

MEDICAID PHARMACY PRIOR AUTHORIZATION ADVISORY COMMITTEE
Recommendations Summary
May 9, 2018

In Attendance:

	Committee Member	Yes or No
1	Rosanne Barber	Yes
2	Ward Brown, M.D.	Yes
3	Catherine Decker, Pharm.D.	Yes
4	John Fangman, M.D.	Yes
5	Kevin Izard, M.D.	Yes – arrived @ 11:30 a.m.
6	Steve Maike, RPh	Yes
7	William E. Raduege, M.D.	Yes
8	Robert Rohloff, M.D.	Yes – arrived @ 11:50 a.m.
9	Pat Towers	Yes
10	Alicia Walker, Pharm.D.	Yes – arrived @ 9:45 a.m.
11	Michael Witkovsky, M.D.	Yes

MAY 2018 THERAPEUTIC DRUG CLASSES

ACNE AGENTS, TOPICAL
ANALGESICS, MISCELLANEOUS
ANALGESICS, NARCOTICS LONG
ANALGESICS, NARCOTICS SHORT
ANDROGENIC AGENTS
ANGIOTENSIN MODULATOR COMBINATIONS
ANGIOTENSIN MODULATORS
ANTIBIOTICS, GI
ANTIBIOTICS, INHALED
ANTIBIOTICS, TOPICAL
ANTIBIOTICS, VAGINAL
ANTICOAGULANTS
ANTIEMETIC/ANTIVERTIGO AGENTS
ANTIFUNGALS, ORAL
ANTIFUNGALS, TOPICAL
ANTIMIGRAINE AGENTS
ANTIPARASITICS, TOPICAL
ANTIVIRALS, ORAL
ANTIVIRALS, TOPICAL
BETA BLOCKERS
BLADDER RELAXANT PREPARATIONS
BONE RESORPTION SUPPRESSION AND RELATED AGENTS
BPH TREATMENTS
CALCIUM CHANNEL BLOCKERS
CEPHALOSPORINS AND RELATED AGENTS
FLUOROQUINOLONES, ORAL
GI MOTILITY, CHRONIC
GROWTH HORMONE
H. PYLORI TREATMENT
HEPATITIS B AGENTS
HEPATITIS C AGENTS
HYPOGLYCEMICS, ALPHA-GLUCOSIDASE INHIBITORS
HYPOGLYCEMICS, INCRETIN MIMETICS/ENHANCERS
HYPOGLYCEMICS, INSULIN AND RELATED AGENTS
HYPOGLYCEMICS, MEGLITINIDES
HYPOGLYCEMICS, OTHER
HYPOGLYCEMICS, SULFONYLUREAS
HYPOGLYCEMICS, TZD
LIPOTROPICS, OTHER
LIPOTROPICS, STATINS
MACROLIDES/KETOLIDES
MULTIPLE SCLEROSIS AGENTS
OPIATE DEPENDENCY
PAH AGENTS, ORAL AND INHALED
PANCREATIC ENZYMES
PENICILLINS
PHOSPHATE BINDERS
PLATELET AGGREGATION INHIBITORS
PRENATAL VITAMINS – *New Class*
PROTON PUMP INHIBITORS
SKELETAL MUSCLE RELAXANTS
TETRACYCLINES
ULCERATIVE COLITIS AGENTS

Recommendations Summary:

The following drug classes presented for review had no recommended status changes since the May 10, 2017 Wisconsin Medicaid Pharmacy PA Advisory Committee (PAC) meeting and were approved by the PAC in a block vote.

Drug Classes included in the committee block vote:

- Analgesics, Miscellaneous
 - Analgesics, Narcotics Short
 - Angiotensin Modulator Combinations
 - Angiotensin Modulators
 - Antibiotics, Inhaled
 - Antibiotics, Topical
 - Antibiotics, Vaginal
 - Anticoagulants
 - Antifungals, Oral
 - Antifungals, Topical
 - Antimigraine Agents, Triptans
 - Antiparasitics, Topical
 - Antivirals, Topical
 - Bladder Relaxant Preparations
 - BPH Treatments
 - Growth Hormone
 - H. Pylori Treatment
 - Hepatitis B Agents
 - Hepatitis C Agents
 - Hypoglycemics, Alpha-Glucosidase Inhibitors
 - Hypoglycemics, Meglitinides
 - Hypoglycemics, TZDs
 - Lipotropics, Other
 - Macrolides/Ketolides
 - Pancreatic Enzymes
 - Penicillins
 - Proton Pump Inhibitors
 - Skeletal Muscle Relaxants
 - Tetracyclines
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- Discussion: Catherine Decker highlighted information received through written testimony regarding the use of inhaled antibiotics for members with cystic fibrosis (CF), as well as the use of pancreatic enzymes.

Pam Appleby noted that Prior Authorization (PA) requests for inhaled antibiotics are reviewed on a case by case basis and Lora Wiggins, Chief Medical Officer for the Department, has had ongoing discussions with CF centers regarding the best treatment options for members.

In addition, the Department has worked with CF prescribers on criteria to determine when it is appropriate to approve Cayston with tobramycin.

John Fangman commended the State on their efforts in working with the clinicians to develop an agreed upon solution for treating patients and developing PA criteria.

Richard Pope indicated that Wisconsin is more proactive in communicating with clinicians in efforts like these compared to many other states he works with.

Catherine Decker noted that in the pancreatic enzymes class, if a member does not receive clinical benefit or experiences side effects with Zenpep, the preferred pancreatic enzyme, access to other pancreatic enzymes is available. The Committee is not requesting changes to this class.

