

**NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES
PREFERRED DRUG LIST REVIEW PANEL MEETING
TUESDAY April 14, 2026 1 – 5 p.m.
In-Person Meeting with a virtual option.**

I. WELCOME, INTRODUCTIONS, OVERVIEW

Moderator, Dr. Meena Wanas, the NC Medicaid Outpatient Pharmacy lead pharmacist for the Preferred Drug List (PDL) began the in-person and virtual meeting, by welcoming all attendees to the second quarterly PDL review meeting for 2026. The PDL panel members in attendance and organization represented are listed:

- **Dr. John Matta, PharmD, MBA, Interim Director of Pharmacy and Ancillary Services.**
- **Dr. Michelle Boose Representative for the Physician Advisory Group, Pharmacy and Therapeutics Committee**
- **Dr. Aaron Garst, Representative for Community Care of North Carolina**
- **Dr. Peter Koval, PharmD, BCPS, CPP Representative for NC Association of Pharmacists**
- **Dr. Kenya Windely, MD, Representative for NC Psychiatric Association**
- **Dr. James J. Cappola, III, MD, FACP Representative for NC Chapter of the American College of Physicians**
- **Dr. Karen Breach-Washington, Representative for the Old North State Medical Society**
- **Dr. Ying Vang, MD, NC Academy of Family Physicians**
- **Dr. Charlie Waters, PharmD, MBA, BCGP, Hospital-Based Pharmacy**

Dr. John Matta, Director of Pharmacy and Ancillary Services welcomed attendees to the first in-person PDL Panel Review Meeting since 2020. He shared the open meeting was established to discuss PDL policies and procedures recommendations. Over time, the process has grown into a model of thoughtful stewardship ensuring Medicaid beneficiaries have access to medications that are safe, effective and fiscally responsible. Gratitude was extended to the PDL panel members for their time, expertise and dedication.

The next PDL Panel review meeting will be held on Thursday July 9, 2026. The PDL Panel meetings occur quarterly in January, April, July and October. The PDL with recommendations from this meeting will become effective on July 1, 2026.

Within 7 days after the meeting, participants with comments about the PDL or its content can send an email to Medicaid.PDL@dhhs.nc.gov.

The next Drug Utilization Review (DUR) Meeting will be held on Thursday April 23, 2026 from 1-3 pm.

Procedures and guidelines for the meeting were shared, and speaker guidelines were reviewed. Three minutes are allowed for presentations. Speakers must state their name, affiliation, if being compensated for the product presentation, and any potential conflicts. Information should focus on recent changes or updates for the drug. Panel members can ask questions after the presentation.

A brief legislative history about the PDL and the PDL Panel Review Committee was shared.

In 2009, the North Carolina Department of Health and Human Services (NCDHHS) established the NC Medicaid PDL to allow NC Medicaid to ensure access to cost efficient as well as medically appropriate drug therapies that maximize patient health outcomes for all NC Medicaid beneficiaries. The PDL

Review Panel was established the following year to review the PDL recommendations received from NCDHHS, NC Medicaid and the Physician Advisory Group Pharmacy and Therapeutics (PAG P&T) Committee to classify prescription medications as Preferred or Non-Preferred on the PDL.

All changes or proposed changes are to occur at the next PDL Panel meeting, with the exception of three conditions for an off-cycle change:

- Significant financial implications to the State
- Patient safety is at risk
- Product shortages in the marketplace or other access issues

Prior to start of the category review, voting protocol was shared.

- Voting may include multiple recommendations/categories at a time
- Voting is verbal – the facilitator solicits discussion and calls for a motion to approve the recommendations. When making the motion State your name when second State your name
- Vote “Aye” (in favor) or “No” (if opposed)
- If necessary, will use chat and/or MS Teams hand raise features

The recommendations approved by the PDL Review Panel are submitted to the DHHS Secretary for final approval.

An overview of the PDL was provided prior to starting the category reviews:

- Trial and failure of two Preferred drugs is required unless only one Preferred option is listed, or a trial and failure exemption is otherwise indicated on the document.
- Clinical criteria requirements are indicated in red writing.
- Color coding on the PDL posted for public comment is informational and serves to identify the type of change.
- On-file additions are recommendations when the NDC for the drug was already on the PDL file with the status indicated in the recommendation, but the drug name did not appear on the external PDL document.
- Brand-Generic Switch: the brand product and equivalent generic product switch PDL status.
- Off-Cycle Update: Product status change made outside of the scheduled PDL review cycle. Off-cycle changes are allowed when there is 1) a significant financial impact for the State, 2) a product shortage or other access issue, 3) patient safety is at risk.
- Every PDL category is reviewed at least once annually, even if there are no recommended changes from the State. The categories are open for discussion and a PDL panel member can introduce a motion for change.

