



Kentucky Department for Medicaid Services Pharmacy and Therapeutics Advisory Committee Recommendations

The following chart provides a summary of the official recommendations made by the Pharmacy and Therapeutics (P&T) Advisory Committee at the **November 18th**, **2021**, meeting.

Pending is the review by the Commissioner of the Department for Medicaid Services of the Cabinet for Health and Family Services of these recommendations and final decisions.

	Description of Recommendation	P & T Vote
1	New Product to Market: Brexafemme®	Passed
	Non-prefer in the PDL class: Antifungals: Oral	10 For
	Length of Authorization: Date of Service	0 Against
	• Ibrexafungerp (Brexafemme) is a triterpenoid antifungal indicated for the	
	treatment of adult and post-menarchal pediatric females with vulvovaginal	
	candidiasis (VVC).	
	Criteria for Approval	
	Patient is post-menarchal female; AND	
	 Diagnosis of vulvovaginal candidiasis (VVC); AND 	
	• Females of reproductive potential must have negative pregnancy test; AND	
	• Patient must have an adequate trial and failure, contraindication, resistance, or	
	intolerance of at least single dose 150 mg oral fluconazole.	
	Renewal Criteria	
	• Coverage is not renewable	
	Quantity Limit: 4 tablets per fill	
2	New Product to Market: Kerendia®	Passed
	Non-PDL drug class agent requiring PA	10 For
	Length of Authorization: 1 year	0 Against
	• Kerendia® (finerenone) is a non-steroidal mineralocorticoid receptor antagonist	
	(MRA) indicated to reduce the risk of sustained estimated glomerular filtration	
	rate (eGFR) decline, end stage kidney disease, cardiovascular death, non-fatal	
	myocardial infarction, and hospitalization for heart failure in adult patients with	
	chronic kidney disease (CKD) associated with type 2 diabetes (T2D).	
	Criteria for Approval:	
	Initial Approval Criteria	
	 Patient has a diagnosis of type 2 diabetes; AND Patient has a diagnosis of chronic kidney disease (CKD); AND 	
	 Patient has a diagnosis of chronic kidney disease (CKD); AND Patient has eGFR > 25 mL/min/1.73 m²; AND 	
	 Patient has eGFR ≥ 25 mL/min/1.75 m², AND Patient must NOT be concomitantly receiving strong CYP3A4 inhibitors; AND 	
	• Patient must NOT be concomitantly receiving strong CTF 5A4 minibitors, AND • Patient must NOT have adrenal insufficiency; AND	
	• Patient must NOT have severe hepatic impairment (Child Pugh C); AND	
	 Serum potassium is ≤ 5 mEq/L. 	
	Renewal Criteria	
	Patient must continue to meet the above criteria; AND	
	Patient must continue to meet the above criteria, AND Patient must have disease improvement and/or stabilization OR improvement in	
	the slope of decline (based on UACR or eGFR); AND	
	the slope of decline (based on UACK or eGFK), AND	