- Kevin Izard made a motion to accept staff recommendations as presented.
 - Second – William Raduege
 - All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
ACNE AGENTS, TOPICAL						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
RETIN-A MICRO 0.08% PUMP (TOPICAL)	0.0%	OFF	No			
TAZORAC GEL (TOPICAL)	0.2%	OFF	No			
DIFFERIN CREAM (TOPICAL)	5.6%	ON	Yes			
DIFFERIN GEL PUMP (TOPICAL)	3.4%	ON	Yes			
ONEXTON W/PUMP (TOPICAL)	0.0%	OFF	No			
AZELEX (TOPICAL)	1.4%	ON	Yes			
EPIDUO (TOPICAL)	6.9%	ON	Yes			
ACANYA W/PUMP (TOPICAL)	0.0%	OFF	No			
ZIANA (TOPICAL)	0.0%	OFF	No			
RETIN-A GEL (TOPICAL)	3.4%	ON	Yes			
DIFFERIN GEL (TOPICAL)	0.4%	ON	Yes			
DIFFERIN LOTION (TOPICAL)	0.4%	ON	Yes			
BENZOYL PEROXIDE LOTION OTC (TOPICAL)	0.2%	ON	Yes-Gen			
RETIN-A CREAM (TOPICAL)	15.8%	ON	Yes			
BENZOYL PEROXIDE 10% CREAM OTC (TOPICAL)	0.0%	ON	Yes			
BENZOYL PEROXIDE 5% WASH OTC (TOPICAL)	4.6%	ON	Yes-Gen			
BENZOYL PEROXIDE 10% WASH OTC (TOPICAL)	4.1%	ON	Yes-Gen			
BENZOYL PEROXIDE GEL OTC (TOPICAL)	9.9%	ON	Yes-Gen			
CLINDAMYCIN PHOSPHATE SOLUTION (TOPICAL)	9.8%	ON	Yes-Gen			
AVITA CREAM (TOPICAL)	0.0%	OFF	No			
EPIDUO FORTE GEL W/PUMP (TOPICAL)	0.3%	OFF	No			
ERYTHROMYCIN SOLUTION (TOPICAL)	1.2%	ON	Yes-Gen			
BENZOYL PEROXIDE CLEANSER (TOPICAL)	0.0%	OFF	No-Gen			
CLINDAMYCIN PHOSPHATE GEL (TOPICAL)	28.5%	ON	Yes-Gen			
SULFACETAMIDE / SULFUR SUSPENSION (TOPICAL)	0.0%	OFF	No-Gen			
TRETINOIN GEL (AVITA, RETIN-A) (TOPICAL)	0.1%	OFF	No-Gen			
SULFACETAMIDE SUSPENSION (TOPICAL)	0.1%	OFF	No-Gen			
TRETINOIN CREAM (TOPICAL)	0.2%	OFF	No-Gen			
CLINDAMYCIN / BENZOYL PEROXIDE (DUAC) (TOPICAL)	0.1%	OFF	No-Gen			
BENZOYL PEROXIDE CLEANSER OTC (TOPICAL)	0.0%	OFF	No			
TRETINOIN MICROSPHERES GEL 0.04%, 0.1% (AG) (TOPICAL)	0.0%	OFF	No-Gen			
ERYTHROMYCIN GEL (TOPICAL)	0.1%	OFF	No-Gen			
ERYTHROMYCIN-BENZOYL PEROXIDE (TOPICAL)	0.1%	OFF	No-Gen			
CLINDAMYCIN PHOSPHATE LOTION (TOPICAL)	0.4%	OFF	No-Gen			
ADAPALENE GEL (TOPICAL)	0.1%	OFF	No-Gen			
RETIN-A MICRO 0.06% PUMP (TOPICAL)	0.0%	NR	No			
ADAPALENE GEL (AG) (TOPICAL)	0.1%	OFF	No-Gen			
SULFACETAMIDE CLEANSER (TOPICAL)	0.0%	OFF	No-Gen			
BENZACLIN (TOPICAL)	0.0%	OFF	No			
SULFACETAMIDE / SULFUR / UREA CLEANSER (TOPICAL)	0.0%	OFF	No-Gen			
BENZACLIN W/PUMP (TOPICAL)	0.0%	OFF	No			
ACZONE GEL W/PUMP (TOPICAL)	0.6%	OFF	No			
SULFACETAMIDE / SULFUR CLEANSER (TOPICAL)	1.0%	ON	Yes-Gen			
BENZOYL PEROXIDE GEL (TOPICAL)	0.0%	OFF	No-Gen			
TAZORAC CREAM (TOPICAL)	0.2%	OFF	No			
ADAPALENE GEL PUMP (TOPICAL)	0.0%	OFF	No-Gen			
ADAPALENE GEL PUMP (AG) (TOPICAL)	0.0%	OFF	No-Gen			
ADAPALENE CREAM (TOPICAL)	0.0%	OFF	No-Gen			
TAZAROTENE CREAM (AG) (TOPICAL)	0.0%	NR	No-Gen			
CLINDAMYCIN / BENZOYL PEROXIDE (BENZACLIN) (TOPICAL)	0.1%	OFF	No-Gen			
TRETINOIN MICROSPHERES GEL 0.04%, 0.1% (TOPICAL)	0.1%	OFF	No-Gen			
ERYTHROMYCIN GEL (AG) (TOPICAL)	0.0%	OFF	No			
TRETINOIN MICROSPHERES GEL 0.04%, 0.1% PUMP (AG) (TOPICAL)	0.0%	OFF	No-Gen			
TRETINOIN GEL (ATRALIN) (TOPICAL)	0.1%	OFF	No-Gen			
SULFACETAMIDE SODIUM/SULFUR CREAM (TOPICAL)	0.0%	OFF	No-Gen			
BP 10-1 (TOPICAL)	0.0%	OFF	No-Gen			
BENZPRO CLEANSER (TOPICAL)	0.0%	OFF	No			
KLARON (TOPICAL)	0.0%	OFF	No			
DAPSONE GEL (AG) (TOPICAL)	0.1%	NR	No-Gen			
ADAPALENE / BENZOYL PEROXIDE (EPIDUO) (TOPICAL)	0.0%	NR	No-Gen			
TAZAROTENE CREAM (TOPICAL)	0.2%	NR	No-Gen			
TRETINOIN MICROSPHERES GEL 0.04%, 0.1% PUMP (TOPICAL)	0.0%	OFF	No-Gen			
VELTIN (TOPICAL)	0.0%	OFF	No			
DAPSONE GEL (TOPICAL)	0.1%	NR	No-Gen			
CLINDAMYCIN / BENZOYL PEROXIDE (BENZACLIN) W/PUMP (TOPICAL)	0.0%	OFF	No-Gen			
RETIN-A MICRO 0.04%, 0.1% (TOPICAL)	0.0%	OFF	No			
OVACE PLUS FOAM (TOPICAL)	0.0%	OFF	No			
CLINDAMYCIN PHOSPHATE FOAM (TOPICAL)	0.0%	OFF	No-Gen			
ACZONE GEL (TOPICAL)	0.1%	OFF	No			
AVAR FOAM (TOPICAL)	0.0%	OFF	No			
PLEXION CLEANSER (TOPICAL)	0.0%	OFF	No			
AVAR CLEANSER (TOPICAL)	0.0%	OFF	No			
ATRALIN (TOPICAL)	0.0%	OFF	No			
FABIOR (TOPICAL)	0.0%	OFF	No			
OVACE PLUS WASH (TOPICAL)	0.0%	OFF	No			
CLINDAMYCIN / TRETINOIN (TOPICAL)	0.0%	OFF	No-Gen			
RETIN-A MICRO 0.04%, 0.1% PUMP (TOPICAL)	0.0%	OFF	No			
SULFACETAMIDE / SULFUR LOTION (TOPICAL)	0.0%	OFF	No-Gen			

- Discussion: None
- Ward Brown made a motion to accept staff recommendations as presented.
 - Second – John Fangman
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
ANALGESICS, NARCOTICS LONG						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
BUTRANS (TRANSDERM)	5.6%	ON	Yes			
NUCYNTA ER (ORAL)	0.6%	OFF	No			
METHADONE SOLUTION (ORAL)	0.1%	OFF	No-Gen			
METHADONE TABLET (ORAL)	6.4%	OFF	No-Gen			
METHADONE SOL TABLET (ORAL)	0.0%	ON	Yes-Gen			
MORPHINE ER TABLET (ORAL)	27.0%	ON	Yes-Gen			
METHADONE CONC (ORAL)	26.3%	ON	Yes-Gen			
EMBEDA (ORAL)	0.2%	ON	Yes			
FENTANYL (TRANSDERM)	14.2%	ON	Yes-Gen			
HYSINGLA ER (ORAL)	3.0%	ON	Yes			
TRAMADOL ER (ULTRAM ER) (ORAL)	0.8%	ON	Yes-Gen			
KADIAN (ORAL)	0.8%	ON	No			
OXYCONTIN (ORAL)	11.9%	OFF	No			
TRAMADOL ER (RYZOLT) (ORAL)	0.0%	OFF	No-Gen			
ARYMO ER (ORAL)	0.0%	NR	No			
XTAMPZA ER (ORAL)	0.8%	OFF	No			
ZOHYDRO ER (ORAL)	0.1%	OFF	No			
MORPHABOND ER (ORAL)	0.0%	NR	No			
MORPHINE ER CAPSULE (KADIAN) (ORAL)	0.0%	OFF	No-Gen			
BELBUCA (BUCCAL)	0.3%	OFF	No			
CONZIP (ORAL)	0.0%	OFF	No			
TRAMADOL ER (CONZIP) (AG) (ORAL)	0.0%	OFF	No-Gen			
MORPHINE ER CAPSULE (AVINZA) (ORAL)	0.0%	OFF	No-Gen			
OXYCODONE ER (AG) (ORAL)	1.3%	OFF	No-Gen			
OXYMORPHONE ER (ORAL)	0.3%	OFF	No-Gen			
HYDROMORPHONE ER (AG) (ORAL)	0.0%	OFF	No-Gen			
BUPRENORPHINE (AG) (TRANSDERM)	0.0%	NR	No-Gen			
HYDROMORPHONE ER (ORAL)	0.1%	OFF	No-Gen			
FENTANYL (37.5, 62.5, 87.5 MG) (TRANSDERM)	0.0%	OFF	No-Gen			
EXALGO (ORAL)	0.0%	OFF	No			