II. CATEGORY REVIEWS

Analgesics

NSAIDS

- Recommendation: Reconciliation: Added Coxanto™ Capsule to Non-Preferred; NTM: Added Vyscoxa™ Suspension to Non-Preferred
- Public Comments: None

- Speakers: None
- Discussion: None

Anticonvulsants

Second Generation

- Recommendation: NTM: Added Brivaracetam Tablet (generic for Briviact®) and perampanel suspension (generic for Fycompa®) to Non-Preferred
- Public Comments: One comment
- Speakers: None
- Discussion: None

Anti-Infectives

Antibiotics - Penicillins, Cephalosporins and Related

- Recommendation: NTM: Added piperacillin - tazobactam IV piggyback and cefixime tablet (generic for Suprax®) to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Antibiotics - Macrolides and Ketolides

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Antibiotics - Quinolones

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Antivirals - (Hepatitis B Agents)

- Recommendation: Reconciliation: Off-Cycle Change: Moved tenofovir disoproxil fumarate tablet (generic for Viread®) to Preferred due to patient access.
- Public Comments: One comment
- Speakers: None
- Discussion: None

Antivirals - (Hepatitis C Agents)

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Antivirals - (Influenza)

- Recommendation: Open Class - No recommendations

- Public Comments: None
- Speakers: None
- Discussion: None

APPROVE PROPOSED RECOMMENDATIONS FOR

ANALGESICS- NSAIDS, ANTICONVULSANTS - SECOND GENERATION, ANTI-INFECTIVES – ANTIBIOTICS: PENICILLINS, CEPHALOSPORINS AND RELATED, MACROLIDES AND KETOLIDES, QUINOLONES, ANTIVIRALS: HEPATITIS B AGENTS, HEPATITIS C AGENTS, INFLUENZA

Motion J. Matta; Second K. Windely

VOTE: ALL IN FAVOR. NONE OPPOSED.

Behavioral health

Antihyperkinesia/ADHD

- Recommendation: Off-Cycle Change: Moved Adderall® XR Capsule, Concerta® Tablet, and Vyvanse® Chewable Tablet from Non-Preferred to Preferred due to drug shortages.
- Public Comments: None
- Speakers: One
 - Perry Roy - Carolina Attention Specialists, Jorney PM
- Discussion:
 - K. Windely acknowledged the benefit shared by speaker that Jorney PM is only medication of the stimulants that can be taken at night and available when child wakes, commenting that the product is unique in that way, which is a big thing for children and families.

Injectable Antipsychotics -Injectable Long Acting

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Atypical Antipsychotics - Oral / Transdermal

- Recommendation: Open Class - No recommendations
- Public Comments: Two
- Speakers: Three
 - Timothy Birner, Alkermes - Lybalvi
 - Andrew Delgado, Bristol-Myers Squibb - Cobenfy (xanomeline and trospium chloride)
 - Jessica Saleeby, Johnson & Johnson- Caplyta
- Discussion:
 - K. Windely, representative for the NC Psychiatric Association, expressed support to have Cobenfy in Preferred status. The drug has a different mechanism of action not directly impacting dopamine and less side effects, including metabolic. Its effect on the positive and negative symptoms of schizophrenia was mentioned also to support placement as a Preferred. Those are big areas that have an impact on patients staying on medication and hospitalizations.

APPROVE PROPOSED RECOMMENDATIONS FOR

**BEHAVIORAL HEALTH- ANTIHYPERKINESIS/ADHD, INJECTABLE
ANTIPSYCHOTICS -INJECTABLE LONG ACTING, ATYPICAL ANTIPSYCHOTICS -
ORAL / TRANSDERMAL**

Motion K. Breach-Washington; Second P. Koval

VOTE: ALL IN FAVOR. NONE OPPOSED.