Patient has NOT experienced any treatment-restricting adverse effects (e.g., hyperkalemia). Age Limit: 218 years Quantity Limit: 1 per day		Description of Recommendation	P & T Vote
Age Limit ≥18 years Quantity Limit: 1 per day New Products to Market - Verquvo® Non-PDL drug class agent requiring PA Length of Authorization: 1 year • Verquvo® (vericiguat). a soluble guanylate cyclase (sGC) stimulator, is indicated to reduce the risk of cardiovascular (CV) death and heart failure (HP) hospitalization following a hospitalization for HP or need for outpatient intravenous (CV) diureties, in adults with symptomatic chronic HF and ejection fraction (EF) < 45% (HF with reduced EF [HFrEF]). Criteria for Approval: Initial Approval: Initial Approval Criteria • Patient has a diagnosis of heart failure; AND Patient meets ≥ 1 of the following criteria: • Patient has required the use of intravenous diuretics as an outpatient in the past 3 months; OR • Patient was recently hospitalized for heart failure, which is the past 3 months; OR • Patient was recently hospitalized for heart failure, unless contraindicated (e.g., beta-blocker, angiotensin-converting enzyme [ACE] inhibitor or angiotensin II receptor blockers [ARB], and mineralocorticoid receptor antagonists/aldosterone antagonists/ AND • Patient is NOT taking another soluble guanylate cyclase (sGC) stimulator or phosphodiesterase 5 (PDE-5) inhibitor; AND • If patient is of childbearing potential, patient is NOT pregnant AND is using contraception. Renewal Criteria • Patient tontinues to meet above criteria; AND • Patient tontinues to meet above criteria; AND • Patient has NOT experienced treatment-limiting adverse effects (e.g., symptomatic hypotension). Age Limit ≥ 18 years Quantity Limit 1 per day Passed Diabetes: DPP-4 Inhibitors • Diabetes: DPP-4 Inhibitors class, require PA. • For any new chemical entities should be preferred. • Agents not selected as preferred will be considered non-preferred and require PA. • For any new chemical entity in the Diabetes: GLP-1 Agonists class, require PA. • For any mew chemical entity in the Diabetes: GLP-1 Agonists class, require PA. • For any mew chemical entity in the Diabetes: GLP-1 Agonists class, r			
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 DMS to select preferred agent(s) based on economic evaluation; however, at least one product FDA approved to reduce the risk of major adverse cardiovascular event (MACE) in patients with Diabetes should be preferred. Agents not selected as preferred will be considered non-preferred and require PA. For any new chemical entity in the <i>Diabetes; GLP-1 Agonists</i> class, require PA until reviewed by the P&T Advisory Committee. Pulmonary Hypertension (PAH) Agents 		until reviewed by the P&T Advisory Committee.	
one product FDA approved to reduce the risk of major adverse cardiovascular event (MACE) in patients with Diabetes should be preferred. • Agents not selected as preferred will be considered non-preferred and require PA. • For any new chemical entity in the <i>Diabetes; GLP-1 Agonists</i> class, require PA until reviewed by the P&T Advisory Committee. 5 Pulmonary Hypertension (PAH) Agents Passed			
event (MACE) in patients with Diabetes should be preferred. • Agents not selected as preferred will be considered non-preferred and require PA. • For any new chemical entity in the Diabetes; GLP-1 Agonists class, require PA until reviewed by the P&T Advisory Committee. 5 Pulmonary Hypertension (PAH) Agents Passed			
 Agents not selected as preferred will be considered non-preferred and require PA. For any new chemical entity in the <i>Diabetes; GLP-1 Agonists</i> class, require PA until reviewed by the P&T Advisory Committee. Pulmonary Hypertension (PAH) Agents Passed			
• For any new chemical entity in the Diabetes; GLP-1 Agonists class, require PA until reviewed by the P&T Advisory Committee. 5 Pulmonary Hypertension (PAH) Agents Passed			
until reviewed by the P&T Advisory Committee. 5 Pulmonary Hypertension (PAH) Agents Passed			
5 Pulmonary Hypertension (PAH) Agents Passed			
	5		Passed
1 - Divide to believe protection again (b) based on contonine evaluation, nowever, at reason 1 to 1 or	_	• DMS to select preferred agent (s) based on economic evaluation; however, at least	10 For
one agent representing three of the unique mechanisms of action should be 0 Against			



	Description of Recommendation	P & T Vote
	preferred.	
	• Agents not selected as preferred will be considered non-preferred and will require	
	Prior Authorization.	
	• For any new chemical entity in the <i>Pulmonary Arterial Hypertension (PAH)</i>	
	Agents class, require a PA until reviewed by the P&T Advisory Committee.	
6	Topical Acne Agents	Passed
	DMS to select preferred agent(s) based on economic evaluation; however, at least	10 For
	three unique chemical entities should be preferred.	0 Against
	 Agents not selected as preferred will be considered non-preferred and require PA. For any new chemical entity in the <i>Topical Acne Agents</i> class, require PA until 	
	ror any new chemical entity in the <i>Topical Ache Agents</i> class, require FA until reviewed by the P&T Advisory Committee.	
7	Oral Antipsoriatics	Passed
•	• DMS to select preferred agent(s) based on economic evaluation; however, at least	10 For
	one unique chemical entity should be preferred.	0 Against
	• Agents not selected as preferred will be considered non-preferred and require PA.	
	• For any new chemical entity in the <i>Oral Antipsoriatics</i> class, require PA until	
	reviewed by the P&T Advisory Committee.	
8	Topical Antipsoriatics	Passed
	• DMS to select preferred agent(s) based on economic evaluation; however, at least	10 For
	one unique chemical entity should be preferred.	0 Against
	• Agents not selected as preferred will be considered non-preferred and require PA.	
	• For any new chemical entity in the <i>Topical Antipsoriatics</i> class, require PA until	
9	reviewed by the P&T Advisory Committee. Topical Steroids	Passed
9	• DMS to select preferred agent (s) based on economic evaluation; however, at least	10 For
	two agents in each of the potency categories (low, medium, high, and very high)	0 Against
	should be preferred.	o rigamor
	• Agents not selected as preferred will be considered non preferred and require PA.	
	• For any new chemical entity in the <i>Steroids, Topical</i> class, require PA until	
	reviewed by the P&T Committee.	
10	Cytokine and CAM Antagonists	Passed
	• DMS to select preferred agent(s) based on economic evaluation; however, at least	10 For
	2 unique chemical entities should be preferred.	0 Against
	• Agents not selected as preferred will be considered non-preferred and require PA.	
	• For any new chemical entity in the <i>Cytokine and CAM Antagonists</i> class, require	
11	PA until reviewed by the P&T Advisory Committee.	Passed
11	 Ophthalmic Beta Blockers DMS to select preferred agent(s) based upon economic evaluation; however, at 	10 For
	least two unique chemical entities should be preferred.	0 Against
	Agents not selected as preferred will be considered non-preferred and will require	o rigamst
	PA.	
	• For any new chemical entity in the <i>Ophthalmic Beta Blockers</i> class, require PA	
	until reviewed by the P&T Advisory Committee.	
	Ophthalmic Carbonic Anhydrase Inhibitors	
	• DMS to select preferred agent(s) based upon economic evaluation; however, at	
	least one unique chemical entity should be preferred.	
	Agents not selected as preferred will be considered non-preferred and will require	
	PA.	
	• For any new chemical entity in the <i>Ophthalmic Carbonic Anhydrase Inhibitors</i>	
	class, require PA until reviewed by the P&T Advisory Committee. Ophthalmic Combinations for Glaucoma	
	• DMS to select preferred agent(s) based upon economic evaluation; however, at	
	least one unique chemical entity should be preferred.	
	Agents not selected as preferred will be considered non-preferred and will require	
L	1-gone not occord at protested will be combined and protested and will require	