- Discussion: None
- Pat Towers made a motion to accept staff recommendations as presented.
 - Second – Michael Witkovsky
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
ANDROGENIC AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ANDRODERM (TRANSDERM)	0.5%	OFF	No			
ANDROGEL GEL PUMP (TRANSDERM)	70.0%	ON	Yes			
ANDROGEL GEL PACKET (TRANSDERM)	28.0%	ON	Yes			
TESTOSTERONE GEL PACKET (AG) (VOGELXO) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL PACKET (ANDROGEL) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL PUMP (AG) (VOGELXO) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL PUMP (ANDROGEL) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL PUMP (AG) (ANDROGEL) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL (AG) (VOGELXO) (TRANSDERM)	0.2%	OFF	No-Gen			
TESTOSTERONE GEL PUMP (AG) (AXIRON) (TRANSDERM)	0.2%	NR	No-Gen			
NATESTO (NASAL)	0.3%	OFF	No			
TESTOSTERONE GEL PACKET (AG) (ANDROGEL) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL (AG) (TESTIM) (TRANSDERM)	0.0%	OFF	No-Gen			
TESTOSTERONE GEL (VOGELXO) (TRANSDERM)	0.0%	NR	No-Gen			
VOGELXO GEL PACKET (TRANSDERM)	0.0%	OFF	No			
TESTOSTERONE GEL (AG) (FORTESTA) (TRANSDERM)	0.2%	OFF	No-Gen			
TESTOSTERONE GEL PUMP (AXIRON) (TRANSDERM)	0.7%	NR	No-Gen			
VOGELXO GEL PUMP (TRANSDERM)	0.0%	OFF	No			
FORTESTA (TRANSDERM)	0.0%	OFF	No			
VOGELXO GEL (TRANSDERM)	0.0%	OFF	No			
TESTIM (TRANSDERM)	0.0%	OFF	No			
AXIRON (TRANSDERM)	0.0%	OFF	No			

- Discussion: None
- William Raduege made a motion to accept staff recommendations as presented.
 - Second – Ward Brown
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
ANTIBIOTICS, GI						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
METRONIDAZOLE TABLET (ORAL)	90.3%	ON	Yes-Gen			
NEOMYCIN (ORAL)	0.8%	ON	Yes-Gen			
TINDAZOLE (ORAL)	0.5%	ON	Yes-Gen			
ALINIA TABLET (ORAL)	0.3%	ON	Yes			
ALINIA SUSPENSION (ORAL)	0.1%	ON	Yes			
METRONIDAZOLE CAPSULE (ORAL)	0.0%	OFF	No-Gen			
VANCOMYCIN CAPSULE (AG) (ORAL)	0.2%	ON	Yes-Gen			
SOLOSEC (ORAL)	0.0%	NR	No			
VANCOMYCIN CAPSULE (ORAL)	1.6%	ON	Yes-Gen			
XIFAXAN (ORAL)	6.1%	ON	Yes			
DIFICID TABLET (ORAL)	0.1%	OFF	No			

- Discussion: None
- Michael Witkovsky made a motion to accept staff recommendations as presented.
 - Second – John Fangman
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
ANTIEMETIC/ANTIVERTIGO AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
GRANISETRON (ORAL)	0.1%	ON	Yes-Gen			
PROMETHAZINE SYRUP (ORAL)	3.8%	ON	Yes-Gen			
MECLIZINE OTC (ORAL)	1.3%	ON	Yes-Gen			
METOCLOPRAMIDE TABLET (ORAL)	9.3%	ON	Yes-Gen			
PROMETHAZINE TABLET (ORAL)	4.6%	ON	Yes-Gen			
PROCHLORPERAZINE (ORAL)	4.7%	ON	Yes-Gen			
ONDANSETRON TABLETS (ORAL)	18.0%	ON	Yes-Gen			
MECLIZINE (ORAL)	7.0%	ON	Yes-Gen			
ONDANSETRON ODT (ORAL)	44.2%	ON	Yes-Gen			
METOCLOPRAMIDE SOLUTION (ORAL)	0.3%	ON	Yes-Gen			
ONDANSETRON SOLUTION (ORAL)	0.4%	ON	Yes-Gen			
TRANSDERM-SCOP (TRANSDERM)	1.7%	ON	Yes			
TRIMETHOBENZAMIDE (ORAL)	0.1%	ON	Yes-Gen			
DICLEGIS (ORAL)	3.7%	ON	Yes			
EMEND CAPSULE (ORAL)	0.1%	ON	Yes			
PROCHLORPERAZINE (RECTAL)	0.2%	ON	Yes-Gen			
SCOPOLAMINE (TRANSDERM)	0.0%	NR	No-Gen			
PROMETHAZINE (RECTAL)	0.5%	ON	Yes-Gen			
DRONABINOL (ORAL)	0.0%	OFF	No-Gen			
BONJESTA (ORAL)	0.0%	OFF	No			
METOCLOPRAMIDE ODT (ORAL)	0.0%	OFF	No-Gen			
ANZEMET (ORAL)	0.0%	OFF	No			
EMEND PACK (ORAL)	0.2%	ON	Yes			
PROMETHAZINE 50 MG (RECTAL)	0.0%	ON	Yes-Gen			
ZUPLENZ (ORAL)	0.0%	OFF	No			
AKYNZEO (ORAL)	0.0%	OFF	No			
APREPITANT CAPSULE (ORAL)	0.0%	OFF	No-Gen			
APREPITANT PACK (ORAL)	0.0%	OFF	No-Gen			
VARUBI (ORAL)	0.0%	OFF	No			
EMEND POWDER PACKET (ORAL)	0.0%	OFF	No			
CESAMET (ORAL)	0.0%	OFF	No			
SANCUSO (TRANSDERMAL)	0.0%	OFF	No			
SYNDROS (ORAL)	0.0%	NR	No			

- Discussion: None
- Catherine Decker made a motion to accept staff recommendations as presented.
 - Second – John Fangman
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
ANTIVIRALS, ORAL						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ACYCLOVIR TABLET (ORAL)	18.5%	ON	Yes-Gen			
ACYCLOVIR CAPSULE (ORAL)	2.7%	ON	Yes-Gen			
VALACYCLOVIR (ORAL)	64.7%	ON	Yes-Gen			
FAMCICLOVIR (ORAL)	0.2%	OFF	No-Gen			
ACYCLOVIR SUSPENSION (ORAL)	2.0%	ON	Yes-Gen			
SITAVIG (BUCCAL)	0.0%	OFF	No			
TAMIFLU CAPSULE (ORAL)	7.3%	ON	Yes			
RELENZA (INHALATION)	0.0%	ON	Yes			
OSELTAMIVIR CAPSULE (ORAL)	0.0%	ON	No-Gen			
RIMANTADINE (ORAL)	0.0%	ON	Yes-Gen			
TAMIFLU SUSPENSION (ORAL)	4.5%	ON	Yes			
OSELTAMIVIR SUSPENSION (ORAL)	0.1%	NR	No-Gen			

