

**MEDICAID PHARMACY PRIOR AUTHORIZATION ADVISORY COMMITTEE**  
**Recommendations Summary**  
**November 8, 2017**

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**In Attendance:**

	Committee Member	Yes or No
1	Rosanne Barber	Yes
2	Ward Brown, M.D.	Yes
3	Catherine Decker, PharmD	Yes
4	Ronald Diamond, M.D.	No
5	John J. W. Fangman, M.D.	Yes
6	Kevin Izard, M.D.	Yes – arrived @9:26 am
7	Steve Maike, RPh	Yes
8	William E. Raduege, M.D.	Yes
9	Robert Rohloff, MD	Yes – arrived @9:20 am
10	Pat Towers	Yes
11	Alicia Walker, PharmD	Yes – arrived @9:44 am
12	Michael Witkovsky, M.D.	Yes – arrived @9:25 am

## NOVEMBER 2017 THERAPEUTIC DRUG CLASSES

ALZHEIMER'S AGENTS  
ANTICONVULSANTS  
ANTIDEPRESSANTS, OTHER  
ANTIDEPRESSANTS, SSRIs  
ANTIHISTAMINES, MINIMALLY SEDATING  
ANTIHYPERTENSIVES, SYMPATHOLYTIC  
ANTIHYPERTENSIVES, ORAL  
ANTIPARKINSON'S AGENTS  
ANTIPSORIATICS, ORAL  
ANTIPSORIATICS, TOPICAL  
ANTIPSYCHOTICS  
ANXIOLYTICS  
BILE SALTS  
BRONCHODILATORS, BETA AGONIST  
COPD AGENTS  
COUGH AND COLD/NARCOTICS  
CYTOKINE AND CAM ANTAGONISTS  
EPINEPHRINE, SELF-INJECTED  
ERYTHROPOIESIS STIMULATING PROTEINS  
GLUCOCORTICOIDS, INHALED  
GLUCOCORTICOIDS, ORAL  
HEPATITIS C AGENTS  
HISTAMINE II RECEPTOR BLOCKERS  
IMMUNOMODULATORS FOR ATOPIC DERMATITIS  
IMMUNOMODULATORS, TOPICAL  
INTRANASAL RHINITIS AGENTS  
LEUKOTRIENE MODIFIERS  
METHOTREXATE  
NEUROPATHIC PAIN (ANALGESICS/ANESTHETICS TOPICAL AND FIBROMYALGIA)  
NSAIDS  
OPHTHALMIC ANTIBIOTIC/STEROID COMBINATIONS  
OPHTHALMIC ANTIBIOTICS  
OPHTHALMIC ANTIINFLAMMATORIES  
OPHTHALMICS, ANTI-INFLAMMATORY/IMMUNOMODULATOR – *New Class*  
OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS  
OPHTHALMICS, GLAUCOMA AGENTS  
OTIC ANTIBIOTICS  
OTIC ANTI-INFECTIVES  
SEDATIVE HYPNOTICS  
STERIODS, TOPICAL-HIGH POTENCY  
STERIODS, TOPICAL-LOW POTENCY  
STERIODS, TOPICAL-MEDIUM POTENCY  
STERIODS, TOPICAL-VERY HIGH POTENCY  
STIMULANTS AND RELATED AGENTS

## **Recommendations Summary:**

The following drug classes presented for review had no recommended status changes since the November 2, 2016 Wisconsin Medicaid Pharmacy Prior Authorization Advisory Committee (PAC) meeting and were approved by the PAC in a block vote.

Drug classes included in the Committee block vote:

- ANTICONVULSANTS
  - ANTIDEPRESSANTS, SSRIs
  - ANTIHYPERTENSIVES, SYMPATHOLYTICS
  - ANTIPSORIATICS, TOPICAL
  - ANXIOLYTICS
  - BILE SALTS
  - BRONCHODILATORS, BETA AGONIST
  - COUGH AND COLD/NARCOTICS
  - ERYTHROPOIESIS STIMULATING PROTEINS
  - HISTAMINE II RECEPTOR BLOCKER
  - IMMUNOMODULATORS, TOPICAL
  - METHOTREXATE
  - NEUROPATHIC PAIN
  - OPHTHALMIC ANTIBIOTIC-STEROID COMBINATIONS
  - OPHTHALMICS, GLAUCOMA AGENTS
  - OTIC ANTI-INFECTIVES & ANESTHETICS
  - STEROIDS, TOPICAL HIGH
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- Discussion: Kevin Izard noted the Committee had discussed the use of codeine and tramadol with children and the Department continues to monitor and work with prescribers on the appropriate and effective use of these medications.
  - Kevin Izard made a motion to accept staff recommendations as presented.
    - Second – Roseanne Barber
    - All members were in favor of the motion
    - Motion passes

Wisconsin Medicaid						
ALZHEIMER'S AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
DONEPEZIL TABLET (ORAL)	63.3%	ON	Yes-Gen			
MEMANTINE TABLET (AG) (ORAL)	0.3%	ON	Yes-Gen			
DONEPEZIL ODT (ORAL)	0.4%	ON	Yes-Gen			
MEMANTINE TABLET (ORAL)	26.2%	ON	Yes-Gen			
MEMANTINE TABLET DOSE PACK (AG) (ORAL)	0.1%	ON	Yes-Gen			
GALANTAMINE TABLET (ORAL)	0.5%	OFF	No-Gen			
RIVASTIGMINE CAPSULES (ORAL)	1.9%	ON	Yes-Gen			
GALANTAMINE ER (ORAL)	0.4%	OFF	No-Gen			
DONEPEZIL 23 MG (ORAL)	0.4%	OFF	No-Gen			
GALANTAMINE SOLUTION (ORAL)	0.0%	OFF	No-Gen			
NAMENDA XR (ORAL)	3.1%	OFF	No			
RIVASTIGMINE (AG) (TRANSDERM.)	0.1%	OFF	No-Gen			
NAMZARIC (ORAL)	0.2%	OFF	No			
RIVASTIGMINE (TRANSDERM.)	0.0%	OFF	No-Gen			
NAMZARIC DOSE PACK (ORAL)	0.0%	NR	No			
MEMANTINE SOLUTION (ORAL)	0.0%	ON	Yes-Gen			
EXELON (TRANSDERM.)	2.8%	ON	Yes			

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

Wisconsin Medicaid						
ANTIDEPRESSANTS, OTHER						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
APLENZIN (ORAL)	0.0%	OFF	No			
TRAZODONE (ORAL)	28.7%	ON	Yes-Gen			
VENLAFAXINE ER CAPSULES (ORAL)	21.4%	ON	Yes-Gen			
MIRTAZAPINE TABLET (ORAL)	12.0%	ON	Yes-Gen			
MARPLAN (ORAL)	0.0%	ON	Yes			
BUPROPION SR (ORAL)	8.9%	ON	Yes-Gen			
FORFIVO XL (ORAL)	0.0%	OFF	No			
BUPROPION XL (ORAL)	20.6%	ON	Yes-Gen			
DESVENLAFAXINE ER (PRISTIQ) (AG) (ORAL)	0.0%	ON	Yes-Gen			
VENLAFAXINE (ORAL)	2.1%	ON	Yes-Gen			
MIRTAZAPINE ODT (ORAL)	0.3%	ON	Yes-Gen			
BUPROPION (ORAL)	2.0%	ON	Yes-Gen			
DESVENLAFAXINE ER (PRISTIQ) (ORAL)	0.0%	ON	Yes-Gen			
TRINTELLIX (ORAL)	0.9%	OFF	No			
PHENELZINE (ORAL)	0.0%	ON	Yes-Gen			
VIIBRYD (ORAL)	1.1%	OFF	No			
NEFAZODONE (ORAL)	0.1%	OFF	No-Gen			
FETZIMA (ORAL)	0.3%	OFF	No			
VENLAFAXINE ER TABLETS (AG) (ORAL)	0.1%	OFF	No-Gen			
DESVENLAFAXINE ER (NO BRAND) (ORAL)	0.0%	NR	No-Gen			
DESVENLAFAXINE ER (KHEDEZLA) (AG) (ORAL)	0.0%	OFF	No-Gen			
DESVENLAFAXINE FUMARATE ER (ORAL)	0.0%	OFF	No-Gen			
VIIBRYD DOSE PACK (ORAL)	0.0%	OFF	No			
TRANLYCYPROMINE SULFATE (ORAL)	0.0%	ON	Yes-Gen			
NARDIL (ORAL)	0.0%	ON	Yes			
EMSAM (TRANSDERMAL)	0.0%	OFF	No			
VENLAFAXINE ER TABLETS (ORAL)	0.0%	OFF	No-Gen			
KHEDEZLA (ORAL)	0.0%	OFF	No			

- Discussion: Pam Appleby stated that during the PAC meeting in November 2016, the Department was asked to consider making Emsam, Pristiq and Trintellix preferred medications.

