN (ORAL)	0.4%	OFF	No-Gen			
ACTOPLUS MET XR (ORAL)	0.1%	OFF	No			
PIOGLITAZONE/GLIMEPIRIDE (AG) (ORA	0.0%	NR	No-Gen			
PIOGLITAZONE/GLIMEPIRIDE (ORAL)	0.0%	OFF	No-Gen			

- Discussion: None
- John Fangman made a motion to accept staff recommendations as presented.
 - o Second-Alicia Walker
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
ANTIEMETIC/ANTIVERTIGO AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
PROCHLORPERAZINE (ORAL)	5.1%	ON	Yes-Gen			
PROMETHAZINE TABLET (ORAL)	5.1%	ON	Yes-Gen			
MECLIZINE OTC (ORAL)	1.4%	ON	Yes-Gen			
PROMETHAZINE SYRUP (ORAL)	2.0%	ON	Yes-Gen			
METOCLOPRAMIDE TABLET (ORAL)	9.9%	ON	Yes-Gen			
ONDANSETRON TABLETS (ORAL)	20.1%	ON	Yes-Gen			
METOCLOPRAMIDE SOLUTION (ORAL)	0.4%	ON	Yes-Gen			
ONDANSETRON ODT (ORAL)	43.4%	ON	Yes-Gen			
MECLIZINE (ORAL)	7.2%	ON	Yes-Gen			
TRANSDERM-SCOP (TRANSDERM)	1.9%	ON	Yes			
TRIMETHOBENZAMIDE (ORAL)	0.0%	ON	Yes-Gen			
GRANISETRON (ORAL)	0.0%	OFF	No-Gen			
DICLEGIS (ORAL)	2.0%	ON	Yes			
ZUPLENZ (ORAL)	0.0%	OFF	No			
METOZOLV ODT (ORAL)	0.0%	OFF	No			
ONDANSETRON SOLUTION (ORAL)	0.4%	ON	Yes-Gen			
ANZEMET (ORAL)	0.0%	OFF	No			
PROCHLORPERAZINE (RECTAL)	0.3%	ON	Yes-Gen			
PROMETHAZINE (RECTAL)	0.6%	ON	Yes-Gen			
EMEND (ORAL)	0.0%	ON	Yes			
AKYNZEO (ORAL)	0.0%	OFF	No			
VARUBI (ORAL)	0.0%	NR	No			
DRONABINOL (ORAL)	0.0%	ON	Yes-Gen			
METOCLOPRAMIDE ODT (ORAL)	0.0%	NR	No-Gen			
PROMETHAZINE 50 MG (RECTAL)	0.0%	ON	Yes-Gen			
EMEND PACK (ORAL)	0.1%	ON	Yes			
CESAMET (ORAL)	0.0%	OFF	No			
SANCUSO (TRANSDERMAL)	0.0%	OFF	No			

- Discussion: Rachel Currans-Henry stated that the Diclegis was added as a preferred drug last year and the change was successful.
- Kevin Izard made a motion to accept staff recommendations as presented.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid PROTON PUMP INHIBITORS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
PANTOPRAZOLE (ORAL)	23.0%	ON	Yes-Gen			
DEXILANT (ORAL)	0.5%	OFF	No			
OMEPRAZOLE (ORAL)	70.1%	ON	Yes-Gen			
NEXIUM SUSPENSION (ORAL)	0.3%	ON	Yes			
NEXIUM (ORAL)	0.7%	OFF	Yes			
PROTONIX SUSPENSION (ORAL)	0.1%	ON	Yes			
LANSOPRAZOLE CAPSULES (ORAL)	2.5%	ON	Yes-Gen			
RABEPRAZOLE TABLETS (ORAL)	1.4%	OFF	No-Gen			
ZEGERID (ORAL)	0.0%	OFF	No			
PREVACID SOLUTAB (ORAL)	0.3%	OFF	No			
ESOMEPRAZOLE CAPSULES (ORAL)	0.9%	OFF	No-Gen			
PRILOSEC SUSPENSION (ORAL)	0.1%	ON	Yes			
OMEPRAZOLE / SODIUM BICARBONATE (ORAL)	0.0%	OFF	No-Gen			

- Discussion: None
- William Raduege made a motion to accept staff recommendations as presented.
 - o Second-Alicia Walker
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
H. PYLORI TREATMENT						
	Current Market	Current PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
PYLERA (ORAL)	10.1%	OFF	Yes			
OMECLAMOX-PAK (ORAL)	0.0%	OFF	No			
LANSOPRAZOLE/AMOXICILLIN/CLARITHROMYCIN (AG) (ORA	1.3%	ON	Yes-Gen			
LANSOPRAZOLE/AMOXICILLIN/CLARITHROMYCIN (ORAL)	0.0%	ON	Yes-Gen			

- Discussion: None
- John Fangman made a motion to accept staff recommendations as presented.
 - Second-Steve Maike
 - o All members were in favor of the motion
 - Motion passe