- Discussion: None
- Alicia Walker made a motion to accept staff recommendations as presented.
 - Second – Pat Towers
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
BETA-BLOCKERS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
BISOPROLOL HCTZ (ORAL)	0.3%	ON	Yes-Gen			
DUTOPROL (ORAL)	0.0%	OFF	No			
ATENOLOL / CHLORTHALIDONE (ORAL)	0.6%	ON	Yes-Gen			
METOPROLOL / HCTZ (ORAL)	0.0%	OFF	No-Gen			
PROPRANOLOL / HCTZ (ORAL)	0.0%	OFF	No-Gen			
NADOLOL / BENDROFLUMETHIAZIDE (ORAL)	0.0%	OFF	No-Gen			
BYSTOLIC (ORAL)	1.0%	OFF	No			
METOPROLOL (ORAL)	28.5%	ON	Yes-Gen			
CARVEDILOL (ORAL)	13.5%	ON	Yes-Gen			
ATENOLOL (ORAL)	10.2%	ON	Yes-Gen			
SOTALOL (ORAL)	0.6%	ON	Yes-Gen			
PROPRANOLOL SOLUTION (ORAL)	0.4%	ON	Yes-Gen			
PROPRANOLOL TABLET (ORAL)	7.7%	ON	Yes-Gen			
METOPROLOL XL (ORAL)	30.0%	ON	Yes-Gen			
BISOPROLOL (ORAL)	0.6%	ON	Yes-Gen			
ACEBUTOLOL (ORAL)	0.0%	OFF	No-Gen			
LABELALOL (ORAL)	2.1%	ON	Yes-Gen			
PROPRANOLOL ER (ORAL)	3.8%	ON	Yes-Gen			
PINDOLOL (ORAL)	0.0%	OFF	No-Gen			
INDERAL XL (ORAL)	0.0%	OFF	No			
NADOLOL (ORAL)	0.3%	OFF	No-Gen			
INNOPRAN XL (ORAL)	0.0%	OFF	No			
BETAXOLOL (ORAL)	0.0%	OFF	No-Gen			
COREG CR (ORAL)	0.0%	OFF	No			
CARVEDILOL ER (ORAL)	0.0%	NR	No-Gen			
TIMOLOL (ORAL)	0.0%	OFF	No-Gen			
HEMANGEOL (ORAL)	0.0%	OFF	No			
SOTYLIZE (ORAL)	0.0%	OFF	No			

- Discussion: None
- Ward Brown made a motion to accept staff recommendations as presented.
 - Second – William Raduege
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
BONE RESORPTION SUPPRESSION AND RELATED AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ATELVIA (ORAL)	0.0%	OFF	No			
ALENDRONATE TABLETS (ORAL)	90.7%	ON	Yes-Gen			
RALOXIFENE (AG) (ORAL)	0.0%	OFF	No-Gen			
IBANDRONATE TABLETS (ORAL)	1.5%	OFF	No-Gen			
RALOXIFENE (ORAL)	1.7%	OFF	No-Gen			
CALCITONIN SALMON (NASAL)	3.2%	ON	Yes-Gen			
RISEDRONATE (ACTONEL) (ORAL)	0.8%	OFF	No-Gen			
RISEDRONATE (ACTONEL) (AG) (ORAL)	0.0%	OFF	No-Gen			
BONIVA (ORAL)	0.0%	OFF	No			
FOSAMAX PLUS D (ORAL)	0.0%	OFF	No			
ALENDRONATE SOLUTION (ORAL)	0.1%	OFF	No-Gen			
RISEDRONATE (ATELVIA) (AG) (ORAL)	0.1%	OFF	No-Gen			
BINOSTO (ORAL)	0.0%	OFF	No			
RISEDRONATE (ATELVIA) (ORAL)	0.0%	OFF	No-Gen			
ACTONEL (ORAL)	0.1%	OFF	No			
FORTEO (SUBCUTANE.)	1.7%	NR	No			
ETIDRONATE DISODIUM (ORAL)	0.0%	OFF	No-Gen			
TYMLOS (SUBCUTANE.)	0.0%	NR	No			

- Discussion: None
- William Raduege made a motion to accept staff recommendations as presented.
 - Second – Robert Rohloff
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - 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)	75.2%	ON	Yes-Gen				
NIFEDIPINE ER (ORAL)	5.0%	ON	Yes-Gen				
FELODIPINE ER (ORAL)	0.1%	OFF	No-Gen				
ISRADIPINE (ORAL)	0.1%	OFF	No-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				
CARDIZEM LA (ORAL)	0.0%	OFF	No				
VERAPAMIL TABLET (ORAL)	1.0%	ON	Yes-Gen				
VERAPAMIL TABLET ER (ORAL)	2.7%	ON	Yes-Gen				
DILTIAZEM TABLET (ORAL)	1.1%	ON	Yes-Gen				
VERAPAMIL ER PM (ORAL)	0.0%	OFF	No-Gen				
DILTIAZEM CAPSULE ER (ORAL)	13.0%	ON	Yes-Gen				
VERAPAMIL 360 MG CAPSULE (ORAL)	0.0%	OFF	No-Gen				
DILTIAZEM LA (AG) (ORAL)	0.0%	OFF	No-Gen				
MATZIM LA (ORAL)	0.0%	OFF	No-Gen				
VERAPAMIL CAPSULE ER (ORAL)	1.4%	ON	No-Gen				

- Discussion: None
- Ward Brown made a motion to accept staff recommendations as presented.
 - Second – Pat Towers
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid		CEPHALOSPORINS AND RELATED ANTIBIOTICS					
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS	
CEPHALEXIN CAPSULE (ORAL)	22.5%	ON	Yes-Gen				
CEFADROXIL CAPSULE (ORAL)	1.2%	ON	Yes-Gen				
AMOXICILLIN/CLAV TABLET (ORAL)	30.9%	ON	Yes-Gen				
AMOXICILLIN/CLAV SUSPENSION (ORAL)	14.1%	ON	Yes-Gen				
CEPHALEXIN SUSPENSION (ORAL)	5.0%	ON	Yes-Gen				
CEFADROXIL SUSPENSION (ORAL)	0.2%	ON	Yes-Gen				
CEPHALEXIN TABLET (ORAL)	0.2%	ON	No-Gen				
CEFADROXIL TABLET (ORAL)	0.1%	ON	No-Gen				
AMOXICILLIN/CLAV CHEW TABLET (ORAL)	0.3%	ON	Yes-Gen				
AMOXICILLIN/CLAV XR (ORAL)	0.0%	OFF	No-Gen				
DAXBIA (ORAL)	0.0%	NR	No				
AUGMENTIN 125 SUSPENSION (ORAL)	0.0%	ON	Yes				
CEFUROXIME TABLET (ORAL)	3.5%	ON	Yes-Gen				
CEFPROZIL TABLET (ORAL)	0.4%	ON	Yes-Gen				
CEFACTOR CAPSULE (ORAL)	0.0%	ON	Yes-Gen				
CEFPROZIL SUSPENSION (ORAL)	0.9%	ON	Yes-Gen				
CEFTIN SUSPENSION (ORAL)	0.2%	ON	Yes				
CEFACTOR TABLET ER (ORAL)	0.0%	OFF	No-Gen				
CEFACTOR SUSPENSION (ORAL)	0.0%	ON	No-Gen				
CEFDINIR CAPSULE (ORAL)	5.1%	ON	Yes-Gen				
SUPRAX CAPSULE (ORAL)	0.5%	ON	Yes				
CEFDINIR SUSPENSION (ORAL)	14.7%	ON	Yes-Gen				
CEFPODOXIME SUSPENSION (ORAL)	0.0%	OFF	No-Gen				
CEFPODOXIME TABLET (ORAL)	0.0%	OFF	No-Gen				
SUPRAX TAB CHEW (ORAL)	0.0%	ON	Yes				
SUPRAX SUSPENSION (ORAL)	0.1%	ON	Yes				
CEFIXIME SUSPENSION (ORAL)	0.0%	OFF	No-Gen				