Lynn Radmer stated that as a result of the discussion, Pristiq was added as a preferred medication beginning January 1, 2017. In addition, since the Committee reviewed this class in 2016, generic equivalents for Pristiq have become available and are now preferred medications, moving Pristiq to Brand Medically Necessary.

Lynn Radmer indicated that the Department has reviewed data related to Emsam and Trintellix. Emsam is a relatively new medication and there is no data suggesting it is clinically superior to older monoamine oxidase inhibitors in this class. In addition, the Drug Effectiveness Review Project (DERP) report does not indicate significant clinical differences between Trintellix and other antidepressant medications. Therefore, the Department recommends Emsam and Trintellix remain non-preferred.

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

Wisconsin Medicaid						
ANTHISTAMINES, MINIMALLY SEDATING						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
LORATADINE TABLETS OTC (ORAL)	35.1%	ON	Yes-Gen			
CETIRIZINE TABLETS OTC (ORAL)	41.3%	ON	Yes-Gen			
CETIRIZINE SOLUTION (ORAL)	11.5%	ON	Yes-Gen			
LEVOCETIRIZINE TABLETS (ORAL)	0.3%	OFF	No-Gen			
CETIRIZINE SOLUTION OTC (ORAL)	4.5%	ON	Yes-Gen			
LORATADINE SOLUTION OTC (ORAL)	4.5%	ON	Yes-Gen			
DESLORATADINE (ORAL)	0.1%	OFF	No-Gen			
SEMPREX-D (ORAL)	0.0%	OFF	No			
CETIRIZINE CHEWABLE OTC (ORAL)	0.0%	ON	Yes-Gen			
LORATADINE-D OTC (ORAL)	1.7%	ON	Yes-Gen			
CETIRIZINE-D OTC (ORAL)	0.8%	ON	Yes-Gen			
FEXOFENADINE OTC (ORAL)	0.0%	NR	No-Gen			
CLARINEX TABLET (ORAL)	0.0%	OFF	No			
CLARINEX SYRUP (ORAL)	0.0%	OFF	No			
XYZAL SOLUTION (ORAL)	0.0%	OFF	No			
LEVOCETIRIZINE SOLUTION (ORAL)	0.1%	OFF	No-Gen			
CLARINEX-D 12 HOUR (ORAL)	0.0%	OFF	No			
DESLORATADINE ODT (ORAL)	0.0%	OFF	No-Gen			

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

Wisconsin Medicaid						
ANTHYPERURICEMICS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ALLOPURINOL (ORAL)	80.3%	ON	Yes-Gen			
PROBENECID / COLCHICINE (ORAL)	4.7%	ON	Yes-Gen			
PROBENECID (ORAL)	1.1%	ON	Yes-Gen			
COLCHICINE CAPSULE (AG) (ORAL)	0.3%	OFF	Yes-Gen			
ULORIC (ORAL)	6.8%	OFF	No			
MITIGARE (ORAL)	0.0%	OFF	No			
COLCHICINE TABLET (AG) (ORAL)	6.1%	OFF	No-Gen			
COLCRYS (ORAL)	0.8%	OFF	No			
ZURAMPIC (ORAL)	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						
ANTIPARKINSON'S AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AZILECT (ORAL)	0.1%	OFF	No			
MIRAPEX ER (ORAL)	0.0%	OFF	No			
PRAMIPEXOLE (ORAL)	15.9%	ON	Yes-Gen			
ROPINIROLE (ORAL)	28.5%	ON	Yes-Gen			
TRIHEXYPHENDYL TABLET (ORAL)	4.9%	ON	Yes-Gen			
BENZTROPINE (ORAL)	31.9%	ON	Yes-Gen			
ZELAPAR (ORAL)	0.0%	OFF	No			
AMANTADINE SYRUP (ORAL)	0.2%	ON	Yes-Gen			
CARBIDOPA / LEVODOPA (ORAL)	9.7%	ON	Yes-Gen			
NEUPRO (TRANSDERM)	0.3%	OFF	No			
CARBIDOPA / LEVODOPA ER (ORAL)	2.2%	ON	Yes-Gen			
TRIHEXYPHENDYL ELIXIR (ORAL)	0.2%	ON	Yes-Gen			
SELEGILINE TABLET (ORAL)	0.0%	ON	Yes-Gen			
SELEGILINE CAPSULE (ORAL)	0.1%	ON	Yes-Gen			
AMANTADINE CAPSULE (ORAL)	2.7%	ON	Yes-Gen			
AMANTADINE TABLET (ORAL)	1.4%	ON	Yes-Gen			
ENTACAPONE (ORAL)	0.2%	OFF	No-Gen			
ROPINIROLE ER (ORAL)	0.1%	OFF	No-Gen			
CARBIDOPA / LEVODOPA ODT (ORAL)	0.1%	ON	Yes-Gen			
STALEVO (ORAL)	0.0%	OFF	No			
BROMOCRIPTINE (ORAL)	0.8%	ON	Yes-Gen			
CARBIDOPA/LEVODOPA/ENTACAPONE (ORAL)	0.2%	ON	Yes-Gen			
REQUIP XL (ORAL)	0.0%	OFF	No			
PRAMIPEXOLE ER (ORAL)	0.0%	OFF	No-Gen			
RASAGILINE (ORAL)	0.2%	NR	No-Gen			
RYTARY (ORAL)	0.1%	OFF	No			
XADAGO (ORAL)	0.0%	NR	No			
CARBIDOPA (ORAL)	0.0%	ON	Yes-Gen			
TOLCAPONE (ORAL)	0.0%	OFF	No-Gen			
TASMAR (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						
ANTIPSORIATICS, ORAL						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ACITRETIN (AG) (ORAL)	2.9%	ON	Yes-Gen			
OXSORALEN-ULTRA (ORAL)	1.5%	ON	No			
ACITRETIN (ORAL)	47.1%	ON	Yes-Gen			
METHOXSALEN RAPID (ORAL)	0.0%	NR	No-Gen			