Wisconsin Medicaid						
ANTIFUNGALS, ORAL						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
KETOCONAZOLE (ORAL)	0.6%	ON	Yes-Gen			
TERBINAFINE (ORAL)	6.5%	ON	Yes-Gen			
FLUCONAZOLE TABLET (ORAL)	67.2%	ON	Yes-Gen			
NYSTATIN SUSPENSION (ORAL)	17.2%	ON	Yes-Gen			
CLOTRIMAZOLE (MUCOUS MEM)	1.1%	ON	Yes-Gen			
FLUCONAZOLE SUSPENSION (ORAL)	2.2%	ON	Yes-Gen			
NYSTATIN TABLET (ORAL)	0.4%	ON	Yes-Gen			
GRISEOFULVIN TABLETS (ORAL)	0.0%	OFF	No-Gen			
ORAVIG (BUCCAL)	0.0%	OFF	No			
GRISEOFULVIN SUSPENSION (ORAL)	3.1%	ON	Yes-Gen			
GRIFULVIN V TABLETS (ORAL)	0.0%	OFF	No-Gen			
LAMISIL GRANULES (ORAL)	0.0%	OFF	No			
NYSTATIN POWDER (ORAL)	0.1%	ON	Yes-Gen			
ONMEL (ORAL)	0.0%	OFF	No			
GRISEOFULVIN ULTRAMICROSIZE (ORAL	0.0%	ON	Yes-Gen			
GRIS-PEG (ORAL)	0.3%	ON	No			
SPORANOX SOLUTION (ORAL)	0.2%	OFF	Yes			
ITRACONAZOLE (ORAL)	0.7%	ON	Yes-Gen			
VFEND SUSPENSION (ORAL)	0.0%	OFF	No			
NOXAFIL SUSPENSION (ORAL)	0.0%	OFF	No			
VORICONAZOLE TABLETS (ORAL)	0.2%	OFF	No-Gen			
VORICONAZOLE SUSPENSION (ORAL)	0.0%	OFF	No-Gen			
CRESEMBA (ORAL)	0.0%	NR	No			
NOXAFIL TABLET (ORAL)	0.1%	OFF	No			
FLUCYTOSINE (ORAL)	0.0%	OFF	No-Gen			

- Discussion: Rachel Currans-Henry indicated there was a question from the committee regarding adding Sporanox solution as preferred. The solution was added to compliment the oral tablet that is preferred.
- Michael Witkovsky made a motion to accept staff recommendations as presented.
 - o Second-John Fangman
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
CEPHALOSPORINS AND RELATED ANTIBIOTICS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
CEFPROZIL TABLET (ORAL)	0.6%	ON	Yes-Gen			
CEFUROXIME TABLET (ORAL)	3.9%	ON	Yes-Gen			
CEFACLOR CAPSULE (ORAL)	0.0%	ON	Yes-Gen			
CEFPROZIL SUSPENSION (ORAL)	1.4%	ON	Yes-Gen			
CEFTIN SUSPENSION (ORAL)	0.3%	ON	Yes			
CEFACLOR SUSPENSION (ORAL)	0.0%	ON	Yes-Gen			
CEFACLOR TABLET ER (ORAL)	0.0%	OFF	No-Gen			
SUPRAX CAPSULE (ORAL)	0.6%	ON	Yes			
SUPRAX TAB CHEW (ORAL)	0.0%	OFF	Yes-Gen			
CEFDINIR CAPSULE (ORAL)	4.8%	ON	Yes-Gen			
CEFDINIR SUSPENSION (ORAL)	16.3%	ON	Yes-Gen			
CEDAX CAPSULE (ORAL)	0.0%	OFF	No			
SUPRAX TABLET (ORAL)	0.0%	ON	Yes-Gen			
CEFPODOXIME TABLET (ORAL)	0.0%	OFF	No-Gen			
CEFPODOXIME SUSPENSION (ORAL)	0.0%		No-Gen			
CEFTIBUTEN CAPSULE (AG) (ORAL)	0.0%	OFF	No-Gen			
CEDAX SUSPENSION (ORAL)	0.0%	OFF	No			
CEFIXIME SUSPENSION (ORAL)	0.0%		No-Gen			
CEFTIBUTEN SUSPENSION (AG) (ORAL)	0.0%	OFF	No-Gen			
SUPRAX SUSPENSION (ORAL)	0.1%	ON	Yes-Gen			
CEPHALEXIN CAPSULE (ORAL)	20.5%	ON	Yes-Gen			
CEFADROXIL CAPSULE (ORAL)	1.2%	ON	Yes-Gen			
AMOXICILLIN/CLAV TABLET (ORAL)	28.4%	ON	Yes-Gen			
AMOXICILLIN/CLAV SUSPENSION (ORAL)	16.5%	ON	Yes-Gen			
AMOXICILLIN/CLAV XR (ORAL)	0.0%	OFF	No-Gen			
CEPHALEXIN TABLET (ORAL)	0.0%	ON	Yes-Gen			
AMOXICILLIN/CLAV CHEW TABLET (ORAL)	0.3%	ON	Yes-Gen			
CEPHALEXIN SUSPENSION (ORAL)	4.7%	ON	Yes-Gen			
CEFADROXIL TABLET (ORAL)	0.0%	ON	Yes-Gen			
CEFADROXIL SUSPENSION (ORAL)	0.3%	ON	Yes-Gen			
AUGMENTIN 125 SUSPENSION (ORAL)	0.0%	ON	Yes			

- Discussion: None
- Kevin Izard made a motion to accept staff recommendations as presented.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
MACROLIDES/KETOLIDES						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AZITHROMYCIN TABLET (ORAL)	63.8%	ON	Yes-Gen			
AZITHROMYCIN PACKET (ORAL)	0.4%	ON	Yes-Gen			
CLARITHROMYCIN TABLET (ORAL)	2.1%	ON	Yes-Gen			
AZITHROMYCIN SUSPENSION (ORAL)	29.0%	ON	Yes-Gen			
ZMAX (ORAL)	0.0%	OFF	No			
PCE (ORAL)	0.0%	ON	Yes			
KETEK (ORAL)	0.0%	OFF	No			
ZITHROMAX PACKET (ORAL)	3.1%	NR	No			
CLARITHROMYCIN ER (ORAL)	0.0%	OFF	No-Gen			
CLARITHROMYCIN SUSPENSION (ORAL)	0.3%	ON	Yes-Gen			
ERYTHROMYCIN BASE CAPSULE DR (ORAL	0.0%	OFF	Yes-Gen			
ERY-TAB (ORAL)	0.3%	ON	Yes-Gen			
ERYTHROMYCIN BASE TABLET (ORAL)	0.5%	ON	No-Gen			
ERYTHROCIN (ORAL)	0.1%	ON	Yes-Gen			
E.E.S. 400 TABLET (ORAL)	0.1%	ON	Yes-Gen			
E.E.S. 200 SUSPENSION (ORAL)	0.1%	ON	Yes-Gen			
ERYPED 200 SUSPENSION (ORAL)	0.3%	ON	Yes-Gen			
ERYPED 400 SUSPENSION (ORAL)	0.1%	ON	Yes-Gen			