- Discussion: None
- William Raduege made a motion to accept staff recommendations as presented.
 - Second – Michael Witkovsky
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
FLUOROQUINOLONES, ORAL						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
LEVOFLOXACIN TABLET (ORAL)	36.6%	ON	Yes-Gen			
CIPROFLOXACIN TABLET (ORAL)	62.9%	ON	Yes-Gen			
CIPROFLOXACIN ER (ORAL)	0.0%	OFF	No-Gen			
MOXIFLOXACIN (AG) (ORAL)	0.0%	OFF	No-Gen			
CIPRO SUSPENSION (ORAL)	0.3%	OFF	No			
MOXIFLOXACIN (ORAL)	0.1%	OFF	No-Gen			
CIPROFLOXACIN SUSPENSION (ORAL)	0.0%	OFF	No-Gen			
LEVOFLOXACIN SOLUTION (ORAL)	0.1%	OFF	No-Gen			
OFLOXACIN (ORAL)	0.0%	OFF	No-Gen			
AVELOX (ORAL)	0.0%	OFF	No			
BAXDELA (ORAL)	0.0%	NR	No			

- Discussion: None
- John Fangman made a motion to accept staff recommendations as presented.
 - Second – Ward Brown
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
GI MOTILITY, CHRONIC						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AMITIZA (ORAL)	21.9%	ON	Yes			
LINZESS (ORAL)	63.2%	ON	Yes			
MOVANTIK (ORAL)	12.3%	ON	Yes			
SYMPROIC (ORAL)	0.0%	NR	No			
TRULANCE (ORAL)	0.5%	OFF	No			
LOTRONEX (ORAL)	0.6%	ON	Yes			
VIBERZI (ORAL)	1.4%	OFF	No			
ALOSETRON (AG) (ORAL)	0.0%	OFF	No-Gen			
ALOSETRON (ORAL)	0.1%	OFF	No-Gen			
RELISTOR (ORAL)	0.1%	OFF	No			

- Discussion: None
- William Raduege made a motion to accept staff recommendations as presented.
 - Second – Pat Towers
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
HYPOGLYCEMICS, INCRETIN MIMETICS/ENHANCERS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
JANUVIA (ORAL)	43.2%	ON	Yes			
JANUMET (ORAL)	9.3%	ON	Yes			
ONGLYZA (ORAL)	0.4%	OFF	No			
TRADJENTA (ORAL)	11.4%	ON	Yes			
KOMBIGLYZE XR (ORAL)	0.2%	OFF	No			
JENTADUETO (ORAL)	2.0%	ON	Yes			
JANUMET XR (ORAL)	4.0%	ON	Yes			
OSENI (ORAL)	0.0%	OFF	No			
GLYXAMBI (ORAL)	0.2%	OFF	Yes			
JENTADUETO XR (ORAL)	0.0%	OFF	No			
ALOGLIPTIN (AG) (ORAL)	0.0%	OFF	No-Gen			
ALOGLIPTIN/METFORMIN (AG) (ORAL)	0.0%	OFF	No-Gen			
ALOGLIPTIN/PIOGLITAZONE (AG) (ORAL)	0.0%	OFF	No-Gen			
QTERN (ORAL)	0.0%	NR	No			
KAZANO (ORAL)	0.0%	OFF	No			
NESINA (ORAL)	0.0%	OFF	No			
STEGLUJAN (ORAL)	0.0%	NR	No			
BYETTA PENS (SUBCUTANE.)	2.7%	ON	Yes			
SYMLIN PENS (SUBCUTANE.)	0.0%	ON	Yes			
BYDUREON (SUBCUTANE.)	0.7%	ON	Yes			
TANZEUM (SUBCUTANE.)	0.3%	OFF	No			
BYDUREON PENS (SUBCUTANE.)	15.3%	ON	Yes			
VICTOZA (SUBCUTANE.)	9.7%	ON	Yes			
TRULICITY (SUBCUTANE.)	0.4%	OFF	Yes			
BYDUREON BCISE (SUBCUTANE.)	0.0%	NR	No			
SOLQUA (SUBCUTANE.)	0.0%	OFF	No			
XULTOPHY (SUBCUTANE.)	0.0%	OFF	No			
ADLYXIN (SUBCUTANE.)	0.0%	OFF	No			
OZEMPIC (SUBCUTANE.)	0.0%	NR	No			

- Discussion: None
- Alicia Walker made a motion to accept staff recommendations as presented.
 - Second – William Raduege
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
HYPOGLYCEMICS, INSULIN AND RELATED AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
HUMULIN 500 U/M VIAL (SUBCUTANE.)	0.4%	ON	Yes			
HUMALOG MIX VIAL (SUBCUTANE.)	0.5%	ON	Yes			
HUMULIN 70/30 VIAL OTC (SUBCUTANE.)	1.6%	ON	Yes			
NOVOLOG MIX PEN (SUBCUTANE.)	0.4%	ON	Yes			
NOVOLOG MIX VIAL (SUBCUTANE.)	0.1%	ON	Yes			
HUMALOG MIX PEN (SUBCUTANE.)	2.5%	ON	Yes			
HUMULIN VIAL OTC (SUBCUTANE.)	3.0%	ON	Yes			
NOVOLIN VIAL OTC (SUBCUTANE.)	0.1%	OFF	No			
NOVOLIN 70/30 VIAL OTC (SUBCUTANE.)	0.0%	OFF	No			
HUMULIN 500 U/M PEN (SUBCUTANE.)	0.3%	OFF	No			
HUMULIN 70/30 PEN OTC (SUBCUTANE.)	1.9%	ON	Yes			
HUMULIN PEN OTC (SUBCUTANE.)	1.0%	ON	Yes			
LEVEMIR PENS (SUBCUTANE.)	5.6%	ON	Yes			
LANTUS SOLOSTAR PEN (SUBCUTANE.)	37.0%	ON	Yes			
LANTUS VIAL (SUBCUTANE.)	8.6%	ON	Yes			
LEVEMIR VIAL (SUBCUTANE.)	0.8%	ON	Yes			
BASAGLAR KWIKPEN (SUBCUTANE.)	0.0%	OFF	No			
TRESIBA FLEXTOUCH 100 U/ML PEN (SUBCUTANEOUS)	0.0%	OFF	No			
TRESIBA FLEXTOUCH 200 U/ML PEN (SUBCUTANEOUS)	0.1%	OFF	No			
TOUJEO SOLOSTAR PEN (SUBCUTANE.)	0.1%	OFF	No			
HUMALOG VIAL (SUBCUTANE.)	8.2%	ON	Yes			
APIDRA VIAL (SUBCUTANE.)	0.0%	OFF	No			
NOVOLOG PEN (SUBCUTANE.)	2.3%	ON	Yes			
APIDRA SOLOSTAR PEN (SUBCUTANE.)	0.0%	OFF	No			
NOVOLOG VIAL (SUBCUTANE.)	0.9%	ON	Yes			
NOVOLOG CARTRIDGE (SUBCUTANE.)	0.1%	ON	Yes			
HUMALOG CARTRIDGE (SUBCUTANE.)	2.8%	ON	Yes			
HUMALOG PEN (SUBCUTANE.)	21.6%	ON	Yes			
HUMALOG JUNIOR KWIKPEN (SUBCUTANE.)	0.0%	NR	No			
FIASP FLEXTOUCH PEN (SUBCUTANE.)	0.0%	NR	No			
HUMALOG 200 U/ML PEN (SUBCUTANE.)	0.1%	OFF	No			
FIASP VIAL (SUBCUTANE.)	0.0%	NR	No			
AFREZZA CARTRIDGE (INHALATION)	0.0%	OFF	No			
ADMELOG VIAL (SUBCUTANE.)	0.0%	OFF	No			
ADMELOG SOLOSTAR PEN (SUBCUTANE.)	0.0%	OFF	No			