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

Wisconsin Medicaid						
ANTIPSYCHOTICS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
QUETIAPINE ER (AG) (ORAL)	0.0%	ON	Yes-Gen			
RISPERIDONE TABLET (ORAL)	17.4%	ON	Yes-Gen			
QUETIAPINE TABLETS (ORAL)	28.5%	ON	Yes-Gen			
OLANZAPINE TABLET (ORAL)	7.8%	ON	Yes-Gen			
RISPERIDONE SOLUTION (ORAL)	0.5%	ON	Yes-Gen			
FAZACLO (ORAL)	0.0%	OFF	No			
ARIPRAZOLE TABLET (ORAL)	16.1%	ON	Yes-Gen			
OLANZAPINE ODT (ORAL)	0.4%	ON	Yes-Gen			
ZIPRASIDONE CAPSULE (ORAL)	5.3%	ON	Yes-Gen			
CLOZAPINE (ORAL)	2.5%	ON	Yes-Gen			
RISPERIDONE ODT (ORAL)	0.5%	ON	Yes-Gen			
QUETIAPINE ER (ORAL)	0.0%	ON	Yes-Gen			
LATUDA (ORAL)	6.1%	ON	Yes			
SAPHRIS (SUBLINGUAL)	0.5%	OFF	No			
FANAPT TABLET (ORAL)	0.1%	OFF	No			
CLOZAPINE ODT (AG) (ORAL)	0.1%	OFF	No-Gen			
PALIPERIDONE (AG) (ORAL)	0.0%	OFF	No-Gen			
CLOZARIL (ORAL)	0.0%	ON	Yes			
PALIPERIDONE (ORAL)	0.0%	OFF	No-Gen			
INVEGA (ORAL)	1.2%	OFF	No			
CLOZAPINE ODT (ORAL)	0.0%	OFF	No-Gen			
REXULTI (ORAL)	0.7%	OFF	No			
VERSACLOZ (ORAL)	0.0%	OFF	No			
VRAYLAR (ORAL)	0.6%	OFF	No			
ARIPRAZOLE ODT (ORAL)	0.0%	ON	Yes-Gen			
ARIPRAZOLE SOLUTION (ORAL)	0.1%	ON	Yes-Gen			
NUPLAZID (ORAL)	0.0%	OFF	No			
SYMBYAX (ORAL)	0.0%	OFF	No			
OLANZAPINE/FLUOXETINE (ORAL)	0.0%	OFF	No-Gen			
HALOPERIDOL DECANOATE (INJECTION)	1.0%	ON	Yes-Gen			
FLUPHENAZINE DECANOATE (INJECTION)	0.3%	ON	Yes-Gen			
HALDOL DECANOATE (INTRAMUSC)	0.0%	ON	Yes			
RISPERDAL CONSTA (INTRAMUSC.)	1.0%	ON	Yes			
ZYPREXA RELPREVV (INTRAMUSC)	0.0%	ON	Yes			
INVEGA SUSTENNA (INTRAMUSC)	1.6%	ON	Yes			
ARISTADA (INTRAMUSC)	0.2%	OFF	Yes			
ABILIFY MAINTENA (INTRAMUSC.)	0.7%	ON	Yes			
INVEGA TRINZA (INTRAMUSC)	0.1%	ON	Yes			
HALOPERIDOL LACTATE CONC (ORAL)	0.0%	ON	Yes-Gen			
HALOPERIDOL (ORAL)	2.8%	ON	Yes-Gen			
LOXAPINE (ORAL)	0.3%	ON	Yes-Gen			
TRIFLUOPERAZINE (ORAL)	0.2%	ON	Yes-Gen			
THIORIDAZINE (ORAL)	0.1%	OFF	No-Gen			
PERPHENAZINE (ORAL)	0.3%	ON	Yes-Gen			
ORAP (ORAL)	0.1%	ON	Yes			
MOLINDONE (ORAL)	0.0%	OFF	No-Gen			
AMITRIPTYLINE / PERPHENAZINE (ORAL)	0.0%	ON	Yes-Gen			
THIOTHIXENE (ORAL)	0.2%	ON	Yes-Gen			
FLUPHENAZINE TABLET (ORAL)	0.7%	ON	Yes-Gen			
PIMOZIDE (ORAL)	0.0%	OFF	No-Gen			
ADASUVE (INHALATION)	0.0%	OFF	No			
FLUPHENAZINE ELIXIR/SOLN (ORAL)	0.0%	ON	Yes-Gen			
CHLORPROMAZINE (ORAL)	0.6%	ON	Yes-Gen			

- Discussion: Pam Appleby stated that during the PAC meeting in November 2016, the Department was asked to consider making all injectable antipsychotics and oral Invega preferred medications.

Lynn Radmer indicated the Department evaluated this suggestion and noted that risperidone is a preferred medication. In addition, both risperidone and oral Invega can be used to establish treatment prior to the use of Invega Trinza.

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

Wisconsin Medicaid						
COPD AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
SPIRIVA (INHALATION)	47.9%	ON	Yes			
IPRATROPIUM NEBULIZER (INHALATION)	1.8%	ON	Yes-Gen			
BEVESPIAEROSPHERE (INHALATION)	0.0%	OFF	Yes			
IPRATROPIUM / ALBUTEROL (INHALATION)	18.6%	ON	Yes-Gen			
ATROVENT HFA (INHALATION)	3.6%	ON	Yes			
TUDORZA PRESSAIR (INHALATION)	0.5%	OFF	No			
INCRUSE ELLIPTA (INHALATION)	0.5%	OFF	No			
UTIBRON NEOHALER (INHALATION)	0.0%	OFF	No			
SEEBRI NEOHALER (INHALATION)	0.0%	OFF	No			
STIOLTO RESPIMAT (INHALATION)	0.6%	OFF	No			
ANORO ELLIPTA (INHALATION)	1.2%	OFF	No			
SPIRIVA RESPIMAT (INHALATION)	1.3%	OFF	No			
COMBIVENT RESPIMAT (INHALATION)	21.8%	ON	Yes			
DALIRESP (ORAL)	2.2%	OFF	No			

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

Wisconsin Medicaid						
CYTOKINE AND CAM ANTAGONISTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
OTEZLA (ORAL)	4.3%	ON	Yes			
ENBREL KIT (INJECTION)	0.7%	ON	Yes			
XELJANZ (ORAL)	0.9%	OFF	No			
ENBREL SYRINGE (INJECTION)	4.0%	ON	Yes			
ENBREL PEN (INJECTION)	17.6%	ON	Yes			
XELJANZ XR (ORAL)	0.8%	OFF	No			
HUMIRA PEN KIT (INJECTION)	53.9%	ON	Yes			
HUMIRA KIT (INJECTION)	6.4%	ON	Yes			
CIMZIA SYRINGE KIT (INJECTION)	3.2%	OFF	No			
KINERET (INJECTION)	0.4%	OFF	No			
COSENTYX PEN INJECTER (SUBCUTANE.)	1.7%	OFF	No			
COSENTYX SYRINGE (SUBCUTANE.)	0.2%	OFF	No			
SIMPONI PEN INJECTER (INJECTION)	0.5%	OFF	No			
ORENCIA SYRINGE (SUBCUTANE.)	1.9%	OFF	No			
ORENCIA CLICKJECT (SUBCUTANE.)	0.6%	OFF	No			
ACTEMRA SYRINGE (SUBCUTANE.)	0.8%	OFF	No			
SIMPONI SYRINGE (INJECTION)	0.2%	OFF	No			
CIMZIA KIT (INJECTION)	0.1%	OFF	No			
KEVZARA (SUBCUTANE.)	0.0%	NR	No			
SILIQ (SUBCUTANE.)	0.0%	NR	No			
STELARA SYRINGE (INJECTION)	1.5%	OFF	No			
TALTZ AUTOINJECTOR (SUBCUTANE.)	0.3%	OFF	No			
TREMFYA (SUBCUTANE.)	0.0%	NR	No			
TALTZ SYRINGE (SUBCUTANE.)	0.1%	OFF	No			

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

Wisconsin Medicaid						
EPINEPHRINE, SELF-INJECTED						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
EPINEPHRINE 0.15 MG (EPIPEN JR) (AG) (INJECTION)	14.8%	ON	Yes-Gen			
EPINEPHRINE 0.3 MG (EPIPEN) (AG) (INJECTION)	60.0%	ON	Yes-Gen			
EPINEPHRINE 0.3 MG (ADRENALICK) (AG) (INJECTION)	21.8%	ON	No-Gen			
EPINEPHRINE 0.15 MG (ADRENALICK) (AG) (INJECTION)	3.5%	ON	No-Gen			