- Discussion: None
- Kevin Izard made a motion to accept staff recommendations as presented.
 - o Second-Pat Towers
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
TETRACYCLINES						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
DOXYCYCLINE MONOHYDRATE 50 MG CAPSULE BRAND (ORAL)	0.2%	ON	Yes-Gen			
DOXYCYCLINE MONOHYDRATE 100 MG CAPSULE BRAND (ORA	0.2%	ON	Yes-Gen			
VIBRAMYCIN SUSPENSION (ORAL)	0.0%	OFF	No			
DOXYCYCLINE MONOHYDRATE 50 MG CAPSULE (ORAL)	3.3%	ON	Yes-Gen			
DOXYCYCLINE HYCLATE CAPSULE (AG) (ORAL)	0.0%	NR	No-Gen			
MINOCYCLINE CAPSULES (ORAL)	24.1%	ON	Yes-Gen			
DOXYCYCLINE MONOHYDRATE 100 MG CAPSULE (ORAL)	52.2%	ON	Yes-Gen			
DOXYCYCLINE HYCLATE TABLET (ORAL)	0.5%	ON	Yes-Gen			
ORACEA (ORAL)	0.0%	OFF	No			
SOLODYN (ORAL)	0.0%	OFF	No			
VIBRAMYCIN SYRUP (ORAL)	0.0%	OFF	No			
DOXYCYCLINE MONOHYDRATE TABLET (ORAL)	18.9%	ON	Yes-Gen			
DOXYCYCLINE HYCLATE CAPSULE (ORAL)	0.1%	OFF	No-Gen			
DOXYCYCLINE HYCLATE TABLET (ORAL)	0.0%	OFF	No-Gen			
MINOCYCLINE ER (ORAL)	0.0%	OFF	No-Gen			
MINOCYCLINE TABLETS (ORAL)	0.0%	OFF	No-Gen			
TETRACYCLINE (ORAL)	0.1%	OFF	No-Gen			
DOXYCYCLINE MONOHYDRATE SUSPENSION (ORAL)	0.1%	OFF	No-Gen			
DOXYCYCLINE MONOHYDRATE 40 MG CAPSULE (AG) (ORAL)	0.0%	OFF	No-Gen			
DOXYCYCLINE MONOHYDRATE 150 MG CAPSULE (ORAL)	0.0%	OFF	No-Gen			
DOXYCYCLINE HYCLATE TABLET DR (ORAL)	0.0%	OFF	No-Gen			
DEMECLOCYCLINE (ORAL)	0.2%	OFF	No-Gen			
DOXYCYCLINE MONOHYDRATE 75 MG CAPSULE (ORAL)	0.0%	OFF	No-Gen			
DORYX (ORAL)	0.0%	OFF	No			