- Discussion: Pat Towers referenced the testimony heard in the morning from a physician with Children's Hospital of Wisconsin advocating for greater access to longer-acting products to ensure access for patients with different needs. Additionally, Robert Rohloff shared that during the closed session the State confirmed that PAs are acted upon in a timely manner. Based on the testimony and the Committee's discussion, the State will reach out to the physician to ensure the PA process is well understood.
- William Raduege made a motion to accept staff recommendations as presented.
 - Second – Pat Towers
 - 10 members were in favor of the motion. Kevin Izard was not present.
 - Motion passes

Wisconsin Medicaid						
HYPOGLYCEMICS, OTHER						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
FARXIGA (ORAL)	2.4%	ON	Yes			
METFORMIN (ORAL)	60.5%	ON	Yes-Gen			
SEGLUROMET (ORAL)	0.0%	NR	No			
METFORMIN ER (GLUCOPHAGE XR) (ORAL)	26.6%	ON	Yes-Gen			
INVOKANA (ORAL)	8.8%	ON	Yes			
GLYBURIDE-METFORMIN (ORAL)	0.7%	ON	Yes-Gen			
XIGDUO XR (ORAL)	0.0%	OFF	No			
JARDIANCE (ORAL)	0.7%	OFF	Yes			
SYNJARDY (ORAL)	0.0%	OFF	No			
INVOKAMET (ORAL)	0.1%	OFF	No			
RIOMET (ORAL)	0.1%	OFF	No			
GLIPIZIDE-METFORMIN (ORAL)	0.0%	OFF	No-Gen			
SYNJARDY XR (ORAL)	0.0%	NR	No			
INVOKAMET XR (ORAL)	0.0%	OFF	No			
STEGLATRO (ORAL)	0.0%	NR	No			
METFORMIN ER (FORTAMET) (ORAL)	0.0%	OFF	No-Gen			
METFORMIN ER (GLUMETZA) (ORAL)	0.1%	OFF	No-Gen			
GLUMETZA (ORAL)	0.0%	OFF	No			

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

Wisconsin Medicaid						
HYPOGLYCEMICS, SULFONYLUREAS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
GLIPIZIDE (ORAL)	33.5%	ON	Yes-Gen			
GLIMEPIRIDE (ORAL)	33.9%	ON	Yes-Gen			
GLYBURIDE MICRONIZED (ORAL)	0.3%	ON	Yes-Gen			
GLYBURIDE (ORAL)	9.8%	ON	Yes-Gen			
GLIPIZIDE ER (ORAL)	22.5%	ON	Yes-Gen			
TOLBUTAMIDE (ORAL)	0.0%	OFF	No-Gen			
CHLORPROPAMIDE (ORAL)	0.0%	ON	No-Gen			
TOLAZAMIDE (ORAL)	0.0%	OFF	No-Gen			

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

Wisconsin Medicaid						
LIPOTROPICS, STATINS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
SIMVASTATIN (ORAL)	22.5%	ON	Yes-Gen			
ROSUVASTATIN (ORAL)	6.5%	ON	Yes-Gen			
LOVASTATIN (ORAL)	5.0%	ON	Yes-Gen			
ATORVASTATIN (ORAL)	53.9%	ON	Yes-Gen			
PRAVASTATIN (ORAL)	11.9%	ON	Yes-Gen			
VYTORIN (ORAL)	0.0%	OFF	No			
LIVALO (ORAL)	0.1%	OFF	No			
EZETIMIBE-SIMVASTATIN (ORAL)	0.0%	NR	No-Gen			
ALTOPREV (ORAL)	0.0%	OFF	No			
FLUVASTATIN (ORAL)	0.0%	OFF	No-Gen			
AMLODIPINE-ATORVASTATIN (ORAL)	0.0%	OFF	No-Gen			
FLUVASTATIN ER (AG) (ORAL)	0.0%	OFF	No-Gen			
FLUVASTATIN ER (ORAL)	0.0%	OFF	No-Gen			
LESCOL XL (ORAL)	0.0%	OFF	No			
CADUET (ORAL)	0.0%	OFF	No			

- Discussion: None
- Kevin Izard made a motion to accept staff recommendations as presented.
 - Second – William Raduege
 - 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.)	6.7%	ON	Yes			
AVONEX (INTRAMUSC.)	3.6%	ON	Yes			
AVONEX PEN (INTRAMUSC.)	5.8%	ON	Yes			
BETASERON KIT (SUBCUTANE.)	2.9%	ON	Yes			
REBIF (SUBCUTANE.)	2.9%	ON	Yes			
AMPYRA (ORAL)	8.9%	OFF	No			
REBIF REBIDOSE PEN INJCTR (SUBCUTANE.)	3.5%	ON	Yes			
EXTAVIA KIT (SUBCUTANE.)	0.0%	OFF	No			
GILENYA (ORAL)	17.5%	ON	Yes			
AUBAGIO (ORAL)	15.2%	ON	Yes			
COPAXONE 40 MG/ML (SUBCUTANE.)	24.6%	ON	Yes			
TECFIDERA (ORAL)	7.7%	OFF	No			
EXTAVIA VIAL (SUBCUTANE.)	0.0%	OFF	No			
GLATIRAMER 20 MG/ML (SUBCUTANE.)	0.0%	OFF	No-Gen			
GLATIRAMER 40 MG/ML (SUBCUTANE.)	0.7%	NR	No-Gen			
PLEGRIDY (SUBCUTANE.)	0.0%	OFF	No			

- Discussion: None
- William Raduege made a motion to accept staff recommendations as presented.
 - Second – Ward Brown
 - All members were in favor of 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
NALTREXONE (ORAL)	7.5%	ON	Yes-Gen			
NALOXONE VIAL (INJECTION)	0.1%	ON	Yes-Gen			
NARCAN SPRAY (NASAL)	3.9%	ON	Yes			
NALOXONE SYRINGE (INJECTION)	0.0%	ON	Yes-Gen			
VIVITROL (INTRAMUSC)	5.7%	ON	Yes			
BUPRENORPHINE HCL (SUBLINGUAL)	4.5%	OFF	No-Gen			
SUBOXONE FILM (SUBLINGUAL)	76.1%	ON	Yes			
BUNAVAIL (BUCCAL)	0.0%	OFF	No			
BUPRENORPHINE/NALOXONE TAB (SUBLINGUAL)	0.0%	OFF	No-Gen			
ZUBSOLV (SUBLINGUAL)	2.2%	ON	Yes			
SUBLOCADE (SUBCUTANEOUS)	0.0%	NR	No			

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

Wisconsin Medicaid						
PAH AGENTS, ORAL AND INHALED						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
VENTAVIS (INHALATION)	0.0%	OFF	No			
TYVASO (INHALATION)	1.7%	OFF	No			
TRACLEER TABLET (ORAL)	6.7%	ON	Yes			
LETAIRIS (ORAL)	13.7%	ON	Yes			
OPSUMIT (ORAL)	6.6%	OFF	No			
TRACLEER SUSPENSION (ORAL)	0.0%	NR	No			
ADEMPAS (ORAL)	3.1%	OFF	No			
ORENITRAM ER (ORAL)	0.8%	OFF	No			
UPTRAVI (ORAL)	1.9%	OFF	No			
UPTRAVI TABLET DOSE PACK (ORAL)	0.4%	OFF	No			
ADCIRCA (ORAL)	24.7%	ON	Yes			
SILDENAFIL (ORAL)	40.5%	ON	Yes-Gen			
REVATIO SUSPENSION (ORAL)	0.0%	OFF	No			