- Discussion: Catherine Decker inquired if dual packs are included in this class; Rick Pope stated that this class does include dual packs.
- 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						
GLUCOCORTICIDS, INHALED						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ADVAIR DISKUS (INHALATION)	33.5%	ON	Yes			
SYMBICORT (INHALATION)	23.2%	ON	Yes			
DULERA (INHALATION)	6.2%	ON	Yes			
ADVAIR HFA (INHALATION)	0.6%	OFF	No			
FLUTICASONE/SALMETEROL (AIRDUO) (AG) (INHALATION)	0.0%	NR	No-Gen			
BREO ELLIPTA (INHALATION)	0.8%	OFF	No			
AIRDUO RESPICLICK (INHALATION)	0.0%	NR	No			
ASMANEX (INHALATION)	2.2%	ON	Yes			
FLOVENT HFA (INHALATION)	1.3%	OFF	Yes			
PULMICORT FLEXHALER (INHALATION)	2.4%	ON	Yes			
QVAR (INHALATION)	25.3%	ON	Yes			
ALVESCO (INHALATION)	0.0%	OFF	No			
FLOVENT DISKUS (INHALATION)	0.1%	OFF	No			
ARNUIVY ELLIPTA (INHALATION)	0.0%	OFF	No			
ASMANEX HFA (INHALATION)	0.0%	OFF	No			
AEROSPAN (INHALATION)	0.0%	OFF	No			
PULMICORT 0.25, 0.5 MG RESPULES (INHALATION)	3.8%	ON	Yes			
ARMONAIR RESPICLICK (INHALATION)	0.0%	NR	No			
BUDESONIDE 0.25, 0.5 MG RESPULES (INHALATION)	0.2%	OFF	No-Gen			
PULMICORT 1 MG RESPULES (INHALATION)	0.4%	ON	Yes			
BUDESONIDE 1 MG RESPULES (INHALATION)	0.0%	OFF	No-Gen			

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

Wisconsin Medicaid						
GLUCOCORTICIDS, ORAL						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
RAYOS TABLET DR (ORAL)	0.0%	OFF	No			
ORAPRED ODT (ORAL)	0.1%	ON	Yes			
PREDNISOLONE SOLUTION (ORAL)	4.1%	ON	Yes-Gen			
PREDNISONE TABLET (ORAL)	68.4%	ON	Yes-Gen			
DEXAMETHASONE TABLET (ORAL)	4.8%	ON	Yes-Gen			
PREDNISOLONE SODIUM PHOSPHATE (ORAL)	6.5%	ON	Yes-Gen			
DEXAMETHASONE SOLUTION (ORAL)	0.1%	ON	Yes-Gen			
METHYLPREDNISOLONE TAB DS PK (ORAL)	11.3%	ON	Yes-Gen			
DEXAMETHASONE ELIXIR (ORAL)	0.1%	ON	Yes-Gen			
MEDROL TABLET (ORAL)	0.0%	OFF	No			
DEXAMETHASONE INTENSOL (ORAL)	0.2%	ON	Yes			
HYDROCORTISONE (ORAL)	2.4%	ON	Yes-Gen			
PREDNISONE TAB DS PK (ORAL)	0.0%	ON	Yes-Gen			
PEDIAPRED (ORAL)	0.0%	OFF	No			
METHYLPREDNISOLONE TABLET (ORAL)	0.3%	ON	Yes-Gen			
METHYLPREDNISOLONE 32 MG TABLET (ORAL)	0.1%	ON	Yes-Gen			
PREDNISONE SOLUTION (ORAL)	0.2%	ON	Yes-Gen			
METHYLPREDNISOLONE 8 MG TABLET (ORAL)	0.1%	ON	Yes-Gen			
METHYLPREDNISOLONE 16 MG TABLET (ORAL)	0.0%	ON	Yes-Gen			
DEXPAK (ORAL)	0.0%	OFF	No			
CORTISONE (ORAL)	0.0%	OFF	No-Gen			
PREDNISONE INTENSOL (ORAL)	0.0%	ON	Yes			
PREDNISOLONE SODIUM PHOSPHATE SOLUTION (VERIPRED) (ORAL)	0.0%	NR	No-Gen			
PREDNISOLONE SODIUM PHOSPHATE SOLUTION (MILLIPRED) (ORAL)	0.0%	NR	No-Gen			
CORTEF (ORAL)	0.0%	OFF	No			
PREDNISOLONE SODIUM PHOSPHATE ODT (AG) (ORAL)	0.0%	OFF	No-Gen			
MILLIPRED SOLUTION (ORAL)	0.0%	OFF	No			
VERIPRED 20 (ORAL)	0.0%	OFF	No			
PREDNISOLONE SODIUM PHOSPHATE ODT (ORAL)	0.0%	OFF	No-Gen			
MILLIPRED TABLET (ORAL)	0.0%	OFF	No-Gen			
BUDESONIDE EC (ORAL)	1.1%	ON	Yes-Gen			
MILLIPRED DP TAB DS PK (ORAL)	0.0%	OFF	No			
EMFLAZA TABLET (ORAL)	0.0%	NR	No			
EMFLAZA SUSPENSION (ORAL)	0.0%	NR	No			

- Discussion: Pam Appleby indicated that during the closed session, the Committee had discussed possible side effects of prednisone compared to Emflaza.

Catherine Decker pointed out the weight gain has been found to be greater for prednisone during the first twelve months, but after that, weight gain is comparable between the two medications.

Pam Appleby clarified that Exondys 51, which was referenced in the morning testimony, is not on the Preferred Drug List.

John Fangman stated that the Committee appreciates the morning testimony advocating for Emflaza. Fangman suggested that prescribers may benefit from further education on orphan drugs and the prior authorization process related to these medications.

- William Raduege made a motion to accept staff recommendations as presented.
  - Second – Pat Towers
  - All members were in favor of the motion
  - Motion Passes

Wisconsin Medicaid						
Hepatitis C Agents						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
HARVONI (ORAL) (8 WEEKS)	10.3%	OFF	Yes			
MAVYRET (ORAL) (8 WEEKS)	0.0%	NR	Yes			
ZEPATIER (ORAL)	37.4%	ON	Yes			
EPCLUSA (ORAL)	21.5%	ON	Yes			
HARVONI (ORAL) (12 WEEKS)	10.3%	OFF	Yes			
MAVYRET (ORAL) (12 WEEKS)	0.0%	NR	Yes			
TECHNIVIE (ORAL)	0.2%	ON	No			
VIEKIRA PAK (ORAL)	2.2%	ON	Yes			
VIEKIRA XR (ORAL)	18.1%	ON	Yes			
DAKLINZA (ORAL)	0.0%	OFF	No			
SOVALDI (ORAL) (12 WEEKS)	0.0%	OFF	No			
VOSEVI (ORAL)	0.0%	NR	No			
OLYSIO (ORAL)	0.0%	OFF	No			

- Discussion: Pat Towers inquired about the term drug failure in this class; Rick Pope clarified that drug failure in this class indicates the medication did not work or the patient's behavior led to treatment failure.

John Fangman commended the State for increasing access to medications in this class and its work with prescribers in this effort.