Description of Recommendation	P & T Vote
PA.	
• For any new chemical entity in the <i>Ophthalmic Combinations for Glaucoma</i> class,	
require PA until reviewed by the P&T Advisory Committee.	
Ophthalmic Prostaglandin Agonists	
• DMS to select preferred agent(s) based upon economic evaluation; however, at	
least one unique chemical entity should be preferred.	
• Agents not selected as preferred will be considered non-preferred and will require	
PA.	
• For any new chemical entity in the <i>Ophthalmic Prostaglandin Agonists</i> class,	
require PA until reviewed by the P&T Advisory Committee.	
Ophthalmic Sympathomimetics	
• DMS to select preferred agent(s) based upon economic evaluation; however, at	
least one unique chemical entity should be preferred.	
• Agents not selected as preferred will be considered non-preferred and will require	
PA.	
• For any new chemical entity in the <i>Ophthalmic Sympathomimetics</i> class, require	
PA until reviewed by the P&T Advisory Committee.	
Ophthalmic Glaucoma Agents (Other)	
• DMS to select preferred agent(s) based upon economic evaluation; however, at	
least one unique chemical entity should be preferred.	
• Agents not selected as preferred will be considered non-preferred and will require	
PA.	
• For any new chemical entity in the <i>Glaucoma Agents (Other)</i> class, require PA	
until reviewed by the P&T Advisory Committee.	

Consent Agenda

For the following therapeutic classes, the P&T Committee had no recommended changes to the currently posted Preferred Drug List (PDL) status.

	Therapeutic Classes	P & T Vote
6	• Acne Agents, Oral	Passed
	• Antibiotics, Topical	10 For
	• Antifungals, Topical	0 Against
	• Antiparasitics, Topical	
	• Antivirals, Topical	
	• Rosacea Agents, Topical	
	• Antiemetics & Antivertigo Agents	
	o Anti-Emetics: Other	
	 Oral Anti-Emetics: 5-HT3 Antagonists 	
	 Oral Anti-Emetics: NK-1 Antagonists 	
	 Oral Anti-Emetics: Δ-9-THC Derivatives 	
	Antispasmodics/Anticholinergics	
	• Antidiarrheals	
	• Anti-Ulcer Protectants	
	• Bile Salts	
	• GI Motility Agents	
	H. pylori Treatment	
	Histamine II Receptor Blockers	
	o H2Receptor Antagonists	
	• Laxatives and Cathartics	
	• Proton Pump Inhibitors	
	• Ulcerative Colitis Agents	



	Therapeutic Classes	P & T Vote
•	Immunomodulators, Atopic Dermatitis	
•	Immunosuppressives, Oral	
	 Immunosuppressants 	
•	Multiple Sclerosis Agents	
•	Spinal Muscular Atrophy	
•	Ophthalmics, Allergic Conjunctivitis	
	o Ophthalmic Antihistamines	
	 Ophthalmic Mast Cells Stabilizers 	
•	Ophthalmics, Anti-inflammatories	
	o Ophthalmic NSAIDs	
	 Ophthalmic Anti-inflammatory Steroids 	
•	Ophthalmics, Antibiotics-Steroid Combinations	
•	Ophthalmics, Antibiotics	
	o Ophthalmic Quinolones	
	 Ophthalmic Antibiotics, Non-Quinolones 	
•	Ophthalmics, Antivirals	
•	Ophthalmic Immunomodulators	
•	Ophthalmics, Mydriatics & Mydriatic Combinations	
•	Ophthalmic Vasoconstrictors	
•	Otic Antibiotics	
•	Otics, Anti-Inflammatories	
	 Otic Anesthetics and Anti-Inflammatories 	