Cardiovascular

Ace Inhibitors

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Ace Inhibitors / Calcium Channel Blocker Combinations

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Angiotensin II Receptor / Nephilysin Blocker Combinations

- Recommendation: Moved Entresto® Tablet from Preferred to Non-Preferred, moved sacubitril and valsartan tablet (generic for Entresto®) from Non-Preferred to Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Anti-arrhythmics

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Nitrate Combination

- Recommendation: Moved Bidil® Tablet from Preferred to Non-Preferred, moved isosorbide dinit/hydralazine tablet (generic for Bidil®) from Non-Preferred to Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Non-dihydropyridine Calcium Channel Blockers

- Recommendations: Open Class – No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Platelet Inhibitors

- Recommendation: Moved Brilinta® Tablet from Preferred to Non-Preferred, moved ticagrelor tablet (generic for Brilinta®) from Non-Preferred to Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Sympatholytics And Combinations

- Recommendation: NTM: Added Javadin™ Solution to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

APPROVE PROPOSED RECOMMENDATIONS FOR

CARDIOVASCULAR- ACE INHIBITORS, ACE INHIBITORS / CALCIUM CHANNEL BLOCKER COMBINATIONS, ANGIOTENSIN II RECEPTOR / NEPRILYSIN BLOCKER COMBINATIONS, ANTI-ARRHYTHMICS, NITRATE COMBINATION, NON-DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS, PLATELET INHIBITORS, SYMPATHOLYTICS AND COMBINATIONS

Motion K. Breach-Washington; Second J. Cappola

VOTE: ALL IN FAVOR. NONE OPPOSED.

Central Nervous System

Antimigraine Agents

- Recommendations: Open Class – No recommendations
- Public Comments: None
- Speakers: One
 - Teena Abraham Axsome - Symbravo
- Discussion: None

Anti-Parkinson and Restless Leg Syndrome Agents

- Recommendation: NTM: Added carbidopa-levodopa ER (generic for Rytary®) to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Multiple Sclerosis - Oral

- Recommendation: NTM: Added cladribine tablet (generic for Mavenclad®) to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Amyotrophic Lateral Sclerosis (ALS) Agents

- Recommendations: Open Class – No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Endocrinology

Growth Hormone

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Intermediate Acting Insulin

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

APPROVE PROPOSED RECOMMENDATIONS FOR

CENTRAL NERVOUS SYSTEM - ANTIMIGRAINE AGENTS, ANTI-PARKINSON AND RESTLESS LEG SYNDROME AGENTS, MULTIPLE SCLEROSIS – ORAL, AMYOTROPHIC LATERAL SCLEROSIS (ALS) AGENTS, ENDOCRINOLOGY - GROWTH HORMONE, INTERMEDIATE ACTING INSULIN

Motion J. Matta; Second P. Koval

VOTE: ALL IN FAVOR. NONE OPPOSED. *K. Windely was not present for vote

Hematologic

Colony Stimulating Factors

- Recommendation: NTM: Added Nypozi™ Syringe to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Ophthalmic

Antibiotics

- Recommendation: NTM: besifloxacin suspension (generic for Besivance®) to Non-Preferred

- Public Comments: None
- Speakers: None
- Discussion: None

Antibiotics-Steroid Combinations

- Recommendation: Reconciliation: loteprednol-tobramycin drops (generic for Zylet®) to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Alpha 2 Adrenergic Agents

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Beta Blocker Agents / Combinations

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Prostaglandin Agonists

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

APPROVE PROPOSED RECOMMENDATIONS FOR

HEMATOLOGIC - COLONY STIMULATING FACTORS, OPHTHALMIC – ANTIBIOTICS, ANTIBIOTICS-STERIOD COMBINATIONS, ALPHA 2 ADRENERGIC AGENTS, BETA BLOCKER AGENTS / COMBINATIONS, PROSTAGLANDIN AGONISTS

Motion M. Boose; Second J. Cappola

VOTE: ALL IN FAVOR. NONE OPPOSED. *K. Windely was not present for vote

Osteoporosis

Bone Resorption Suppression and Related Agents

- Recommendation: NTM: Added Enoby Syringe (biosimilar to Prolia®) to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Otic

Antibiotics

- Recommendation: NTM: Added ciprofloxacin-hydrocortisone suspension (generic for Cipro® HC) to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Anti-inflammatory

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Respiratory

Beta-adrenergic, Nebulizers

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Beta-adrenergic, Oral

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Inhaled Corticosteroid Combinations