- Pat Towers made a motion to accept staff recommendations as presented.
  - Second – John Fangman
  - All members were in favor of the motion
  - Motion Passes

Wisconsin Medicaid						
IMMUNOMODULATORS, ATOPIC DERMATITIS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ELIDEL (TOPICAL)	92.2%	ON	Yes			
PROTOPIC (TOPICAL)	0.1%	OFF	Yes			
TACROLIMUS (AG) (TOPICAL)	4.8%	OFF	No-Gen			
TACROLIMUS (TOPICAL)	1.2%	OFF	No-Gen			
EUCRISA (TOPICAL)	0.0%	OFF	No			
DUPIXENT (SUBCUTANE.)	1.7%	NR	No			

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

Wisconsin Medicaid						
INTRANASAL RHINITIS AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AZELASTINE (ASTELIN) (NASAL)	0.3%	OFF	Yes-Gen			
PATANASE (NASAL)	2.2%	ON	Yes			
AZELASTINE (ASTEPRO) (AG) (NASAL)	0.0%	OFF	No-Gen			
AZELASTINE (ASTEPRO) (NASAL)	0.1%	OFF	No-Gen			
OLOPATADINE (AG) (NASAL)	0.0%	OFF	No-Gen			
OLOPATADINE (NASAL)	0.0%	OFF	No-Gen			
ASTEPRO (NASAL)	0.0%	OFF	No			
IPRATROPIUM (NASAL)	2.2%	ON	Yes-Gen			
NASONEX (NASAL)	0.6%	OFF	No			
VERAMYST (NASAL)	0.0%	OFF	No			
ZETONNA (NASAL)	0.0%	OFF	No			
OMNARIS (NASAL)	0.0%	OFF	No			
FLUTICASONE (NASAL)	92.1%	ON	Yes-Gen			
DYMISTA (NASAL)	0.2%	OFF	No			
BECONASE AQ (NASAL)	1.0%	ON	Yes			
QNASL 80 (NASAL)	0.2%	OFF	No			
QNASL 40 (NASAL)	0.0%	OFF	No			
FLUNISOLIDE (NASAL)	0.0%	OFF	No-Gen			
MOMETASONE (AG) (NASAL)	0.1%	OFF	No-Gen			
MOMETASONE (NASAL)	0.8%	OFF	No-Gen			
BUDESONIDE (NASAL)	0.0%	OFF	No-Gen			

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

Wisconsin Medicaid						
LEUKOTRIENE MODIFIERS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ZYFLO CR (ORAL)	0.0%	OFF	No			
MONTELUKAST TABLET (ORAL)	65.4%	ON	Yes-Gen			
MONTELUKAST CHEWABLE TABLET (ORAL)	34.4%	ON	Yes-Gen			
ZAFIRLUKAST (ORAL)	0.1%	OFF	No-Gen			
ZYFLO (ORAL)	0.0%	OFF	No			
MONTELUKAST GRANULES (ORAL)	0.1%	OFF	No-Gen			
ZILEUTON ER (ORAL)	0.0%	NR	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						
NSAIDS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
PENNSAID PUMP (TOPICAL)	0.0%	OFF	No			
DUEXIS (ORAL)	0.0%	OFF	No			
VIMOVO (ORAL)	0.0%	OFF	No			
NAPRELAN (ORAL)	0.0%	OFF	No			
VOLTAREN (TOPICAL)	7.9%	ON	Yes			
IBUPROFEN TABLET OTC (ORAL)	1.5%	ON	Yes-Gen			
MELOXICAM TABLET (ORAL)	15.4%	ON	Yes-Gen			
FLECTOR (TOPICAL)	0.0%	OFF	No			
IBUPROFEN TABLET (ORAL)	32.1%	ON	Yes-Gen			
NAPROXEN TABLET (ORAL)	15.2%	ON	Yes-Gen			
NAPROXEN SODIUM OTC (ORAL)	0.3%	ON	Yes-Gen			
INDOMETHACIN CAPSULE (ORAL)	1.7%	ON	Yes-Gen			
IBUPROFEN SUSPENSION OTC (ORAL)	2.1%	ON	Yes-Gen			
IBUPROFEN CAPSULE OTC (ORAL)	0.0%	ON	Yes-Gen			
IBUPROFEN TAB CHEW OTC (ORAL)	0.0%	ON	Yes-Gen			
DICLOFENAC SODIUM (ORAL)	7.8%	ON	Yes-Gen			
IBUPROFEN SUSPENSION (ORAL)	8.4%	ON	Yes-Gen			
NAPROXEN EC (ORAL)	0.4%	ON	Yes-Gen			
DICLOFENAC SR (ORAL)	0.2%	ON	Yes-Gen			
SULINDAC (ORAL)	0.3%	ON	Yes-Gen			
NABUMETONE (ORAL)	1.6%	ON	Yes-Gen			
IBUPROFEN DROPS SUSPENSION OTC (ORAL)	0.0%	ON	Yes-Gen			
FLURBIPROFEN (ORAL)	0.1%	ON	Yes-Gen			
KETOROLAC (ORAL)	1.8%	ON	Yes-Gen			
CELECOXIB (AG) (ORAL)	0.1%	OFF	Yes-Gen			
CELECOXIB (ORAL)	1.5%	OFF	Yes-Gen			
KETOPROFEN (ORAL)	0.1%	ON	Yes-Gen			
INDOCIN SUSPENSION (ORAL)	0.0%	OFF	No			
DICLOFENAC POTASSIUM (ORAL)	0.9%	ON	Yes-Gen			
INDOMETHACIN CAPSULE ER (ORAL)	0.0%	OFF	No-Gen			
DICLOFENAC GEL (TOPICAL)	0.0%	OFF	No-Gen			
NAPROXEN SODIUM (ORAL)	0.0%	OFF	No-Gen			
ETODOLAC (ORAL)	0.1%	OFF	No-Gen			
PIROXICAM (ORAL)	0.0%	OFF	No-Gen			
DIFLUNISAL (ORAL)	0.0%	OFF	No-Gen			
DICLOFENAC SOLUTION (TOPICAL)	0.0%	OFF	No-Gen			
ZORVOLEX (ORAL)	0.0%	OFF	No			
MELOXICAM SUSPENSION (ORAL)	0.0%	OFF	No-Gen			
ETODOLAC TAB SR (ORAL)	0.0%	OFF	No-Gen			
DICLOFENAC SODIUM/MISOPROSTOL (ORAL)	0.0%	OFF	No-Gen			
ZIPSOR (ORAL)	0.0%	OFF	No			
OXAPROZIN (ORAL)	0.0%	OFF	No-Gen			
MEFENAMIC ACID (ORAL)	0.0%	OFF	No-Gen			
TIVORBEX (ORAL)	0.0%	OFF	No			
NALFON (ORAL)	0.0%	OFF	No			
FENOPROFEN (AG) (ORAL)	0.0%	OFF	No-Gen			
TOLMETIN SODIUM CAPSULE (ORAL)	0.0%	OFF	No-Gen			
MECLOFENAMATE (ORAL)	0.0%	OFF	No-Gen			
NAPROSYN SUSPENSION (ORAL)	0.0%	ON	No			
FENOPROFEN (ORAL)	0.0%	OFF	No-Gen			
NAPROXEN SUSPENSION (ORAL)	0.1%	ON	No-Gen			
TOLMETIN SODIUM TABLET (ORAL)	0.0%	OFF	No-Gen			
KETOPROFEN ER (ORAL)	0.0%	OFF	No-Gen			
NAPROXEN CR (ORAL)	0.0%	OFF	No-Gen			
NAPROXEN CR (AG) (ORAL)	0.0%	OFF	No-Gen			
VIVLODEX (ORAL)	0.0%	OFF	No			
SPRIX (NASAL)	0.0%	OFF	No			
INDOCIN (RECTAL)	0.0%	OFF	No			
ARTHROTEC (ORAL)	0.0%	OFF	No			
PONSTEL (ORAL)	0.0%	OFF	No			

