Utah Department of Health & Human Services

Pharmacy & Therapeutics Committee

Meeting Minutes

Thursday, February 16, 2023
7:00 a.m. to 8:45 a.m.
Google Meet

Committee Members Present:

Cole Sloan, PharmD
Bryan Larson, PharmD
Christopher Valentine, MD
Clayton Grace, RPh
McKay Robinson, PharmD
Michelle Hofmann, MD
Susan Siegfreid, MD

Committee Members Excused:

Clinton Sheffield, MD

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

Bryan Larson, PharmD
Joe Busby, RPh, MBA
Lisa Angelos, Pharmacy Director
Jim Stamos, OHPA Director
Luis Moreno, PharmD
Ngan Huynh, PharmD
Stephanie Byrne, PharmD
Andrea Rico, CPhT
Spencer Miller, CPhT

University of Utah Drug Regimen Review Center Staff Presenter:

Monet Luloh, PharmD

Other Individuals Present:

Jason Bott, Lily
Valerie Gonzales, UofU, DRRC
Heidi Goodrich, Molina
Patrick Harvey, Supernus
Lauren Heath, UofU DRRC
Gina Heinen Novo Nordisk
Bob Nohavec, UUHP
Gary Parenteau, Dexcom
Lisa Pulver, J&J
Jason Smith , Gilead
Chris Stanfield, Supernus
San Tran, Genentech
Derek Traister, Acadia
Kira Watson, UofU

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Meeting conducted by: Cole Sloan

1. **Welcome & Housekeeping:** Cole Sloan opened the meeting and announced a quorum.

2. **Review and Approval of February Minutes:** McKay Robinson made a motion to approve the minutes from September. Clayton Grace seconded the motion. All in favor, motion passed.

3. **Drug Utilization Review (DUR) Board update:**

   Presented by Ngan Huynh

   - The DUR board reviewed Mounjaro in September 2022 and recommended as non-preferred on PDL. In November 2022, the DUR board reviewed the CDC Sexually Transmitted Infection Treatment Guidelines. Decided that Utah Medicaid policy allows sufficient access to recommend STI treatment. In December 2022, the board reviewed Auvelity. The medication had no rebate at the time of review, so no motion was made. In February 2023 the DUR board reviewed Lybalvi and approved proposed PA criteria. In March, the DUR board will review Pulmonary Arterial Hypertension.

4. **Non-Stimulant Treatment for ADHD**

   Presented by Monet Luloh

   - ADHD is a chronic neurodevelopment disorder. Typical symptoms are impulsivity, hyperactivity, inattentiveness.
   - Required symptoms, per DSM-5, are present for at least 6 months, uncharacteristic based on the patient's age and stage of development, and negatively affecting function or development in academic, occupational, and/or social activities.
   - FDA-Approved non-stimulate agents for ADHD: Atomoxetine, Viloxazine ER, Clonidine Er, or Guanfacine ER .
     - Clonidine Er and Guanfacine ER are both approved for

monotherapy.
    - Clonidine IR and Guanfacine IR are not approved for ADHD treatment.
- Guidelines Recommendations
    - Multimodal approach
    - First line: non-pharmacologic interventions (eg. PTBM or CBT)
    - Usually recommended only for 6 years old and above
- Guidelines for non-stimulant
    - Used when suspected stimulant misuse or diversion
    - Certain comorbidities (eg. anxiety or tic disorders)
- Only one Head-to-head study found for guanfacine ER versus atomoxetine. No head-to-head study found for other medications.
- Select Safety Information
    - Warnings for atomoxetine and viloxazine ER:
        - Possibly suicidal ideation in pediatrics and adults
        - Screen for bipolar before starting treatment
        - Elevations in heart and blood pressure
    - Warnings for clonidine ER and guanfacine ER:
        - Risk of hypotension, bradycardia, and syncope
        - Rebound hypertension with abrupt discontinuation
        - Closely monito and slowly titrate in patient on other sympatholytic or with cardiac conduction abnormalities
        - Risk of somnolent
- Primary non-stimulants are generally recommended as second-line agents, after stimulants, for the treatment of ADHD
- PDL Recommendations
    - The board may recommend at least 1 non-stimulant FDA-approved medication for treating ADHD in children and adults.

5. **Public Comment:**
    - Patrick Harvey presented on Qelbree.

6. **Committee Discussion:**
    - Cole Sloan motioned to recommend adding at least one FDA approved medication from the alpha-2 agonist class and at least one medication from the norepinephrine reuptake inhibitor class for inclusion on the PDL. Christopher Valentine seconded the motion. All in favor, motion passed.

7. **Public Meeting Adjourned**: Cole Sloan motioned to close the meeting. McKay Robinson seconded the motion. All in favor, motion passed.

8. **Next meeting is scheduled for** May 18, 2023 with the topic of anti-obesity treatments.

Audio recording of all P&T meetings are available online at: https://medicaid.utah.gov/pharmacy/pt-committee?p=Committee%20Meeting%20Audio%20Recordings