- Discussion: None
- Ward Brown made a motion to accept staff recommendations as presented.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
ACNE AGENTS, TOPICAL						
	Current	Current				
Brand Name	Market Share	PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
BENZACLIN W/PUMP (TOPICAL)	0.0%	OFF	No		oz.ii io/tiroito	modulio/mono
RETIN-A GEL (TOPICAL)	0.0%	NR	Yes			
BENZOYL PEROXIDE LOTION OTC (TOPICAL)	0.1%	ON	Yes-Gen			
BENZOYL PEROXIDE 10% CREAM OTC (TOPICAL) DUAC (TOPICAL)	0.0%	ON NR	Yes-Gen No			
BENZOYL PEROXIDE 5% WASH OTC (TOPICAL)	2.8%	ON	Yes-Gen			
ONEXTON W/PUMP (TOPICAL)	0.0%	OFF	No			
ACANYA W/PUMP (TOPICAL)	0.0%	OFF	No			
TAZORAC CREAM (TOPICAL) BENZOYL PEROXIDE 10% WASH OTC (TOPICAL)	0.3% 2.5%	OFF ON	No Yes-Gen			
TAZORAC GEL (TOPICAL)	0.2%	OFF	No No			
BENZOYL PEROXIDE GEL OTC (TOPICAL)	9.1%	ON	Yes-Gen			
AZELEX (TOPICAL)	1.2%	ON	Yes			
EPIDUO (TOPICAL) DIFFERIN LOTION (TOPICAL)	8.2%	ON	Yes			
RETIN-A CREAM (TOPICAL)	0.3%	ON OFF	Yes Yes			
ZIANA (TOPICAL)	0.0%	OFF	No			
DIFFERIN GEL PUMP (TOPICAL)	1.8%	ON	Yes			
DIFFERIN CREAM (TOPICAL)	3.6%	ON	Yes			
RETIN-A MICRO 0.08% PUMP (TOPICAL) DIFFERIN GEL (TOPICAL)	0.0% 5.6%	OFF ON	No Yes			
AVITA CREAM (TOPICAL)	0.0%	OFF	No			
AVITA GEL (TOPICAL)	0.0%	OFF	No			
ERYTHROMYCIN SOLUTION (TOPICAL)	0.8%	ON	Yes-Gen			
BENZACLIN (TOPICAL)	0.0%	OFF	No			
SULFACETAMIDE / SULFUR CLEANSER (TOPICAL) CLINDAMYCIN PHOSPHATE SOLUTION (TOPICAL)	0.4% 6.2%	ON	Yes-Gen Yes-Gen			
SULFACETAMIDE SUSPENSION (TOPICAL)	0.2%	OFF	No-Gen			
TRETINOIN GEL (ATRALIN) (TOPICAL)	0.0%	OFF	No-Gen			
CLINDAMYCIN PHOSPHATE GEL (TOPICAL)	22.1%	ON	Yes-Gen			
CLINDAMYCIN PHOSPHATE LOTION (TOPICAL)	10.9%	ON	No-Gen			
ACZONE (TOPICAL) BENZOYL PEROXIDE CLEANSER (TOPICAL)	0.3%	OFF OFF	No No-Gen			
EPIDUO FORTE GEL W/PUMP (TOPICAL)	0.1%	NR	No			
SULFACETAMIDE SODIUM/SULFUR (TOPICAL)	0.0%	ON	Yes-Gen			
SULFACETAMIDE CLEANSER (TOPICAL)	0.0%	OFF	No-Gen			
BENZOYL PEROXIDE GEL (TOPICAL) ERYTHROMYCIN-BENZOYL PEROXIDE (TOPICAL)	0.0%	OFF OFF	No-Gen No-Gen			
TRETINOIN CREAM (TOPICAL)	17.3%	ON	No-Gen			
SULFACETAMIDE SODIUM/SULFUR CREAM (TOPICAL)	0.0%	OFF	No-Gen			
CLINDAMYCIN / BENZOYL PEROXIDE (DUAC) (TOPICAL)	0.0%	OFF	No-Gen			
TRETINOIN GEL (AVITA, RETIN-A) (TOPICAL) BENZOYL PEROXIDE FOAM (TOPICAL)	4.1% 0.0%	ON OFF	No-Gen No-Gen			
BENZOYL PEROXIDE MICROSPHERES CLEANSER (TOPICAL)	0.0%	OFF	No-Gen			
ADAPALENE CREAM (TOPICAL)	0.0%	OFF	No-Gen			
ADAPALENE GEL (AG) (TOPICAL)	0.0%	OFF	No-Gen			
ADAPALENE GEL (TOPICAL)	0.1%	OFF	No-Gen			
BENZEPRO CLEANSER (TOPICAL) SULFACETAMIDE / SULFUR / UREA CLEANSER (TOPICAL)	0.0%	NR OFF	No-Gen No-Gen			
ADAPALENE GEL PUMP (AG) (TOPICAL)	0.0%		No-Gen			
BP 10-1 (TOPICAL)	0.0%	OFF	No-Gen			
ERYTHROMYCIN GEL (TOPICAL)	1.3%	ON	No-Gen			
TRETINOIN MICROSPHERES GEL 0.04%, 0.1% (AG) (TOPICAL) ADAPALENE GEL PUMP (TOPICAL)	0.0%		No-Gen			
ATRALIN (TOPICAL)	0.0%	NR OFF	No-Gen No			
SULFACETAMIDE / SULFUR LOTION (TOPICAL)	0.0%	OFF	No-Gen			
VELTIN (TOPICAL)	0.0%	OFF	No			
TRETINOIN MICROSPHERES GEL 0.04%, 0.1% PUMP (AG) (TOPICAL)	0.0%	OFF	No-Gen			
FABIOR (TOPICAL) CLINDAMYCIN / BENZOYL PEROXIDE (BENZACLIN) (TOPICAL)	0.0%	OFF OFF	No No-Gen			
BENZAMYCIN (TOPICAL)	0.2%	OFF	No			
RETIN-A MICRO 0.04%, 0.1% (TOPICAL)	0.0%	OFF	No			
CLINDAMYCIN PHOSPHATE FOAM (TOPICAL)	0.0%	OFF	No-Gen			
AVAR FOAM (TOPICAL) OVACE PLUS FOAM (TOPICAL)	0.0%	NR NR	No No			
TRETINOIN MICROSPHERES GEL 0.04%, 0.1% (TOPICAL)	0.0%	OFF	No-Gen			
AVAR CLEANSER (TOPICAL)	0.0%	OFF	No-Gen			
OVACE PLUS WASH (TOPICAL)	0.0%	OFF	No			
TRETINOIN MICROSPHERES GEL 0.04%, 0.1% PUMP (TOPICAL)	0.0%	OFF	No-Gen			
RETIN-A MICRO 0.04%, 0.1% PUMP (TOPICAL) SULFACETAMIDE / SULFUR SUSPENSION (TOPICAL)	0.0%		No No-Gen			
OOLI MOLIMINDE / OOLI ON OOOFENOION (TOFICAL)	0.0%	OFF	NO-Gen			

