

South Dakota Department of Social Services, Division of Medicaid Services Pharmacy & Therapeutics (P&T) Committee Meeting Minutes

Friday, September 18, 2026

1:00 – 3:00 pm CT

Members and DSS Staff

Sarah McGill, PharmD	X	Deidra Van Gilder, PharmD, Chair	X
Michael Knapp, DO	X	Brian Wilson, DO	X
Kelley Oehlke, PharmD	X	Clarissa Barnes, MD, DSS Staff	X
Heather Preuss, MD	X	Mike Jockheck, DSS Staff	X
Brandi Tackett, PharmD	X	Taylor Koerner, DSS Staff	-

Administrative Business

Van Gilder called the meeting to order at 1:00 pm. New committee member Michael Knapp was introduced. The minutes of the June meeting were presented. Wilson moved to approve the minutes. Oehlke seconded the motion. The motion was approved unanimously.

Prior Authorization Update (PA) and Statistics

The committee reviewed the PA activity report from April 1, 2026, to June 30, 2026. A total of 6,670 PAs were reviewed of which 153 requests (2.3%) were received via telephone, 101 requests (1.5%) were received via fax, 2,880 requests (43.2%) were reviewed electronically, and 3,536 requests (53%) were received via ePA. Under the topic top therapeutic classes for PA, VanGilder requested future reports separate the drug class ADHD/Anti-narcolepsy/Anti-obesity/Anorexics to improve the usefulness of the PA activity report. This feedback will be provided to the PA team.

Analysis of the Top 15 Therapeutic Classes and Drug Spend

The committee reviewed the top 15 therapeutic classes by total cost of claims from April 1, 2026, to June 30, 2026. The top five therapeutic classes based on paid amount were immunomodulator agents, atypical antipsychotics, incretin mimetics, tumor necrosis factor inhibitors, and antineoplastic agents. These top 15 therapeutic classes comprise 16.3% of total claims. The committee also reviewed the top 50 drugs based on amount paid and number of claims. The top 50 drugs by amount paid constitute 7.8% of total claims. Van Gilder asked if there were any public comments; none were offered.

Old Business

Opioid update

The committee reviewed opioid outcomes compared to the previous quarter. There was a slight increase in opioid utilization during 2Q2026 which corresponded to increase in utilization of all drugs in general. The average MME/day/utilizer stayed steady.

Brand SSRI Utilization

Committee reviewed brand utilization of SSRIs and current DAW PA criteria. Jockheck clarified that the DAW PA criteria apply to all brand-name drugs when generic is available, not just antidepressants. The committee discussed whether the PA criteria should specify a trial period for the generic product. Van Gilder also discussed brand utilization for products such as levothyroxine capsules and metoprolol

extended-release sprinkle formulations. Reasons submitted by prescribers for use of the brand-name products will be reviewed. Van Gilder mentioned that a DAW selection may sometimes be made within the electronic health record and discussed whether provider education may be appropriate. Van Gilder asked if there were any public comments; none were offered.

Zyrtec chew vs cetirizine chew

Committee reviewed utilization of Zyrtec and cetirizine chewable. Jockheck reported that staff are evaluating the addition of a maximum allowable cost (MAC) based on the average price of generic products.

New Business

Open meeting acknowledgement

The committee reviewed the open meeting acknowledgment requirement. Each member was asked to acknowledge individually that the required materials had been received. Van Gilder, Wilson, Knapp, Oehlke, Tackett, McGill, and Preuss each responded affirmatively.

Ranitidine

The committee was informed that ranitidine tablets are significantly more expensive than other H2 antagonist. Tackett motion to add PA for ranitidine. Wilson second. The motion carried unanimously. Van Gilder asked if there were any public comments; none were offered.

Tyenne

The committee reviewed utilization of Tyenne. Barnes discussed efforts to align the preferred drug lists for the medical and pharmacy benefits. Tackett moved to designate Tyenne as a preferred product, and Oehlke seconded the motion. The motion carried unanimously. Van Gilder asked if there were any public comments; none were offered.

GLP-1 review

The committee received an informational update on GLP-1 products as availability continues to change. PA criteria will remain consistent with FDA-approved labeling. The committee briefly discussed formulation preferences, including the KwikPen. Van Gilder asked if there were any public comments; none were offered.

PA reviews

The committee reviewed PA requests and utilization for Brisdelle and paroxetine ER. Oehlke moved to remove PA on paroxetine ER tablets. Wilson seconded the motion. The motion carried unanimously.

The committee reviewed PA requests and utilization for Cambia, Lofena, and Zipsor. Wilson moved to remove the PA for diclofenac 25 mg tablets. Dr. Preuss seconded the motion. The motion carried unanimously.

Van Gilder asked if there were any public comments; none were offered.

The committee reviewed PA requests and utilization for chronic constipation agents. Van Gilder supported removing the PA for Linzess and Amitiza/generic lubiprostone. McGill asked whether a step requirement should be retained for higher-cost peripheral opioid receptor antagonists. Preuss made a motion to remove PA on Linzess and Amitiza/generic lubiprostone, and Oehlke seconded the motion. The motion carried unanimously.

The committee reviewed PA requests and utilization for Difucid/fidaxomicin. Oehlke moved to remove PA for Difucid/fidaxomicin. Tackett seconded the motion. The motion was approved unanimously. Utilization will be monitored.

Van Gilder asked if there were any public comments; none were offered.

The committee reviewed PA requests and utilization for Dupixent, Fasrena, Nucala, Tezspire, and Xolair. The committee reviewed indications for these products and agreed to retain the existing PA criteria.

Exdensur

Exdensur clinical information was presented. Tackett noted that some patients may not want to self-inject and that the annual cost may be similar to other products. Coverage will be coordinated with the medical side. Van Gilder asked if there were any public comments; none were offered.

Nereus

Nereus clinical information was presented. Tackett supported having prior authorization criteria in place, and Oehlke supported State A criteria. Oehlke moved to adopt the State A criteria for Nereus. McGill amended the motion to include an initial quantity limit of 12. The amended motion was approved unanimously. Van Gilder asked if there were any public comments; none were offered.

Adjournment

The next meeting is scheduled for December 11, 2026. The March 2027 meeting is tentatively scheduled for March 5, 2027. A motion to adjourn was made and approved unanimously. The meeting adjourned at 2:25 pm CT.