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: One
 - Lisa Willshaw, Astra Zeneca - AirSupra
- Discussion: None

Low Sedating Antihistamines

- Recommendation: NTM: Added desloratadine solution (generic for Clarinex®) to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Low Sedating Antihistamine Combinations

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

First Generation Antihistamines

- Recommendation: Reconciliation: Added carbinoxamine ER suspension (generic for Karbinal™) to Non-Preferred and added red writing T/F of immediate release carbinoxamine solution and cetirizine syrup required for coverage
- Public Comments: None
- Speakers: None
- Discussion: None

APPROVE PROPOSED RECOMMENDATIONS FOR

OSTEOPOROSIS- BONE RESORPTION SUPPRESSION AND RELATED AGENTS, OTIC-ANTIBIOTICS, ANTI-INFLAMMATORY, RESPIRATORY- BETA-ADRENERGIC, NEBULIZERS, BETA-ADRENERGIC, ORAL INHALED CORTICOSTEROID COMBINATIONS, LOW SEDATING ANTIHISTAMINES, LOW SEDATING ANTIHISTAMINE COMBINATIONS, FIRST GENERATION ANTIHISTAMINES

Motion P. Koval; Second Y. Vang

VOTE: ALL IN FAVOR. NONE OPPOSED.

Topicals

Androgenic Agents

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Antiviral

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Rosacea Agents

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Steroids (High Potency)

- Recommendation: Reconciliation: Added Halog® Solution to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Miscellaneous

Weight Management Agents: GLP-1 Receptor Agonists indicated for the treatment of obesity (Incretin Mimemetics)

- Recommendation: Off-Cycle Change: GLP-1 weight management class added back to the PDL effective Oct. 1, 2025, Off-Cycle Change: Added: Wegovy® Pen/Tablet as Preferred, Added: Saxenda® (liraglutide) Pen and Zepbound® (tirzepatide) Pen Non-Preferred, Reconciliation: Added Zepbound® (tirzepatide) Vial and liraglutide Pen/5-pak (generic Saxenda®) to Non-Preferred
- Public Comments: None
- Speakers: One
 - Lydia Wang Novo Nordisk - Wegovy oral tablet
- Discussion:
 - Moderator M. Wanas shared Wegovy tablet was added as preferred after the original proposed recommendations posted for public comment came down. The off-cycle change in the category was done due to significant fiscal impact.
 - P. Koval said the addition of Wegovy tablet as preferred is impactful for patients who struggle with injections.

Immunomodulators, Asthma

- Recommendation: NTM: Added Exdensur Syringe to Non-Preferred
- Public Comments: One
- Speakers: Two
 - Aerik Williams, Rowan Diagnostic Allergy & Asthma – Tezspire
 - Jeff Baldwin, Amgen - Tezspire
- Discussion:
 - Moderator M. Wanas shared there is red writing for this category that T/F of preferred agents not required for diagnosis of non-allergic, non-eosinophilic severe asthma.

Estrogen Agents, Combinations

- Recommendation: Reconciliation: Added Abigale™ Tablet to Non-Preferred
- Public Comments: None
- Speakers: None
- Discussion: None

Estrogen Agents, Oral / Transdermal

- Recommendations: NTM: Added conjugated estrogen tablet (generic for Premarin®) and Lynkuet® Capsule to Non-Preferred
- Public Comments: None
- Speakers: One
 - Bashir Kalayeh, Bayer - Lynkuet
- Discussion:
 - K. Windely asked speaker to share how Lynkuet is different from Veozah. Safety profile was cited as the main difference.
 - K. Windely commented all products in the category are estrogen based and asked about options for non-estrogen products. The response was non-estrogen products are not on the PDL. They are an open class and not managed.

APPROVE PROPOSED RECOMMENDATIONS FOR

TOPICAL - ANDROGENIC AGENTS, ANTIVIRAL, ROSACEA AGENTS, STEROIDS (HIGH POTENCY), MISCELLANEOUS-IMMUNOMODULATORS, ASTHMA, WEIGHT MANAGEMENT AGENTS: GLP-1 RECEPTOR AGONISTS INDICATED FOR THE TREATMENT OF OBESITY (INCRETIN MIMEMETICS, ESTROGEN AGENTS, COMBINATIONS, ESTROGEN AGENTS, ORAL / TRANSDERMAL

Motion K. Breach-Washington; Second K. Windely

VOTE: ALL IN FAVOR. NONE OPPOSED.

