



# MINUTES

Utah Department of Health  
Pharmacy and Therapeutics Committee

Thursday, September 17, 2015  
7:00 a.m. to 8:30 a.m.  
Cannon Health Building  
Room 128

**Committee Members Present:**

Bryan Larson, Pharm.D.  
Clinton Sheffield, MD  
Ellie Brownstein, MD

Jameson Rice, Pharm.D.  
Keith Tolman, MD

**Committee Members Excused:**

Beth Johnson, R.Ph

Elizabeth Young, Pharm.D.

**Dept. of Health/Div. of Health Care Financing Staff Present:**

Robyn Seely, Pharm.D.  
Merelynn Berrett, RN  
Heather Santacruz, RN

Trevor Smith, CPhT  
Chad Hope, Pharm.D

**University of Utah Drug Information Center Staff Present:**

Melissa Archer, Pharm.D.

**Other Individuals Present:**

Charissa Anne, J&J  
Christopher Kant, Allergan  
D.R McCale, Baxacta  
Bob Nohavec, UofU  
Sushma Patel, AstraZeneca

Vicki Frydrych, UofU  
Sean McGarr, Allergan  
Mindy Peterson, UofU  
Kelly ponce, AstraZeneca  
Cody Ball, Select Health

Meeting conducted by: Clinton Sheffield, MD

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1. **Welcome & Housekeeping:**
  - a. Clinton Sheffield welcomed everyone to the meeting. He also reminded those in attendance about the procedures for requesting to provide public comment to the committee.
  - b. Bryan Larson presented information about the responsibilities and functions of the P&T committee.
  
2. **Review and Approval of August Minutes:** Keith Tolman made a motion to approve the minutes from August. Bryan Larson seconded the motion. All in favor.

3. **Drug Utilization Review (DUR) Board update:** The DUR board reviewed CFTR agents: Orkambi (Lumacaftor) & Kalydeco (Ivacaftor) at the last meeting. The next DUR meeting will review PCSK9 inhibitor agents.
4. **Agents to treat Irritable Bowel Syndrome (IBS)** – Melissa Archer presented a review of the Irritable Bowel Syndrome treatment agents. She presented peer-reviewed research regarding the safety and efficacy of each agent, clinical trials, disease-state treatment guidelines and Utah Medicaid utilization data.
5. **Public Comment:**
  - a. Christopher Kant, (Allergan) – He presented information about Viberzi and offered to answer questions from the committee.
6. **Other State Report** – Bryan Larson reported PDL listings for agents in this class in other States' Medicaid programs.
7. **Board Discussion (IBS agents)**
  - a. Keith Tolman said that in his opinion these drugs are not good, and diet and lifestyle changes are much better options.
  - b. Melissa Archer said that in the placebo controlled trails, the agents resulted in a benefit to the patient.
  - c. Keith Tolman said that he does not use these medications in his clinic. He said he often will use probiotics, and diet or lifestyle changes.
  - d. Clinton Sheffield said that laxatives and anti-diarrethals are used more often than these, and are prescribed by the family practice doctor. Clinton said that when he has a patient who would need to take this medication, he refers them to a GI specialist.
  - e. Clinton went on to say that these agents do not have very much data on them and that because there are safety issues, the agents should not be considered equally safe.
  - f. Jameson Rice said that the FDA also recognizes these safety issues, because they have restriction on the usage of the agents.
  - g. Clinton said that looking at the efficacy data, Linzess is better than Amitiza.
  - h. Keith Tolman said that in his experience, patients can be difficult to diagnose, and the symptoms can vary wildly from one visit to the next. He said that the lack of diagnostic marker makes treatment very difficult.
  - i. Chad Hope said that all the agents in a class can be on the PDL, and have a clinical PA. He said that this is good way to manage drugs like these, because the clinical PA will ensure proper usage, while the listing on the PDL will allow the State to collect rebates on the drugs as well.
  - j. Bryan Larson said that Zelnorm should be dropped from discussion because of safety issues, and the restrictions on the drug imposed by the FDA.
  - k. Clinton Sheffield made a motion to include Lotronex, Linzess, Viberzi, Amitiza on the PDL, making at least the agent Linzess a preferred agent based on utilization. Zelnorm will not be included in the PDL. The motion went on to request that the DUR board look at the entire class for a PA because of potential safety issues. Keith Tolman seconded the motion. All in favor.

8. **Bowel Cleansing/Prep Agents** - Melissa Archer presented a review of the Bowel Cleansing/Prep agents. She presented peer-reviewed research regarding the safety and efficacy of each agent, clinical trials, disease-state treatment guidelines and Utah Medicaid utilization data.

9. **Board Discussion:**

- a. Board agreement that PEG electrolyte should be included as a preferred agent because of the high utilization.
- b. Bryan Larson made a motion to add the presented class as equally safe and efficacious stating that the Polyethylene glycol-electrolyte solution as preferred agents. Ellie Brownstein seconded the motion. All in favor.

10. **Meeting Adjourned**

11. Next meeting is scheduled for October 15, 2015. Agents used to treat Immune Globulin agents will be discussed.

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Minutes prepared by Trevor Smith

Recording available upon request, send email to [medicaidpharmacy@utah.gov](mailto:medicaidpharmacy@utah.gov)