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

Wisconsin Medicaid						
PHOSPHATE BINDERS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
SEVELAMER CARBONATE TABLET (AG) (ORAL)	0.0%	OFF	No-Gen			
REVELA POWDER PACK (ORAL)	2.6%	OFF	No			
RENAGEL (ORAL)	55.5%	ON	Yes			
REVELA TABLET (ORAL)	3.9%	OFF	No			
FOSRENOL CHEWABLE TABLET (ORAL)	3.6%	OFF	No			
PHOSLYRA (ORAL)	0.5%	ON	Yes			
ELPHOS (ORAL)	0.0%	ON	No-Gen			
CALCIUM ACETATE CAPSULE (ORAL)	0.9%	OFF	Yes-Gen			
CALCIUM ACETATE TABLET (ORAL)	30.3%	ON	Yes-Gen			
FOSRENOL POWDER PACK (ORAL)	0.0%	OFF	No			
SEVELAMER CARBONATE TABLET (ORAL)	0.0%	NR	No-Gen			
VELPHORO (ORAL)	1.2%	OFF	No			
LANTHANUM CARBONATE CHEWABLE TABLET (ORAL)	0.0%	NR	No-Gen			
AURYXIA (ORAL)	1.6%	OFF	No			
SEVELAMER CARBONATE POWDER PACK (ORAL)	0.0%	NR	No-Gen			

- Discussion: None
- William Raduege made a motion to accept staff recommendations as presented.
 - Second – John Fangman
 - 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
PRASUGREL (AG) (ORAL)	0.0%	NR	No-Gen			
AGGRENOX (ORAL)	3.6%	ON	Yes			
CLOPIDOGREL (ORAL)	88.0%	ON	Yes-Gen			
DIPYRIDAMOLE (ORAL)	0.3%	ON	Yes-Gen			
BRILINTA (ORAL)	6.6%	ON	Yes			
PRASUGREL (ORAL)	0.1%	NR	No-Gen			
YOSPRALA (ORAL)	0.0%	OFF	No			
TICLOPIDINE (ORAL)	0.0%	OFF	No-Gen			
EFFIENT (ORAL)	1.2%	OFF	No			
ZONTIVITY (ORAL)	0.0%	OFF	No			
ASPIRIN/DIPYRIDAMOLE (ORAL)	0.0%	OFF	No-Gen			
ASPIRIN/DIPYRIDAMOLE (AG) (ORAL)	0.0%	OFF	No-Gen			

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

Wisconsin Medicaid						
PRENATAL VITAMINS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
PNV WITH CA,NO.72/IRON/FA (ORAL)	54.9%	NR	Yes-Gen			
VOL-PLUS (ORAL)	0.9%	NR	Yes-Gen			
PRENATA TAB CHEW (ORAL)	0.7%	NR	Yes			
PRENATAL VIT #76/IRON,CARB/FA (ORAL)	2.5%	NR	Yes-Gen			
PRENATAL VIT27&CALCIUM/IRON/FA (ORAL)	0.2%	NR	Yes-Gen			
VINATE-M (ORAL)	1.0%	NR	Yes-Gen			
TRINATE (ORAL)	0.0%	NR	Yes			
TRINATAL RX 1 (ORAL)	0.1%	NR	Yes-Gen			
PNV NO.15/IRON FUM & PS CMP/FA (ORAL)	0.0%	NR	Yes-Gen			
PNV#16/IRON FUM & PS/FA/OM-3 (ORAL)	0.0%	NR	Yes-Gen			
PRENATABS FA (ORAL)	0.5%	NR	Yes-Gen			
PNV NO.118/IRON FUMARATE/FA CHEW TABLET (ORAL)	1.0%	NR	Yes-Gen			
PRENATAL VIT NO.78/IRON/FA (ORAL)	0.2%	NR	Yes-Gen			
PRENATABS RX (ORAL)	0.7%	NR	Yes-Gen			
FE C/FA (ORAL)	0.0%	NR	Yes-Gen			
PRENATAL VIT NO.73/IRON/FA (ORAL)	0.3%	NR	Yes-Gen			
PRENATAL-U (ORAL)	0.0%	NR	Yes-Gen			
PNV COMBO#47/IRON/FA #1/DHA (ORAL)	1.6%	NR	Yes-Gen			
PNV119/IRON FUMARATE/FA/DSS TABLET (ORAL)	22.9%	NR	Yes-Gen			
COMPLETENATE CHEW TABLET (ORAL)	0.2%	NR	Yes-Gen			
PV W-O VIT A/FE FUMARATE/FA TAB CHEW (ORAL)	0.1%	NR	Yes			
CONCEPT OB (ORAL)	0.0%	NR	No			
CONCEPT DHA (ORAL)	0.0%	NR	No			
PRENATAL VIT 16/IRON CB/FA/DSS (ORAL)	0.0%	NR	No-Gen			
O-CAL FA (ORAL)	0.0%	NR	No			
PRENATAL VIT 15/IRON CB/FA/DSS (ORAL)	0.0%	NR	No-Gen			
O-CAL PRENATAL (ORAL)	0.0%	NR	No			
PNV115/IRON FUMARATE/FA/DSS (ORAL)	0.0%	NR	No-Gen			
CITRANATAL HARMONY (ORAL)	0.1%	NR	No			
PUREFE PLUS (ORAL)	0.0%	NR	No			
PUREFE OB PLUS (ORAL)	0.0%	NR	No			
VITAFOL TAB CHEW (ORAL)	0.2%	NR	No			
VITAFOL-OB (ORAL)	0.0%	NR	No			
TRICARE (ORAL)	0.0%	NR	No			
PNV-VP-U (ORAL)	0.0%	NR	No			
PNV WITH CA,NO.74/IRON/FA (ORAL)	0.0%	NR	No-Gen			
PNV#21/IRON PS& HEME POLYP/FA (ORAL)	0.0%	NR	No-Gen			
VITAFOL NANO (ORAL)	0.0%	NR	No			
PROVIDA OB (ORAL)	0.0%	NR	No			
PNV/FA/B6/CALCIUM PHOS/GINGER (ORAL)	0.0%	NR	No-Gen			
VITAFOL-ONE (ORAL)	0.0%	NR	No			
NESTABS (ORAL)	0.0%	NR	No			
TRICARE PRENATAL TAB CHEW (ORAL)	0.0%	NR	No			
SELECT-OB TAB CHEW (ORAL)	0.0%	NR	No			
PNV66/IRON FUMARATE/FA/DSS/DHA (ORAL)	0.0%	NR	No-Gen			
PNV69/IRON,CARBONYL/FA/DSS/DHA (ORAL)	0.1%	NR	No-Gen			
VITAFOL ULTRA (ORAL)	0.0%	NR	No			
PRENATE STAR (ORAL)	0.0%	NR	No			
PROVIDA DHA (ORAL)	0.0%	NR	No			
VP-CH PLUS (ORAL)	0.0%	NR	No			
VP-CH-PNV (ORAL)	0.0%	NR	No-Gen			
EXTRA-VIRT PLUS DHA (ORAL)	0.0%	NR	No-Gen			
VP-PNV-DHA (ORAL)	0.4%	NR	No			
VINATE DHA RF (ORAL)	0.0%	NR	No			
PRENATE CHEWABLE TABLET (ORAL)	0.6%	NR	No			
PNV WITH CA,NO.70/IRON/FA/DHA (ORAL)	0.0%	NR	No			
TRISTART DHA (ORAL)	0.0%	NR	No			
PNV W-CA NO.40/IRON FUM/FA CMB NO.1 (ORAL)	0.1%	NR	No-Gen			
OB COMPLETE ONE (ORAL)	0.0%	NR	No			