Glucocorticoid Steroids, Oral

- Recommendations: NTM: Added Kymbee™ Tablet, jaythari suspension (generic for Emflaza®), and prednisone tablet DR (generic for Rayos®) to Non-Preferred, Added Red writing to Jaythari - Clinical Criteria apply
Added Red writing to Pyquvi™ Suspension (generic for Emflaza®) - Clinical Criteria apply, Removed Red writing from deflazacort suspension (generic for Emflaza®) - T/F of preferred agents not required for children under age 12.
- Public Comments: None
- Speakers: None
- Discussion: None

Cytokine And Cam Antagonists

- Recommendations: Off-cycle changes - Moved Taltz® Auto-injector / Syringe, Starjemza Vial / Syringe (biosimilar to Stelara®), Tyenne® (tocilizumab-aazg) Autoinjector / Syringe/ Vial from Non-Preferred to Preferred
Moved Cosentyx® Sensoready® Pen / UnoReady® Pen / Syringe, Steqeyma® (ustekinumab-stba) Vial / Syringe, adalimumab-adaz Pen / Syringe, adalimumab-adbm Pen/Syringe (Manufacturer: Quallent), and Humira® Crohn's Starter Pack / Ped. Crohn's Starter Pack / Pen / Psoriasis Starter Pack / Syringe from Preferred to Non-Preferred.
- Public Comments: None
- Speakers: None
- Discussion:
 - Moderator Meena Wanas shared changes were made to this category after the original proposed recommendation posted for public comment came down. The original recommendation “NTM: Added Starjemza Vial / Syringe (biosimilar to Stelara®) to Non-Preferred” changed to Preferred and additional off-cycle changes were made due to significant fiscal impact.

Movement Disorders

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: None
- Discussion: None

Skeletal Muscle Relaxants

- Recommendations: NTM: Added Tonmya™ Sublingual Tablet to Non-Preferred
- Public Comments: None
- Speakers: One
 - Alonzo Whyte Tonix Pharmaceuticals – Tonmya

- Discussion: None

Continuous Glucose Monitor Sensors

- Recommendation: Open Class - No recommendations
- Public Comments: None
- Speakers: One
 - Marie Frazzitta, Abbott Diabetes Care - Freestyle Libre 3 plus
- Discussion:
 - J. Cappola commented CGMs are a game changer for Type I and Type II diabetes. He inquired about the possibility of generic CGM systems becoming available in the near future if manufacturers can reproduce technology at lower cost. It was stated CGMs are a device so unlike a drug, there would be no generic product for a GCM
 - P. Koval commented that as patients using CGM learn what not to eat and improve their A1C, they may come off therapies causing cost shifts away from medications and controls. This could justify covering CGMs for a broader range of people.

APPROVE PROPOSED RECOMMENDATIONS FOR MISCELLANEOUS- GLUCOCORTICOID STERIODS, ORAL, CYTOKINE AND CAM ANTAGONISTS, MOVEMENT DISORDERS, SKELETAL MUSCLE RELAXANTS, CONTINUOUS GLUCOSE MONITOR SENSORS

Motion P. Koval; Second C. Waters

VOTE: ALL IN FAVOR. NONE OPPOSED.

OBSOLETE DRUGS REMOVED FROM THE PDL

<u>Drug</u>	<u>Drug Category</u>
Coreg® Tablet and CR Capsule	Beta Blockers
Osmolex ER™ Tablet	Anti-parkinson And Restless Leg Syndrome Agents
Seglentsis® Tablet	Short Acting Schedule III – IV Opioids / Analgesic Combinations
insulin glargine SoloStar® (authorized biologic for Lantus) and Levemir FlexTouch®	Long Acting Insulin
Taclonex® Ointment	Psoriasis
Eligible Aspruzo™ Sprinkle	Antianginal & Anti-ischemic
Tekturna® HCT Tablet	Direct Renin Inhibitor
Paxil® Suspension	Selective Serotonin Reuptake Inhibitor (SSRI)

ADJOURNMENT

- Recommendation: PDL Review is completed.
 - Motion to adjourn: K. Windely
 - Second for adjourn: J. Matta
 - Vote: All in favor. None opposed.
- Adjourned meeting at 2:48PM