



The Honorable William M. "Mac" Thornberry
Chairman
Committee on Armed Services
U.S. House of Representatives
Washington, DC 20515

September 27, 2016

Dear Mr. Chairman:

This final report responds to section 715(a) of the National Defense Authorization Act for Fiscal Year 2016 (Public Law 114-92-Nov. 25, 2015) which requires the Secretary of Defense and the Secretary of Veterans Affairs to jointly establish a joint uniform formulary for the Department of Veteran Affairs and the Department of Defense with respect to pharmaceutical agents that are critical for the transition of an individual from receiving treatment furnished by the Secretary of Defense to treatment furnished by the Secretary of Veterans Affairs. Section 715(b) requires the Secretaries to select for inclusion on the joint uniform formulary established under subsection (a) pharmaceutical agents relating to: (1) the control of pain, sleep disorders, and psychiatric conditions, including post-traumatic stress disorder; and (2) any other conditions determined appropriate by the Secretaries.

Section 715(c) requires the Secretaries to jointly submit a report to the appropriate congressional committees on the joint uniform formulary, including a list of the pharmaceutical agents selected for inclusion on the formulary, not later than July 1, 2016. To ensure the report accurately captured the interagency collaboration and processes used to develop the list, an interim report was provided to the appropriate committees.

Thank you for your interest in the health and well-being of our Service members, veterans, and their families. A similar letter has been sent to the additional congressional committees.

Sincerely,

Sloan D. Gibson
Deputy Secretary
Department of Veterans Affairs

Peter Levine
Acting Under Secretary of Defense
for Personnel and Readiness

Enclosure:
As stated

cc:
The Honorable Adam Smith
Ranking Member



The Honorable Thad Cochran
Chairman
Committee on Appropriations
United States Senate
Washington, DC 20510

September 27, 2016

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Peter Levine
Acting Under Secretary of Defense
for Personnel and Readiness

Enclosure:
As stated

cc:
The Honorable Barbara A. Mikulski
Vice Chairwoman



The Honorable Harold Rogers
Chairman
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

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Department of Veterans Affairs

Peter Levine
Acting Under Secretary of Defense
for Personnel and Readiness

Enclosure:
As stated

cc:
The Honorable Nita M. Lowey
Ranking Member



The Honorable Johnny Isakson
Chairman
Committee on Veterans' Affairs
United States Senate
Washington, DC 20510

September 27, 2016

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Department of Veterans Affairs

Peter Levine
Acting Under Secretary of Defense
for Personnel and Readiness

Enclosure:
As stated

cc:
The Honorable Richard Blumenthal
Ranking Member



The Honorable Jeff Miller
Chairman
Committee on Veterans' Affairs
U.S. House of Representatives
Washington, DC 20515

September 27, 2016

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Department of Veterans Affairs

Peter Levine
Acting Under Secretary of Defense
for Personnel and Readiness

Enclosure:
As stated

cc:
The Honorable Mark Takano
Acting Ranking Member



The Honorable John McCain
Chairman
Committee on Armed Services
United States Senate
Washington, DC 20510

September 27, 2016

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Sloan D. Gibson
Deputy Secretary
Department of Veterans Affairs

Peter Levine
Acting Under Secretary of Defense
for Personnel and Readiness

Enclosure:
As stated

cc:
The Honorable Jack Reed
Ranking Member

REPORT TO CONGRESS

**SECTION 715 OF THE NATIONAL DEFENSE AUTHORIZATION ACT FOR FISCAL
YEAR 2016 (Public Law 114-92), "JOINT FORMULARY FOR THE DEPARTMENT
OF VETERANS AFFAIRS AND DEPARTMENT OF DEFENSE**



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1.0 Purpose

Section 715 of the National Defense Authorization Act for Fiscal Year 2016 (Public Law 114-92) requires the Secretary of Defense and the Secretary of Veterans Affairs to jointly establish a joint uniform formulary for the Department of Veterans Affairs (VA) and the Department of Defense (DoD) with respect to pharmaceutical agents that are critical for the transition of an individual from receiving treatment furnished by DoD to treatment furnished by VA. This report responds to the requirement in Section 715 for the Secretaries to jointly submit a report to the appropriate Congressional Committees on the joint uniform formulary, including a list of the pharmaceutical agents selected for inclusion on the formulary, not later than July 1, 2016.

Section 715 requires the Secretaries to select for inclusion on the joint uniform formulary of pharmaceutical agents relating to: (1) the control of pain, sleep disorders, and psychiatric conditions, including post-traumatic stress disorder (PTSD); and (2) any other conditions determined appropriate by the Secretaries. In response to this requirement, the DoD and VA jointly developed a Transitional Continuity of Care Drug List. Prepared in consultation with VA/DoD Health Executive Committee psychological health and pain specialists, the enclosed list includes pharmaceutical agents in the referenced categories, as well as alcohol deterrents/narcotic antagonists and smoking cessation agents. The list will be updated annually.