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

Wisconsin Medicaid						
OPHTHALMIC ANTIBIOTICS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AZASITE (OPHTHALMIC)	0.0%	OFF	No			
GENTAMICIN DROPS (OPHTHALMIC)	6.8%	ON	Yes-Gen			
TOBRAMYCIN (OPHTHALMIC)	6.5%	ON	Yes-Gen			
POLYMYXIN/TRIMETHOPRIM (OPHTHALMIC)	31.9%	ON	Yes-Gen			
ERYTHROMYCIN (OPHTHALMIC)	19.5%	ON	Yes-Gen			
TOBREX OINTMENT (OPHTHALMIC)	0.3%	ON	Yes			
BACITRACIN/POLYMYXIN B SULFATE OINT. (OPHTHALMIC)	0.0%	OFF	No-Gen			
CILOXAN OINTMENT (OPHTHALMIC)	0.2%	ON	Yes			
GENTAMICIN OINT. (OPHTHALMIC)	1.1%	ON	Yes-Gen			
NEOMYCIN/BACITRACIN/POLYMYXIN OINT (OPHTHALMIC)	0.0%	OFF	No-Gen			
NEOMYCIN-POLYMYXIN-GRAMICIDIN (OPHTHALMIC)	0.0%	OFF	No-Gen			
SULFACETAMIDE SOLUTION (OPHTHALMIC)	2.5%	ON	Yes-Gen			
SULFACETAMIDE OINTMENT (OPHTHALMIC)	0.0%	ON	Yes-Gen			
BACITRACIN (OPHTHALMIC)	0.0%	OFF	No-Gen			
NATACYN (OPHTHALMIC)	0.0%	OFF	No			
BESIVANCE (OPHTHALMIC)	0.0%	OFF	No			
CIPROFLOXACIN SOLUTION (OPHTHALMIC)	12.6%	ON	Yes-Gen			
MOXEZA (OPHTHALMIC)	0.1%	ON	Yes			
VIGAMOX (OPHTHALMIC)	7.4%	ON	Yes			
OFLOXACIN (OPHTHALMIC)	11.1%	ON	Yes-Gen			
LEVOFLOXACIN (OPHTHALMIC)	0.0%	OFF	No-Gen			
GATIFLOXACIN (OPHTHALMIC)	0.0%	OFF	No-Gen			
MOXIFLOXACIN (VIGAMOX) (OPHTHALMIC)	0.0%	NR	No-Gen			
MOXIFLOXACIN (AG) (VIGAMOX) (OPHTHALMIC)	0.0%	NR	No-Gen			
ZYMAXID (OPHTHALMIC)	0.0%	OFF	No			

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

Wisconsin Medicaid						
OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
OLOPATADINE (PATANOL) (AG) (OPHTHALMIC)	0.0%	OFF	Yes-Gen			
ALREX (OPHTHALMIC)	1.4%	ON	Yes			
BEPREVE (OPHTHALMIC)	0.0%	OFF	No			
LASTACFT (OPHTHALMIC)	0.1%	OFF	No			
PAZEO (OPHTHALMIC)	4.7%	ON	Yes			
KETOTIFEN OTC (OPHTHALMIC)	16.3%	ON	Yes-Gen			
ZADITOR OTC (OPHTHALMIC)	1.6%	ON	Yes-Gen			
AZELASTINE (OPHTHALMIC)	0.1%	OFF	No-Gen			
PATADAY (OPHTHALMIC)	67.9%	ON	No			
OLOPATADINE (PATANOL) (OPHTHALMIC)	0.1%	OFF	Yes-Gen			
OLOPATADINE DROPS (PATADAY) (AG) (OPHTHALMIC)	1.0%	NR	No-Gen			
EPINASTINE (OPHTHALMIC)	0.1%	OFF	No-Gen			
EMADINE (OPHTHALMIC)	0.0%	OFF	No			
OLOPATADINE DROPS (PATADAY) (OPHTHALMIC)	4.5%	NR	No-Gen			
CROMOLYN SODIUM (OPHTHALMIC)	2.2%	ON	Yes-Gen			
ALOMIDE (OPHTHALMIC)	0.0%	OFF	No			
ALOCRIL (OPHTHALMIC)	0.0%	OFF	No			

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

Wisconsin Medicaid						
OPHTHALMICS, ANTI-INFLAMMATORIES						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ACULAR (OPHTHALMIC)	0.0%	NR	No			
ILEVRO (OPHTHALMIC)	1.6%	ON	Yes			
FLURBIPROFEN (OPHTHALMIC)	0.2%	ON	Yes-Gen			
DICLOFENAC (OPHTHALMIC)	0.0%	OFF	No-Gen			
KETOROLAC (OPHTHALMIC)	14.8%	ON	Yes-Gen			
ACUVAIL (OPHTHALMIC)	0.0%	OFF	No			
KETOROLAC LS (OPHTHALMIC)	6.0%	ON	Yes-Gen			
NEVANAC (OPHTHALMIC)	0.0%	OFF	No			
BROMFENAC (OPHTHALMIC)	0.0%	OFF	No-Gen			
PROLENSA (OPHTHALMIC)	0.1%	OFF	No			
BROMSITE (OPHTHALMIC)	0.0%	OFF	No			
ACULAR LS (OPHTHALMIC)	0.0%	OFF	No			
LOTEMAX DROPS (OPHTHALMIC)	4.2%	ON	Yes			
PRED MILD (OPHTHALMIC)	0.4%	ON	Yes			
FML S.O.P. (OPHTHALMIC)	0.4%	ON	Yes			
FLAREX (OPHTHALMIC)	0.2%	ON	Yes			
MAXIDEX (OPHTHALMIC)	0.4%	ON	Yes			
FML FORTE (OPHTHALMIC)	0.5%	ON	Yes			
FLUOROMETHOLONE (OPHTHALMIC)	8.5%	ON	Yes-Gen			
DUREZOL (OPHTHALMIC)	8.8%	ON	Yes			
DEXAMETHASONE (OPHTHALMIC)	1.6%	ON	Yes-Gen			
LOTEMAX OINTMENT (OPHTHALMIC)	0.0%	OFF	No			
PREDNISOLONE ACETATE (OPHTHALMIC)	51.3%	ON	Yes-Gen			
PREDNISOLONE SOD PHOSPHATE (OPHTHALMIC)	0.4%	ON	Yes-Gen			
LOTEMAX GEL (OPHTHALMIC)	0.1%	OFF	No			
OMNIPRED (OPHTHALMIC)	0.0%	OFF	No			
FML (OPHTHALMIC)	0.3%	ON	No			

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

Wisconsin Medicaid						
OPHTHALMICS, ANTI-INFLAMMATORY/IMMUNOMODULATOR						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
RESTASIS (OPHTHALMIC)	88.1%	NR	Yes			
RESTASIS MULTIDOSE (OPHTHALMIC)	0.0%	NR	Yes			
XIIDRA (OPHTHALMIC)	11.9%	NR	No			

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

Wisconsin Medicaid						
OTIC ANTIBIOTICS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
CIPRO HC (OTIC)	27.8%	ON	Yes			
COLY-MYCIN S (OTIC)	0.5%	ON	Yes			
CIPRODEX (OTIC)	13.3%	OFF	No			
OFLOXACIN (OTIC)	10.5%	OFF	Yes-Gen			
OTOVEL (OTIC)	0.0%	OFF	No			
NEOMYCIN/POLYMYXIN/HC SOLN/SUSP (OTIC)	44.9%	ON	Yes-Gen			
CIPROFLOXACIN (OTIC)	3.0%	ON	No-Gen			

- Discussion: Pam Appleby stated that Ciprodex does not require a prior authorization for children six years of age and younger.
- John Fangman made a motion to accept staff recommendations as presented.
  - Second – William Raduege
  - All members were in favor of the motion
  - Motion Passes