PRENATE AM (ORAL)	0.1%	NR	No		
PREFERA OB (ORAL)	0.0%	NR	No		
PNV 11-IRON FUM-FOLIC ACID-OM3 (ORAL)	0.0%	NR	No-Gen		
OB COMPLETE WITH DHA (ORAL)	0.0%	NR	No		
OB COMPLETE PREMIER (ORAL)	0.0%	NR	No		
NESTABS ONE (ORAL)	0.0%	NR	No		
PNV80/IRON FUMARATE/FA/DSS/DHA (ORAL)	0.8%	NR	No-Gen		
TRICARE DHA (ORAL)	0.0%	NR	No		
CITRANATAL RX (ORAL)	0.0%	NR	No		
PRENATE PIXIE (ORAL)	0.4%	NR	No		
PRENATE ENHANCE (ORAL)	0.0%	NR	No		
PRENATE DHA (ORAL)	0.7%	NR	No		
PRENATE ELITE (ORAL)	0.0%	NR	No		
ENBRACE HR (ORAL)	0.5%	NR	No		
PRENATE MINI (ORAL)	1.2%	NR	No		
PRENATE RESTORE (ORAL)	0.1%	NR	No		
OB COMPLETE PETITE (ORAL)	0.0%	NR	No		
PRENATE ESSENTIAL (ORAL)	0.1%	NR	No		
PRIMACARE (ORAL)	4.3%	NR	No		
PNV53/IRON B-G HCL-P/FA/OMEGA3 (ORAL)	0.0%	NR	No-Gen		
PNV2/IRON B-G SUC-P/FA/OMEGA-3 (ORAL)	0.0%	NR	No-Gen		
PNV WITH CA,NO.72/IRON,CARB/FA (ORAL)	0.0%	NR	No-Gen		
MYNATAL-Z (ORAL)	0.0%	NR	No-Gen		
PNV NO.115/IRON FUMARATE/FA TAB CHEW (ORAL)	0.0%	NR	No-Gen		
MYNATAL PLUS (ORAL)	0.0%	NR	No-Gen		
MYNATE 90 PLUS (ORAL)	0.0%	NR	No-Gen		
MYNATAL (ORAL)	0.0%	NR	No-Gen		
OBSTETRIX EC (ORAL)	0.0%	NR	No		
ATABEX EC (ORAL)	0.0%	NR	No		
OBSTETRIX DHA (ORAL)	0.0%	NR	No		
PR NATAL 430 (ORAL)	0.0%	NR	No-Gen		
CADEAU DHA (ORAL)	0.0%	NR	No		
CITRANATAL ASSURE (ORAL)	0.0%	NR	No		
CITRANATAL 90 DHA (ORAL)	0.0%	NR	No		
CITRANATAL DHA (ORAL)	0.0%	NR	No		
PR NATAL 430 EC (ORAL)	0.0%	NR	No-Gen		
PR NATAL 400 EC (ORAL)	0.0%	NR	No-Gen		
SELECT-OB + DHA (ORAL)	0.0%	NR	No		
VITAFOL-OB+DHA (ORAL)	0.0%	NR	No		
CITRANATAL B-CALM (ORAL)	0.0%	NR	No		
MARNATAL-F (ORAL)	0.0%	NR	No		
VITAFOL FE+ (ORAL)	0.0%	NR	No		
PRENATAL VIT 86/IRON BISGLY/FA (ORAL)	0.0%	NR	No		
PRENATAL72/IRON FUM/FA/OM3/DHA COMBO. PKG (ORAL)	0.0%	NR	No-Gen		
PNV22/IRON CBN&GLUC/FA/DSS/DHA (ORAL)	0.0%	NR	No-Gen		
PNV NO.80/IRON/MFOLATE/DSS/DHA (ORAL)	0.0%	NR	No		
PNV 87/IRON BISGLY/FA/DHA (ORAL)	0.0%	NR	No		
NESTABS DHA (ORAL)	0.0%	NR	No		
OBTREX DHA (ORAL)	0.0%	NR	No		
TARON-PREX PRENATAL (ORAL)	0.0%	NR	No-Gen		
PREFERA-OB PLUS DHA (ORAL)	0.0%	NR	No		
BAL-CARE DHA ESSENTIAL (ORAL)	0.0%	NR	No		
PNV81/SOD IRON EDTA& PS/FA/OM3 (ORAL)	0.0%	NR	No-Gen		
PRENATAL VIT 105/IRON/FA/DHA (ORAL)	0.0%	NR	No		
ICAR-C PLUS (ORAL)	0.0%	NR	No		
PNV COMBO #22/IRON/FA/OM3/DHA (ORAL)	0.0%	NR	No-Gen		
PNV WITH CA NO.68/IRON/FA NO.1/DHA (ORAL)	0.0%	NR	No-Gen		
OB COMPLETE TABLET (ORAL)	0.0%	NR	No		
LEVOMEFOLATE DHA (ORAL)	0.0%	NR	No-Gen		
PNV #19/IRON PS&HEME/FOLIC/DHA (ORAL)	0.0%	NR	No-Gen		
NESTABS ABC (ORAL)	0.0%	NR	No		
DUET DHA BALANCED (ORAL)	0.0%	NR	No		
PRENA1 CHEW (ORAL)	0.0%	NR	No		
PNV W-CA NO.37/IRON/FA/OMEGA-3 (ORAL)	2.2%	NR	No-Gen		
PNV73/IRON,CARB&GLU/FA/DSS/DHA (ORAL)	0.0%	NR	No-Gen		
PNV#71/IRON/FOLIC ACID/DHA (ORAL)	0.0%	NR	No		
FOCALGIN 90 DHA (ORAL)	0.0%	NR	No-Gen		
FOLET ONE (ORAL)	0.0%	NR	No		
R-NATAL OB (ORAL)	0.0%	NR	No		
VITATRUE (ORAL)	0.0%	NR	No		
VITAMEDMD ONE RX (ORAL)	0.0%	NR	No		
VITAMEDMD REDICHEW RX (ORAL)	0.0%	NR	No		
VITAPEARL (ORAL)	0.0%	NR	No		
PREFERA-OB ONE (ORAL)	0.0%	NR	No		
NATACHEW TAB CHEW (ORAL)	0.0%	NR	No		
NEXA PLUS (ORAL)	0.0%	NR	No		
NEEVODHA (ORAL)	0.0%	NR	No		
KOSHER PRENATAL PLUS IRON (ORAL)	0.0%	NR	No		
OB COMPLETE GOLD (ORAL)	0.0%	NR	No		
DUET DHA (ORAL)	0.0%	NR	No		

- Discussion: Pam Appleby stated that the State captured more than 85% of current utilization when choosing the preferred agents for this class. In addition, the Department’s Division of Public Health was consulted regarding the proposed preferred and non-preferred recommendations.
- Pat Towers made a motion to accept staff recommendations as presented.
 - Second – William Raduege
 - All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid						
ULCERATIVE COLITIS AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
DELZICOL (ORAL)	0.6%	OFF	No			
APRISO (ORAL)	16.1%	ON	Yes			
LIALDA (ORAL)	41.3%	ON	Yes			
SULFASALAZINE (ORAL)	18.3%	ON	Yes-Gen			
DIPENTUM (ORAL)	0.2%	OFF	No			
SULFASALAZINE DR (ORAL)	5.0%	ON	Yes-Gen			
PENTASA (ORAL)	2.8%	OFF	No			
BALSALAZIDE (ORAL)	6.6%	ON	Yes-Gen			
MESALAMINE (LIALDA) (ORAL)	0.3%	NR	No-Gen			
GIAZO (ORAL)	0.0%	OFF	No			
ASACOL HD (ORAL)	0.8%	OFF	No			
MESALAMINE (ASACOL HD) (AG) (ORAL)	0.8%	OFF	No-Gen			
UCERIS (ORAL)	1.1%	OFF	No			
CANASA (RECTAL)	4.2%	ON	Yes			
ROWASA (RECTAL)	1.7%	ON	Yes			
MESALAMINE (RECTAL)	0.1%	OFF	No-Gen			
UCERIS (RECTAL)	0.1%	OFF	No			
MESALAMINE KIT (RECTAL)	0.0%	OFF	No-Gen			

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