- Discussion: Rachel Currans-Henry reported that there was discussion in closed session regarding the recommendation to prefer a brand over its generics. For this class, the committee agreed that a slight delay in obtaining the brand drug would not adversely affect the member.
- John Fangman made a motion to accept staff recommendations as presented.
 - Second-Roseanne Barber
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
ANTIFUNGALS, TOPICAL						
THAT CHOILE, FOLIONE						
	Current Market	Current	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation		MODIFICATIONS	MODIFICATIONS
NAFTIFINE CREAM (TOPICAL)	0.0%	OFF	No-Gen			
TOLNAFTATE SOLUTION OTC (TOPICAL)	0.0%	ON	Yes-Gen			
TOLNAFTATE POWDER OTC (TOPICAL)	0.1%	ON	Yes-Gen			
MICONAZOLE CREAM OTC (TOPICAL)	2.0%	ON	Yes-Gen			
TOLNAFTATE CREAM OTC (TOPICAL)	0.2%	ON	Yes-Gen			
MICONAZOLE POWDER OTC (TOPICAL)	0.6%	ON	Yes-Gen			
MICONAZOLE OINT OTC (TOPICAL)	0.1%	ON	Yes-Gen			
LOTRIMIN AF CREAM OTC (TOPICAL)	0.0%	ON	Yes-Gen			
LUZU (TOPICAL)	0.0%	OFF	No			
ALEVAZOL OTĆ (TOPICAL)	0.1%	ON	Yes-Gen			
NYSTATIN CREAM (TOPICAL)	20.4%	ON	Yes-Gen			
KETOCONAZOLE SHAMPOO (TOPICAL)	13.3%	ON	Yes-Gen			
CICLOPIROX CREAM (TOPICAL)	0.1%	OFF	No-Gen			
CICLOPIROX SUSPENSION (TOPICAL)	0.0%	OFF	No-Gen			
ERTACZO (TOPICAL)	0.0%	OFF	No			
CLOTRIMAZOLE CREAM RX (TOPICAL)	12.3%	ON	Yes-Gen			
CLOTRIMAZOLE CREAM OTC (TOPICAL)	6.8%	ON	Yes-Gen			
JUBLIA (TOPICAL)	0.0%	OFF	No			
NYSTATIN OINT (TOPICAL)	9.5%	ON	Yes-Gen			
MENTAX (TOPICAL)	0.0%	OFF	No			
CLOTRIMAZOLE SOLUTION OTC (TOPICAL)	0.0%	ON	Yes-Gen			
EXELDERM SOLUTION (TOPICAL)	0.0%	OFF	No			
CICLOPIROX SOLUTION (TOPICAL)	1.0%	ON	Yes-Gen			
CICLOPIROX GEL (TOPICAL)	0.0%	OFF	No-Gen			
EXELDERM CREAM (TOPICAL)	0.0%	OFF	No			
CLOTRIMAZOLE SOLUTION RX (TOPICAL)	0.6%	ON	Yes-Gen			
VUSION (TOPICAL)	0.0%	OFF	No			
KETOCONAZOLE CREAM (TOPICAL)	11.7%	ON	Yes-Gen			
CLOTRIMAZOLE-BETAMETHASONE CREAM (TOPICAL	9.6%	ON	Yes-Gen			
NYSTATIN POWDER (TOPICAL)	11.1%	ON	Yes-Gen			
CICLOPIROX SHAMPOO (TOPICAL)	0.0%	OFF	No-Gen			
OXISTAT LOTION (TOPICAL)	0.0%	OFF	No			
EXTINA (TOPICAL)	0.0%	OFF	No			
NAFTIN GEL (TOPICAL)	0.0%	OFF	No			
NYSTATIN-TRIAMCINOLONE OINT (TOPICAL)	0.1%	OFF	No-Gen			
NYSTATIN-TRIAMCINOLONE CREAM (TOPICAL)	0.2%	OFF	No-Gen			
CLOTRIMAZOLE-BETAMETHASONE LOTION (TOPICA	0.0%	OFF	No-Gen			
NAFTIN CREAM (TOPICAL)	0.0%	OFF	No			
ECONAZOLE (TOPICAL)	0.1%	OFF	No-Gen			
OXISTAT CREAM (TOPICAL)	0.0%	OFF	No			
NAFTIFINE CREAM (AG) (TOPICAL)	0.0%	_	No-Gen			
KETOCONAZOLE FOAM (TOPICAL)	0.0%	OFF	No-Gen			
KERYDIN (TOPICAL)	0.0%	OFF	No			
BENSAL HP (TOPICAL)	0.0%	OFF	No-Gen			
	0.070			ı		1

- Discussion: None
- Kevin Izard made a motion to accept staff recommendations as presented.
 - o Second-Alicia Walker
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
MISCELLANEOUS ANALGESICS						
	Current	Current				
	Market	PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
ASPIRIN TABLET OTC (ORAL)	70.7%	ON	Yes-Gen			
ASPIRIN TAB CHEW OTC (ORAL)	25.6%	ON	Yes-Gen			
BAYER CHEWABLE OTC (ORAL)	0.0%	ON	Yes			
ACETAMINOPHEN / BUTALBITAL (ORAL)	0.1%	OFF	No-Gen			
BUTALBITAL / ASA / CAFFEINE (ORAL)	0.4%	OFF	No-Gen			
BUTALBITAL / APAP / CAFFEINE (ORAL)	3.3%	OFF	No-Gen			
BUPAP (ORAL)	0.0%	OFF	No-Gen			

- Discussion: None
- Kevin Izard made a motion to accept staff recommendations as presented.
 - o Second-Alicia Walker
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
ANALGESICS, NARCOTICS LONG						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
METHADONE TABLET (ORAL)	13.5%	ON	No-Gen			
METHADONE SOLUTION (ORAL)	0.2%	ON	No-Gen			
NUCYNTA ER (ORAL)	0.8%	OFF	No			
MORPHINE ER TABLET (ORAL)	37.3%	ON	Yes-Gen			
KADIAN (ORAL)	1.0%	ON	Yes			
FENTANYL (TRANSDERM)	20.5%	ON	Yes-Gen			
BUTRANS (TRANSDERM)	5.8%	ON	Yes			
EMBEDA (ORAL)	0.1%	OFF	No			
TRAMADOL ER (ULTRAM ER) (ORAL)	0.5%	OFF	No-Gen			
HYSINGLA ER (ORAL)	0.2%	OFF	Yes			
TRAMADOL ER (CONZIP) (AG) (ORAL)	0.0%	OFF	No-Gen			
OXYCONTIN (ORAL)	17.4%	OFF	No			
OPANA ER (ORAL)	1.0%	OFF	No			
ZOHYDRO ER (ORAL)	0.1%	OFF	No			
CONZIP (ORAL)	0.0%	OFF	No			
MORPHINE ER CAPSULE (AVINZA) (ORAL)	0.0%	OFF	No-Gen			
TRAMADOL ER (RYZOLT) (ORAL)	0.0%	OFF	No-Gen			
OXYCODONE ER (AG) (ORAL)	0.8%	OFF	No-Gen			
OXYMORPHONE ER (ORAL)	0.3%	OFF	No-Gen			
MORPHINE ER CAPSULE (KADIAN) (ORAL)	0.1%	OFF	No-Gen			
FENTANYL (37.5, 62.5, 87.5 MG) (TRANSDERM		OFF	No-Gen			
BELBUCA (BUCCAL)	0.0%	NR	No			
HYDROMORPHONE ER (AG) (ORAL)	0.1%	OFF	No-Gen			
HYDROMORPHONE ER (ORAL)	0.1%	OFF	No-Gen			
EXALGO (ORAL)	0.1%	OFF	No			