Wisconsin Medicaid						
SEDATIVE HYPNOTICS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
SILENOR (ORAL)	0.1%	OFF	No			
ZOLPIDEM (ORAL)	71.5%	ON	Yes-Gen			
TEMAZEPAM (ORAL)	12.7%	ON	Yes-Gen			
ZALEPLON (ORAL)	3.0%	ON	Yes-Gen			
ESTAZOLAM (ORAL)	0.3%	ON	Yes-Gen			
ESZOPICLONE (ORAL)	3.0%	OFF	Yes-Gen			
ROZEREM (ORAL)	3.6%	ON	Yes			
FLURAZEPAM (ORAL)	0.1%	OFF	No-Gen			
INTERMEZZO (SUBLINGUAL)	0.0%	OFF	No			
ZOLPIDEM ER (ORAL)	2.8%	OFF	No-Gen			
TRIAZOLAM (ORAL)	1.0%	ON	Yes-Gen			
ZOLPIMIST (ORAL)	0.0%	OFF	No			
EDLUAR (SUBLINGUAL)	0.0%	OFF	No			
TEMAZEPAM 7.5 MG (ORAL)	0.0%	OFF	No-Gen			
BELSOMRA (ORAL)	1.8%	OFF	No			
TEMAZEPAM 22.5 MG (ORAL)	0.0%	OFF	No-Gen			
ZOLPIDEM (SUBLINGUAL)	0.0%	OFF	No-Gen			

- Discussion: Michael Witkovsky inquired as to whether study data exists regarding early onset dementia with the use of benzodiazepines. Rick Pope stated that he has not seen any data to support this, adding that these medications are intended for short-term use.
- John Fangman made a motion to accept staff recommendations as presented.
  - Second – Michael Witkovsky
  - All members were in favor of the motion
  - Motion Passes

Wisconsin Medicaid						
STERIODS, TOPICAL LOW						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
DESONATE GEL (TOPICAL)	0.0%	OFF	No			
HYDROCORTISONE / MIN OIL / PET OINTMENT (TOPICAL)	0.0%	ON	Yes-Gen			
HYDROCORTISONE CREAM OTC (TOPICAL)	7.0%	ON	Yes-Gen			
HYDROCORTISONE OINTMENT OTC (TOPICAL)	3.0%	ON	Yes-Gen			
SCALPICIN OTC (TOPICAL)	0.1%	ON	Yes-Gen			
HYDROCORTISONE LOTION OTC (TOPICAL)	0.4%	ON	Yes-Gen			
HYDROCORTISONE OINTMENT (TOPICAL)	39.7%	ON	Yes-Gen			
HYDROCORTISONE CREAM (TOPICAL)	44.6%	ON	Yes-Gen			
HYDROCORTISONE LOTION (TOPICAL)	1.2%	ON	Yes-Gen			
TEXACORT (TOPICAL)	0.0%	OFF	No			
CAPEX SHAMPOO (TOPICAL)	0.0%	OFF	No			
ALCLOMETASONE DIPROPIONATE OINTMENT (TOPICAL)	0.1%	OFF	No-Gen			
ALCLOMETASONE DIPROPIONATE CREAM (TOPICAL)	0.0%	OFF	No-Gen			
DESONIDE CREAM (TOPICAL)	0.2%	OFF	No-Gen			
FLUCINOLONE 0.01% OIL (TOPICAL)	3.7%	ON	Yes-Gen			
DESONIDE OINTMENT (TOPICAL)	0.0%	OFF	No-Gen			
MICORT-HC (TOPICAL)	0.0%	NR	No			
DERMA-SMOOTHIE-FS (TOPICAL)	0.0%	OFF	No			
DESONIDE LOTION (TOPICAL)	0.0%	OFF	No-Gen			

- 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						
STEROIDS, TOPICAL MEDIUM						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
MOMETASONE FUROATE SOLUTION (TOPICAL)	6.8%	ON	Yes-Gen			
MOMETASONE FUROATE CREAM (TOPICAL)	21.5%	ON	Yes-Gen			
MOMETASONE FUROATE OINTMENT (TOPICAL)	21.1%	ON	Yes-Gen			
FLUTICASONE PROPIONATE CREAM (TOPICAL)	36.7%	ON	Yes-Gen			
FLUTICASONE PROPIONATE OINTMENT (TOPICAL)	12.6%	ON	Yes-Gen			
SYNALAR SOLUTION (TOPICAL)	0.0%	OFF	No			
SYNALAR CREAM (TOPICAL)	0.0%	OFF	No			
PREDNICARBATE OINTMENT (TOPICAL)	0.0%	OFF	No-Gen			
FLUOCINOLONE ACETONIDE CREAM (TOPICAL)	0.0%	OFF	No-Gen			
HYDROCORTISONE BUTYRATE CREAM (AG) (TOPICAL)	0.0%	OFF	No-Gen			
FLUOCINOLONE ACETONIDE OINTMENT (TOPICAL)	0.2%	OFF	No-Gen			
HYDROCORTISONE BUTYRATE OINTMENT (AG) (TOPICAL)	0.0%	OFF	No-Gen			
HYDROCORTISONE VALERATE CREAM (TOPICAL)	0.1%	OFF	No-Gen			
HYDROCORTISONE BUTYRATE SOLUTION (AG) (TOPICAL)	0.0%	OFF	No-Gen			
FLUOCINOLONE ACETONIDE SOLUTION (TOPICAL)	0.4%	OFF	No-Gen			
HYDROCORTISONE BUTYRATE CREAM (TOPICAL)	0.0%	OFF	No-Gen			
PREDNICARBATE CREAM (TOPICAL)	0.0%	OFF	No-Gen			
HYDROCORTISONE BUTYRATE SOLUTION (TOPICAL)	0.0%	OFF	No-Gen			
HYDROCORTISONE BUTYRATE OINTMENT (TOPICAL)	0.1%	OFF	No-Gen			
HYDROCORTISONE VALERATE OINTMENT (TOPICAL)	0.0%	OFF	No-Gen			
PANDEL (TOPICAL)	0.0%	OFF	No			
HYDROCORTISONE BUTYRATE/EMOLLIENT (AG) (TOPICAL)	0.0%	OFF	No-Gen			
CLOCORTOLONE CREAM (AG) (TOPICAL)	0.0%	OFF	No-Gen			
LUXIQ (TOPICAL)	0.0%	OFF	No			
CLODERM (TOPICAL)	0.0%	OFF	No			
FLUTICASONE PROPIONATE LOTION (TOPICAL)	0.0%	OFF	No-Gen			
BETAMETHASONE VALERATE FOAM (TOPICAL)	0.5%	OFF	No-Gen			
HYDROCORTISONE BUTYRATE/EMOLLIENT (TOPICAL)	0.0%	OFF	No-Gen			
FLURANDRENOLIDE LOTION (AG) (TOPICAL)	0.1%	OFF	No-Gen			
FLURANDRENOLIDE OINTMENT (TOPICAL)	0.0%	NR	No-Gen			
CORDRAN TAPE (TOPICAL)	0.1%	OFF	No			
FLURANDRENOLIDE CREAM (TOPICAL)	0.0%	OFF	No-Gen			
FLURANDRENOLIDE LOTION (TOPICAL)	0.0%	OFF	No-Gen			
CUTIVATE LOTION (TOPICAL)	0.0%	OFF	No			

