STATE OF CALIFORNIA GAVIN NEWSOM, *Governor*

DEPARTMENT OF INDUSTRIAL RELATIONS
Division of Workers' Compensation
1515 Clay Street, 17th Floor, Oakland, CA 94612
Telephone: 510-286-7100
Formulary Email Address: Formulary@dir.ca.gov
Formulary Website: https://www.dir.ca.gov/dwc/MTUS/MTUS- Formulary.html

MAILING ADDRESS:
P. O. Box 420603
San Francisco, CA 94142

Pharmacy and Therapeutics Advisory Committee
DRAFT - MINUTES OF MEETING
Wednesday, July 16, 2025

Via Tele/Video-Conference

In Attendance:

DWC:
George Parisotto
DWC Administrative Director
Jackie Schauer
DWC Legal Counsel
Kevin Gorospe, Pharm.D.
DWC Consultant

Committee Members:
Raymond Meister, M.D., DWC Executive Medical Director, Chair
Daniel Mirski, M.D.
Steven Feinberg, M.D.
Daniel Zaghi, M.D. (Absent)
Todd Shinohara, Pharm.D., MA.
Raymond Tan, Pharm.D.
Lori Reisner, Pharm.D

I. Welcome and Introductions

George Parisotto, Administrative Director, DWC

A. Noted implementation of new Physician and Pharmaceutical Fee schedule effective July 1, 2025.
   a. Applicable to all medications dispensed after July 1, 2025. Proposed modifications to regulations and associated documents can be viewed at https://www.dir.ca.gov/dwc/DWCPropRegs/2024/Pharmaceutical-Fee-Schedule/Index.htm

B. Conflict of Interest reminder and advise P&T Committee members to review it; need to submit annually

C. State and federal Antitrust Law advisement

II. MTUS Drug List V13

A. Version 13 of the MTUS Drug list was posted on July 2, 2025

b. Changes were made due to updates to the Chronic Pain Practice Guideline, which was also adopted into the MTUS.

B. MTUS Drug list Version 13 becomes effective on August 6, 2025 and is available for review on the DWC Medical Treatment Utilization Schedule – Drug List page, DWC medical treatment utilization schedule - Drug Formulary

III. Approval of Minutes from the January 15, 2025 Meeting

Dr. Raymond Meister, Executive Medical Director, DWC

Motion: Approval of the minutes from the January 15, 2025 meeting.

Vote: The committee members in attendance voted unanimously for approval of the January 15, 2025 meeting minutes.

Related briefing: January 15, 2025 Meeting Minutes
(*https://www.dir.ca.gov/dwc/mtus/Meetings/April-2025/Meeting-Minutes-January-2025.pdf*)

IV. Discussion

A. MD Guidelines Recommendations and Evidence Ratings

a. **The discussion is based on a request from a previous meeting to review evidence and utilization cost figures for topical analgesics.**

b. **Discussed recommendation categories: strongly recommended (A), moderately recommended (B), recommended (C), consensus recommended/sometimes recommended (I).**

i. Not all the studies used in the guidelines have a specific Ottawa-Newcastle rating (0-9 quality ratings).

ii. The Evidence Matrix for Topical Analgesics Matrix was issued that shows the various conditions that were identified between topical anesthetic and NSAID evidence, and the number of studies referenced.

iii. Some treatments that were recommended do not have any reference studies to back up the recommendations specifically.

B. Topical Analgesic Evidence Review

a. **Lidocaine Patches (LIDODERM)**

i. Lidocaine patches were specifically identified in the guidelines for recommended treatment for five specific conditions: Tarsal Tunnel Syndrome (I), Neuropathic Pain (B), Carpal Tunnel Syndrome (I), Kienböck Disease (I), Thoracic Outlet Syndrome (B).

ii. Noted non-invasive profile and moderate cost; referenced studies used lidocaine 5% patches.
iii. Lidocaine for Tarsal Tunnel Syndrome (I)
    - Support for use is derived from usage in carpal tunnel syndrome, but there are no direct studies to back up the recommendation.
iv. Lidocaine for Neuropatic Pain(B)
    - Several studies (including two quality studies) showed improvement and appears more effective in some instances to Naproxen.
v. Lidocaine for Carpal Tunnel Syndrome (I)
    - Two studies with low quality scores were used for rationale. Although there was no strong evidence, a consensus was reached based on studies and other conditions.
vi. Lidocaine for Kienböck Disease (I)
    - No quality study was referenced but was recommended by consensus based on studies and other conditions.
vii. Lidocaine for Thoracic Outlet Syndrome (B)
    - Chronic Neuropathic Pain is the evidence used to recommend lidocaine.

b. Diclofenac Topical Gel (VOLTAREN)
i. Diclofenac is the only FDA approved topical NSAID and is generally preferred.
ii. Diclofenac is not often recommended due to increased risk for hepatotoxicity.
iii. Diclofenac Summary of Evidence
    - Conditions reviewed: Achilles Tendinopathy, Ankle Sprain, Ankle Tendinopathy, Plantar Fasciitis, Complex Regional Pain Syndrome, Neuropathic Pain, Lateral Epicondylalgia, Extensor Compartment Tenosynovitis, Hand/Finger Osteoarthritis, Thoracic Outlet Syndrome.
    - Drugs used in studies: Piroxicam gel, niflumic gel, ketoprofen patch, diclofenac gel, ketorolac gel, etofenamate gel, diclofenac lotion.
    - Many of the drugs used in the studies are not commercially available in the United States.
    - With most recommendations, there are no direct corollaries or direct studies that recommend usage but is supported by group consensus and effective usage in treating other pain conditions.
    - There is confusion in the community due to the lack of direct evidence being used to support these recommendations; only inferred evidence appears to be referenced.

c. Committee discussion on Lidocaine patch usage
    i. Committee expressed concern with the pattern of recommendations based on situations with no direct corollaries or direct evidence.
        - ACOEM has a rigorous process and has evolved over time to consider and include consensus recommendations when issuing guidelines.
        - Although there is a concern about incentivized prescription of medications to patients by providers, removing medications would limit access to medications and open the committee to complaints regarding not following ACOEM guidelines.
        - The committee suggested expanding the MTUS to include additional information to products that are deemed exempt.
    ii. Public Comments
        - No public comments.

d. Topical Analgesic Utilization and Cost Review
    i. Committee reviewed usage and cost data for topical anesthetics in the Pharmacy & Drug Utilization tables and identified high utilization of lidocaine 5% patches and ointments (81% pharmacy billed lines, 97% physician billed lines).
    ii. The committee reviewed dispensed medications and noted significant cost variance between generic and branded formulations.
    iii. Committee Discussion
        - Proposed limiting formulary listing for lidocaine to 5% patches.
        - Suggested adding specific dosage forms, strengths, and duration of treatment recommendations to formulary.
        - Recommended clearer formulary definitions aligned with guideline-supported treatments.

V. Additional Public Comments

A. No additional public comments

VI. Review of Committee Recommendations

A. Limit lidocaine formulary listing to 5% patches.

B. Clarify formulary entries with detailed dosage forms, strengths, and recommended treatment durations.