- Discussion: Rachel Currans-Henry noted that the committee discussion in closed session
 paralleled the national discussion for best practices for treatment of opioid misuse and
 abuse and CMS' Bulletin regarding Best Practices for Addressing Prescription Opioid
 Overdoses, Misuse, and Addiction. The recommendations in this class support national
 trends and guidance for this drug class. Alicia Walker expressed concern with the
 recommendation to prefer Hysingla ER, indicating that the short acting
 hydrocodone/APAP is sufficient. Kevin Izard stated although there are multiple preferred
 options, adding an abuse deterrent gives providers an additional option given the
 recommendation to non-prefer methadone.
- Alicia Walker made a motion to accept staff recommendations with Hysingla ER being moved to a non-preferred status.
 - o Second-None
- Discussion: Several committee members discussed options and ideas that the Drug Utilization Review (DUR) Board might consider as possible interventions. Robert Rohloff expressed interest in data regarding opioid use with pediatric members and suggested the DUR Board consider looking at the age of the members, since kids metabolize differently.
- Catherine Decker stated it is very important as a public health policy, but states should
 line up in the way they are fighting opioid abuse. Michael Witkovsky suggested the
 inclusion of pain specialists in peer-to-peer contact with unusual or high dose opioid use,
 similar to actions the Department took with high dose stimulants being used in children.
 Steve Maike suggested utilizing the DUR Board process for the appropriate use of pain
 medications.
- Rachel Currans-Henry reiterated that DHS is responding to national guidance, particularly from CMS, regarding removing methadone from preferred drug lists when used for pain. Methadone dosage forms used for opioid dependency treatment will remain preferred and will be included in the Opioid Dependency Agents drug class. Lynn Radmer stated that some OxyContin utilization may move away if there is a preferred option that has abuse deterrent properties. The PA process for this drug class is the standard STAT-PA PDL exemption form. Lynn Radmer explained if a member had only used methadone, they would not get approval through STAT-PA unless a medical reason precludes them from using a preferred agent. PA requests not meeting STAT-PA approval criteria need to come in for manual review with additional documentation. Lynn Radmer explained that the DUR Board spends a lot of time monitoring opioid use. Rachel Currans-Henry indicated that the PDL is one of many ways to combat opioid abuse.

- Motion made by Kevin Izard to accept staff recommendations as presented.
 - Second-John Fangman
 - o 10 members were in favor of the motion. Alicia Walker opposed the motion.
 - Motion passes

Wisconsin Medicaid						
OPIATE DEPENDENCE TREATMENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
NALOXONE SYRINGE (INJECTION)	0.0%	NR	Yes-Gen			
NALTREXONE (ORAL)	6.6%	NR	Yes-Gen			
NALOXONE VIAL (INJECTION)	0.1%	NR	Yes-Gen			
NARCAN SPRAY (NASAL)	0.0%	NR	Yes			
EVZIO (INJECTION)	0.0%	NR	No			
VIVITROL (INTRAMUSC)	4.5%	NR	Yes			
BUPRENORPHINE HCL (SUBLINGUAL)	5.1%	OFF	No-Gen			
SUBOXONE FILM (SUBLINGUAL)	83.5%	ON	Yes			
ZUBSOLV (SUBLINGUAL)	0.1%	OFF	No			
BUPRENORPHINE/NALOXONE TAB (SUBLINGUAL)	0.1%	OFF	No-Gen			
BUNAVAIL (BUCCAL)	0.0%	OFF	No			

Discussion: Rachel Currans-Henry stated that Vivitrol has been a covered service, but it
was not included in the past on the PDL. The addition of Vivitrol to the PDL will now
make it more visible to providers as a covered treatment option. Naloxone and Narcan
will also now be added to the PDL in this class, encouraging prescribing of rescue
medications. Diagnosis restrictions will apply to some products.

Kevin Izard asked if there are federal laws regarding prescribing methadone for dependence. Lynn Radmer indicated that the dosage form dictates if methadone is to be used for pain or opioid dependence.

- Michael Witkovsky made a motion to accept staff recommendations as presented.
 - o Second-Kevin Izard
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
ANTIMIGRAINE AGENTS, TRIPTANS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
RIZATRIPTAN ODT (AG) (ORAL)	0.0%	ON	Yes-Gen			
RELPAX (ORAL)	9.2%	ON	Yes			
IMITREX (NASAL)	1.5%	ON	Yes			
SUMATRIPTAN (ORAL)	63.3%	ON	Yes-Gen			
RIZATRIPTAN TABLET (ORAL)	11.3%	ON	Yes-Gen			
IMITREX KIT (SUBCUTANE.)	5.8%	ON	Yes			
RIZATRIPTAN ODT (ORAL)	6.0%	ON	Yes-Gen			
IMITREX VIAL (SUBCUTANE.)	0.2%	ON	Yes			
TREXIMET (ORAL)	0.1%	OFF	No			
ZOMIG (NASAL)	0.3%	OFF	No			
ZOLMITRIPTAN TABLET (AG) (ORAL)	0.1%	OFF	No-Gen			
ALMOTRIPTAN (AG) (ORAL)	0.0%	NR	No-Gen			
NARATRIPTAN (ORAL)	1.2%	OFF	No-Gen			
ZOLMITRIPTAN ODT (ORAL)	0.1%	OFF	No-Gen			
ZOLMITRIPTAN TABLET (ORAL)	0.3%	OFF	No-Gen			
ZOLMITRIPTAN ODT (AG) (ORAL)	0.1%	OFF	No-Gen			
SUMATRIPTAN DISP SYRIN (SUBCUTANE	0.0%	OFF	No-Gen			
SUMAVEL DOSEPRO (SUBCUTANE.)	0.0%	OFF	No			
SUMATRIPTAN (NASAL)	0.0%	OFF	No-Gen			
SUMATRIPTAN VIAL (SUBCUTANE.)	0.0%	OFF	No-Gen			
ALMOTRIPTAN (ORAL)	0.1%	NR	No-Gen			
FROVA (ORAL)	0.4%	OFF	No			
SUMATRIPTAN KIT (SUN) (SUBCUTANE.)	0.0%	OFF	No-Gen		<u> </u>	
SUMATRIPTAN KIT (SUBCUTANE.)	0.0%	OFF	No-Gen			
ZECUITY (TRANSDERM)	0.0%	NR	No			