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

Wisconsin Medicaid						
STEROIDS, TOPICAL VERY HIGH						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
CLOBEX SPRAY (TOPICAL)	0.0%	OFF	No			
CLOBEX SHAMPOO (TOPICAL)	1.9%	ON	Yes			
CLOBEX LOTION (TOPICAL)	0.2%	ON	Yes			
CLOBETASOL PROPIONATE FOAM (TOPICAL)	0.3%	OFF	Yes-Gen			
CLOBETASOL PROPIONATE SOLUTION (TOPICAL)	22.2%	ON	Yes-Gen			
CLOBETASOL PROPIONATE CREAM (TOPICAL)	27.8%	ON	Yes-Gen			
CLOBETASOL EMOLLIENT (TOPICAL)	2.2%	ON	Yes-Gen			
HALOBETASOL PROPIONATE CREAM (TOPICAL)	0.8%	ON	Yes-Gen			
CLOBETASOL PROPIONATE OINTMENT (TOPICAL)	40.7%	ON	Yes-Gen			
HALOBETASOL PROPIONATE OINTMENT (TOPICAL)	2.4%	ON	Yes-Gen			
CLOBETASOL PROPIONATE GEL (TOPICAL)	1.1%	ON	Yes-Gen			
CLOBETASOL SHAMPOO (TOPICAL)	0.1%	OFF	No-Gen			
CLOBETASOL LOTION (TOPICAL)	0.0%	OFF	No-Gen			
ULTRAVATE LOTION (TOPICAL)	0.0%	OFF	No			
CLOBETASOL PROPIONATE SPRAY (AG) (TOPICAL)	0.2%	OFF	No-Gen			
CLOBETASOL PROPIONATE SPRAY (TOPICAL)	0.1%	OFF	No-Gen			
OLUX-E (TOPICAL)	0.0%	OFF	No			
APEXICON E (TOPICAL)	0.0%	OFF	No-Gen			

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

Wisconsin Medicaid						
STIMULANTS AND RELATED AGENTS						
Brand Name	Current Market Share	Current PDL Status	PDL Recommendation	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ARMODAFINIL (AG) (ORAL)	0.0%	OFF	No-Gen			
NUVIGIL (ORAL)	0.1%	OFF	No			
CONCERTA (ORAL)	0.0%	NR	Yes			
METADATE CD (ORAL)	1.8%	OFF	No			
KAPVAY (ORAL)	0.3%	ON	Yes			
GUANFACINE ER (ORAL)	7.7%	ON	Yes-Gen			
FOCALIN XR (ORAL)	5.0%	ON	Yes			
METHYLPHENIDATE CD (AG) (ORAL)	0.2%	ON	Yes-Gen			
AMPHETAMINE SALT COMBO (ORAL)	14.4%	OFF	No-Gen			
FOCALIN (ORAL)	0.1%	ON	Yes			
METHYLPHENIDATE (ORAL)	6.8%	ON	Yes-Gen			
DEXMETHYLPHENIDATE (AG) (ORAL)	0.1%	ON	Yes-Gen			
DEXMETHYLPHENIDATE (ORAL)	1.3%	ON	Yes-Gen			
ARMODAFINIL (ORAL)	0.0%	OFF	No-Gen			
QUILLICHEW ER (ORAL)	0.1%	ON	Yes			
ATOMOXETINE (AG) (ORAL)	0.0%	NR	Yes-Gen			
QUILLIVANT XR (ORAL)	0.9%	ON	Yes			
VYVANSE CAPSULE (ORAL)	26.0%	ON	Yes			
RITALIN LA 10 MG CAPSULE (ORAL)	0.0%	OFF	No			
METHYLIN SOLUTION (ORAL)	0.0%	OFF	Yes			
MODAFINIL (ORAL)	0.1%	OFF	No-Gen			
VYVANSE CHEWABLE TABLET (ORAL)	0.0%	ON	Yes			
APTENSIO XR (ORAL)	0.0%	OFF	Yes			
DAYTRANA (TRANSDERMAL)	0.2%	ON	Yes			
AMPHETAMINE SALT COMBO ER (AG) (ORAL)	0.0%	OFF	No-Gen			
COTEMPLA XR ODT (ORAL)	0.0%	NR	No			
AMPHETAMINE SALT COMBO ER (ORAL)	0.0%	OFF	No-Gen			
ADDERALL XR (ORAL)	16.3%	OFF	No			
DYANA VEL XR (ORAL)	0.0%	OFF	No			
ADZENYS XR ODT (ORAL)	0.0%	OFF	No			
DEXMETHYLPHENIDATE XR (AG) (ORAL)	0.0%	OFF	No-Gen			
DEXTROAMPHETAMINE TABLET (ORAL)	0.6%	OFF	No-Gen			
METHYLPHENIDATE ER (CONCERTA) (AG) (ORAL)	8.5%	ON	No-Gen			
METHYLPHENIDATE CD (ORAL)	0.4%	ON	Yes-Gen			
DEXTROAMPHETAMINE CAPSULE ER (ORAL)	0.5%	OFF	No-Gen			
METHYLPHENIDATE ER (CONCERTA) (ORAL)	2.8%	ON	No-Gen			
DESOXYN (ORAL)	0.0%	OFF	No			
METHYLPHENIDATE ER (GEN RITALIN LA) (ORAL)	0.3%	ON	Yes-Gen			
PROCENTRA (ORAL)	0.0%	OFF	No-Gen			
METHYLPHENIDATE ER (ORAL)	1.0%	ON	Yes-Gen			
DEXMETHYLPHENIDATE XR (ORAL)	0.0%	OFF	No-Gen			
METHYLPHENIDATE CHEWABLE TABLETS (ORAL)	0.0%	ON	Yes-Gen			
ATOMOXETINE (ORAL)	0.0%	NR	Yes-Gen			
CLONIDINE ER (ORAL)	0.3%	OFF	No-Gen			
METHYLPHENIDATE SOLUTION (ORAL)	0.0%	ON	Yes-Gen			
MYDAYIS ER (ORAL)	0.0%	NR	No			
ZENZEDI (ORAL)	0.0%	OFF	No-Gen			
RITALIN LA (ORAL)	0.0%	OFF	No			
METHYLPHENIDATE SOLUTION (AG) (ORAL)	0.1%	ON	Yes-Gen			
EVEKEO (ORAL)	0.1%	OFF	No			
DEXTROAMPHETAMINE SOLUTION (ORAL)	0.0%	OFF	No-Gen			
DEXEDRINE SPANSULE (ORAL)	0.0%	OFF	No			
METHAMPHETAMINE (ORAL)	0.0%	OFF	No-Gen			

- Discussion: Pam Appleby noted that in the last meeting there was discussion about adding an additional long-acting amphetamine product to the PDL.

Lynn Radmer indicated that the Drug Utilization Review (DUR) Board is actively working on the Stimulants class, including supporting the State preferring Vyvanse and non-preferring other amphetamine products approximately two years ago. Children six years of age and younger are exempted from the prior authorization process for immediate release amphetamine products. The primary goal of these efforts is to limit misuse and abuse of amphetamines, utilizing the comparative abuse-deterrent properties of Vyvanse compared to other amphetamine products.

Lynn Radmer noted that as a result of the changes made among amphetamine products two years ago and the DUR Board's involvement in this effort, utilization has shifted to Vyvanse and methylphenidate products, though there are a fair number of members still using other amphetamine products.

Lynn Radmer shared a variety of additional information, including:

- The recent Drug Effectiveness Review Project (DERP) reports shared with the Committee this year and last year indicate head-to-head data for amphetamines is limited, but available data does not support one product over another.
- Data shared with the DUR Board earlier this year indicated that among Wisconsin Medicaid members prescribed these medications, the average number of Vyvanse capsules per day was much less than the number of capsules per day for other amphetamine products.
- The State is continuing to work with the DUR Board on analysis of utilization of these products.

Catherine Decker thanked the DUR Board for its continued work with this drug class and the Department for giving prescribers an ample transition period for preparing for changes in preferred products.

Pam Appleby clarified that members being prescribed Concerta as of January 1, 2018, will pay the generic co-pay.

- Robert Rohloff made a motion to accept staff recommendations as presented.
  - Second – Catherine Decker
  - 10 members were in favor of the motion; Michael Witkovsky opposed the motion
  - Motion Passes