- Discussion: None
- Ward Brown made a motion to accept staff recommendations as presented.
 - o Second-Lawrence Fleming
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
BLADDER RELAXANT PREPARATIONS						
	Current	Current				
Brand Name	Market Share	PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
GELNIQUE (TRANSDERM.)	0.1%		No	RECOMMENDATIONS	MODII ICATIONS	WODIIICATIONS
ENABLEX (ORAL)	0.4%		Yes			
OXYTROL (TRANSDERM.)	0.5%	OFF	No			
VESICARE (ORAL)	33.9%	ON	Yes			
TOVIAZ (ORAL)	8.7%	ON	Yes			
OXYBUTYNIN SYRUP (ORAL)	2.1%	ON	Yes-Gen			
OXYBUTYNIN TABLET (ORAL)	28.6%	ON	Yes-Gen			
OXYBUTYNIN ER (ORAL)	19.8%	ON	Yes-Gen			
GELNIQUE GEL PUMP (TRANSDERMAL)	0.0%	OFF	No			
TROSPIUM (ORAL)	0.4%	OFF	No-Gen			
TOLTERODINE (ORAL)	0.1%	OFF	No-Gen			
TOLTERODINE ER (AG) (ORAL)	0.5%	OFF	No-Gen			
MYRBETRIQ (ORAL)	3.9%	OFF	No			
TOLTERODINE ER (ORAL)	0.4%	OFF	No-Gen			
TROSPIUM ER (ORAL)	0.2%	OFF	No-Gen			
DETROL LA (ORAL)	0.3%	OFF	No			
DETROL (ORAL)	0.1%	OFF	No			

- Discussion: None
- William Raduege made a motion to accept staff recommendations as presented.
 - o Second-Catherine Decker
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
BONE RESORPTION SUPPRESSION AND RELATED AGENTS	3					
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ALENDRONATE TABLETS (ORAL)	91.6%		Yes-Gen	RECOMMENDATION	IIIODII IOATIOIO	IIIODII IOATIONO
FORTICAL (NASAL)	3.0%	_	Yes			
IBANDRONATE TABLETS (ORAL)	1.2%		No-Gen			
MIACALCIN (NASAL)	0.0%	OFF	No			
ATELVIA (ORAL)	0.0%	OFF	No			
CALCITONIN SALMON (NASAL)	0.4%	OFF	No-Gen			
ALENDRONATE SOLUTION (ORAL)	0.1%	OFF	No-Gen			
ACTONEL (ORAL)	0.3%	OFF	No			
BONIVA (ORAL)	0.1%	OFF	No			
FOSAMAX PLUS D (ORAL)	0.0%	OFF	No			
RISEDRONATE (ATELVIA) (AG) (ORAL)	0.0%	NR	No-Gen			
RISEDRONATE (ACTONEL) (AG) (ORAL)	0.2%	OFF	No-Gen			
RALOXIFENE (AG) (ORAL)	0.9%	OFF	No-Gen			
RALOXIFENE (ORAL)	1.5%	_	No-Gen			
BINOSTO (ORAL)	0.0%	_	No			
RISEDRONATE (ACTONEL) (ORAL)	0.5%	OFF	No-Gen			
RISEDRONATE (ATELVIA) (ORAL)	0.0%	_	No-Gen			
ETIDRONATE DISODIUM (ORAL)	0.0%	OFF	No-Gen			

- Discussion: None
- Robert Rohloff made a motion to accept staff recommendations as presented.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid GROWTH HORMONE						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
SAIZEN CARTRIDGE (INJECTION)	0.1%		No			
SAIZEN VIAL (INJECTION)	0.0%	OFF	No			
OMNITROPE CARTRIDGE (INJECTION)	0.0%	OFF	No			
NUTROPIN AQ PEN (INJECTION)	10.9%	ON	Yes			
NORDITROPIN PEN (INJECTION)	88.8%	ON	Yes			
GENOTROPIN CARTRIDGE (INJECTION)	0.0%	OFF	No			
OMNITROPE VIAL (INJECTION)	0.0%	OFF	No			
ZOMACTON VIAL (INJECTION)	0.0%	NR	No			
GENOTROPIN DISP SYRIN (INJECTION)	0.1%	OFF	No			
SEROSTIM VIAL (INJECTION)	0.0%	OFF	No			
HUMATROPE CARTRIDGE (INJECTION)	0.1%	OFF	No			
ZORBTIVE VIAL (INJECTION)	0.0%	OFF	No			
HUMATROPE VIAL (INJECTION)	0.0%	OFF	No			

- Discussion: None
- John Fangman made a motion to accept staff recommendations as presented.
 - o Second-William Raduege
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
ANDROGENIC AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AXIRON (TRANSDERM)	0.7%	OFF	No			
ANDROGEL GEL PUMP (TRANSDERM)	63.7%	ON	Yes			
ANDROGEL GEL PACKET (TRANSDERM.)	31.8%	ON	Yes			
ANDRODERM (TRANSDERM)	2.3%	OFF	No			
NATESTO (NASAL)	0.0%		No			
TESTOSTERONE GEL PUMP (AG) (VOGELXO) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTIM (TRANSDERM.)	1.5%	OFF	No			
TESTOSTERONE GEL PUMP (AG) (ANDROGEL) (TRANSDERM	0.0%	NR	No-Gen			
TESTOSTERONE GEL PACKET (AG) (ANDROGEL) (TRANSDER	0.0%	OFF	No-Gen			
FORTESTA (TRANSDERM)	0.0%	OFF	No			
TESTOSTERONE GEL (AG) (VOGELXO) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL PACKET (AG) (VOGELXO) (TRANSDERM	0.0%	OFF	No-Gen			
TESTOSTERONE GEL (AG) (FORTESTA) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL PUMP (ANDROGEL) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL (AG) (TESTIM) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL PACKET (ANDROGEL) (TRANSDERM)	0.0%	NR	No-Gen			
VOGELXO GEL PUMP (TRANSDERM)	0.0%	OFF	No			
VOGELXO GEL PACKET (TRANSDERM)	0.0%	OFF	No			
VOGELXO GEL (TRANSDERM)	0.0%	OFF	No			

- Discussion: None
- Kevin Izard made a motion to accept staff recommendations as presented.
 - Second-Ward Brown
 - o All members were in favor of the motion
 - o Motion passes

Wisconsin Medicaid						
PHOSPHATE BINDERS						
	Current Market	Current	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
RENAGEL (ORAL)	53.2%	ON	Yes			
RENVELA TABLET (ORAL)	2.1%	OFF	No			
PHOSLYRA (ORAL)	1.0%	ON	Yes			
RENVELA POWDER PACK (ORAL)	3.3%	OFF	No			
CALCIUM ACETATE TABLET (ORAL)	33.4%	ON	Yes-Gen			
CALCIUM ACETATE CAPSULE (ORAL)	0.7%	OFF	No-Gen			
ELIPHOS (ORAL)	1.1%	ON	Yes-Gen			
FOSRENOL CHEWABLE TABLET (ORAL)	4.2%	OFF	No			
VELPHORO (ORAL)	0.4%	OFF	No			
FOSRENOL POWDER PACK (ORAL)	0.0%	NR	No			
AURYXIA (ORAL)	0.6%	OFF	No			

- Discussion: None
- Michael Witkovsky made a motion to accept staff recommendations as presented.
 - o Second-John Fangman
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
HEPATITIS C AGENTS						
	Current Market	Current PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
PEG-INTRON (SUBCUTANE.)	0.0%	ON	Yes			
PEG-INTRON REDIPEN (SUBCUTANE.)	0.0%	ON	Yes			
PEGASYS VIAL (SUBCUTANE.)	0.0%	ON	Yes			
PEGASYS SYRINGE (SUB-Q)	0.0%	ON	Yes			
PEGASYS PROCLICK (SUB-Q)	0.5%	ON	Yes			
TECHNIVIE (ORAL)	0.0%	OFF	Yes			
OLYSIO (ORAL)	0.0%	OFF	No			
VIEKIRA PAK (ORAL)	22.9%	ON	Yes			
ZEPATIER (ORAL)	0.0%	NR	Yes			
HARVONI (ORAL)	6.7%	OFF	No			
DAKLINZA (ORAL)	2.2%	OFF	Yes			
SOVALDI (ORAL)	13.5%	OFF	No			
REBETOL CAPSULE (ORAL)	0.0%	NR	No			
RIBAVIRIN CAPSULE (ORAL)	8.7%	ON	Yes-Gen			
RIBAVIRIN TABLET (ORAL)	45.4%	ON	Yes-Gen			
REBETOL SOLUTION (ORAL)	0.0%	OFF	No			
RIBASPHERE 400 MG (ORAL)	0.0%	OFF	No-Gen			
RIBAVIRIN DOSE PACK (ORAL)	0.0%	OFF	No-Gen			
RIBASPHERE 600 MG (ORAL)	0.0%	OFF	No-Gen			
RIBAPAK (ORAL)	0.0%	OFF	No-Gen			

• Discussion: Rachel Currans-Henry stated that this class was discussed in detail during the closed session. Having more than one preferred drug for treatment options is desired by many stakeholders and DHS is balancing clinical and cost considerations. Once this comes into effect July 1, 2016, DHS is hoping to be able to treat more members due to the lower cost.

John Fangman stated that he was very excited about the expanded preferred list and wanted to commend DHS for working with prescribers to discuss treatment of members with Hepatitis C. John Fangman recommended that as more members are treated, DHS continue to work with the provider community to discuss ways to optimize member's access to the drugs as well as making sure members take the drugs.

- John Fangman made a motion to accept staff recommendations as presented.
 - Second-Ward Brown
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
MULTIPLE SCLEROSIS AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
COPAXONE 20 MG/ML (SUBCUTANE.)	18.5%	ON	Yes			
AVONEX PEN (INTRAMUSC)	7.9%	ON	Yes			
AVONEX (INTRAMUSC.)	5.1%	ON	Yes			
REBIF (SUBCUTANE.)	4.7%	ON	Yes			
BETASERON KIT (SUBCUTANE.)	4.1%	ON	Yes			
REBIF REBIDOSE PEN INJCTR (SUBCUTANE.)	6.4%	ON	Yes			
AMPYRA (ORAL)	7.1%	OFF	No			
EXTAVIA KIT (SUBCUTANE.)	0.0%	OFF	No			
EXTAVIA VIAL (SUBCUTANE.)	0.0%	OFF	No			
AUBAGIO (ORAL)	8.4%	ON	Yes			
GILENYA (ORAL)	10.1%	ON	Yes			
COPAXONE 40 MG/ML (SUBCUTANE.)	19.2%	ON	Yes			
GLATIRAMER 20 MG/ML (SUBCUTANE.)	0.0%	NR	No-Gen			
TECFIDERA (ORAL)	8.7%	OFF	No			
PLEGRIDY (SUBCUTANE.)	0.0%	OFF	No		·	

- Discussion: Rachel Currans-Henry stated that oral products were added to this class last year.
- Steve Maike made a motion to accept staff recommendations as presented.
 - Second-William Raduege
 - o All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
GI MOTILITY, CHRONIC						
	Current	Current				
	Market	PDL	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	Share	Status	Recommendation	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS
LOTRONEX (ORAL)	0.3%	OFF	Yes			
LINZESS (ORAL)	60.9%	ON	Yes			
AMITIZA (ORAL)	29.5%	ON	Yes			
MOVANTIK (ORAL)	9.2%	ON	Yes			
VIBERZI (ORAL)	0.0%	NR	Yes			
ALOSETRON (AG) (ORAL)	0.1%	NR	No-Gen			
ALOSETRON (ORAL)	0.0%	NR	No-Gen			

- Discussion: None
- Michael Witkovsky made a motion to accept staff recommendations as presented.
 - o Second-Kevin Izard
 - o All members were in favor of the motion
 - o Motion passes