2.0 Construction of the Transitional Continuity of Care Drug List

A collaborative approach was used to develop the list. In December 2015, VA Pharmacy Benefit Management Services (VA PBM) identified general drug classes to be included. The Defense Health Agency Pharmacy Operations Division (DHA POD) then provided a file that included DoD formulary status for all prescription medications that fell into the corresponding classes as defined by the DoD and were dispensed during FY 2015 for any DoD beneficiary. The VA PBM then provided a file that matched the DoD listings, provided VA National Formulary Status, and compared the overlap across agencies. In response, the DHA POD cross-walked VA and DoD listings for the same medications to resolve terminology differences and provide the number of prescriptions filled during FY 2015 for each agent for Active Duty beneficiaries.

Representatives from the VA PBM and DHA POD then met to discuss and resolve the final recommended list, based on input from VA and DoD clinical experts, Active Duty medication use during FY 2015, and formulary status across both systems. Comments were then solicited from VA/DoD Health Executive Committee psychological health and pain specialists, and the list briefed to DoD and VA formulary management committees (DoD P&T Committee; VA National Formulary Committee); the DoD Medical Operations Group; and the DoD/VA Health Executive Committee by April 19.

3.0 Medications Included

In addition to pharmaceutical agents specified in Section 715— those related to the control of pain, sleep disorders, and psychiatric conditions, including PTSD—the list also includes alcohol deterrents/narcotic antagonists and smoking cessation agents. Alcohol deterrents/narcotic antagonists include both agents commonly used as part of ongoing substance abuse deterrence and treatment (acamprosate, disulfiram, naltrexone) and those used emergently to counteract the effects of narcotic overdose (e.g., naloxone injection or nasal spray). Only one prescription medication, varenicline, is listed on the accompanying list as a smoking cessation agent; however, bupropion, an antidepressant listed as a psychiatric medication, is also commonly used for smoking cessation. Other medications used for smoking cessation are primarily nicotine replacement agents (inhalers, gum, lozenges, patches), which are available over-the-counter.

Medications for control of pain are defined broadly: the list includes not only narcotics (such as morphine or acetaminophen/hydrocodone), but also non-steroidal anti-inflammatory agents (such as celecoxib or meloxicam), medications specific for migraine (such as sumatriptan), and miscellaneous pain agents such as lidocaine patch. It should also be noted that some of the agents listed under psychiatric disorders are also commonly used as pain agents, particularly for nerve-related pain disorders (e.g., amitriptyline, duloxetine, gabapentin, pregabalin).

Medications for the treatment of psychiatric disorders include the many different classes of antidepressants, as well as antipsychotics, antianxiety agents, mood stabilizers, attention deficit hyperactivity disorder agents, and medications not typically defined as psychiatric medications but included as options for treatment of PTSD symptoms (e.g., prazosin and ergoloid mesylates). The list also includes anticonvulsants, many of which are also used for psychiatric conditions and/or pain.

Medications for sleep disorders are equally broad: the list includes both the widely used non-benzodiazepine hypnotics (e.g., eszopiclone, zolpidem); benzodiazepines such as triazolam and temazepam; hydroxyzine, an antihistamine used for its sleep-promoting effect; and low dose doxepin, an antidepressant also listed (at higher doses) as a psychiatric medication.

4.0 Conclusion

The Transitional Continuity of Care Drug List is expected to inform DoD and VHA formulary decision-making, and to work in conjunction with the VA policy addressing continuation of DoD-prescribed medications for transitioning service members. VHA is working on repeating their study of medication continuation in transitioning Servicemembers with a larger sample size; planned completion by November 2016.

**5.0 Appendix A: Department of Defense – Department of Veterans Affairs
Transitional Continuity of Care Drug List**

Pharmaceutical Agent Names and Dosage Forms, by Category

ALCOHOL DETERRENTS/NARCOTIC ANTAGONISTS	
Acamprosate Tab, EC	Naloxone Nasal
Disulfiram Tab	Naltrexone HCl Tab
Naloxone Inj	Naltrexone Microspheres Susp ER
MEDICATIONS FOR CONTROL OF PAIN	
Acetaminophen/Oxycodone HCl Cap	Meloxicam Tab
Acetaminophen/Oxycodone HCl Liq	Methadone HCl Liq
Acetaminophen/Oxycodone HCl Tab	Methadone HCl Tab
Aspirin/Butalbital/Caffeine Cap	Morphine Cap, SA
Aspirin/Butalbital/Caffeine Tab	Morphine Soln, Conc/Liq, Oral
Buprenorphine Patch	Morphine Tab, IR
Buprenorphine Tab, Sublingual	Morphine Tab, SA
Buprenorphine/Naloxone Tab, Sublingual	Nabumetone Tab
Butalbital/Acetaminophen/Caffeine Cap	Naproxen/Esomeprazole Mag Tab, IR/DR
Butalbital/Acetaminophen/Caffeine Tab	Oxaprozin Tab
Butalbital/Acetamin/Caffeine/Codeine Cap	Oxycodone HCl Liq
Caffeine/Ergotamine Supp, Rectal	Oxycodone HCl Tab
Caffeine/Ergotamine Tab	Oxycodone Tab, SA 12h
Celecoxib Cap	Oxymorphone HCl Tab
Codeine Sulfate Tab	Oxymorphone HCl Tab, ER 12h
Codeine/Acetaminophen Liq	Piroxicam Cap
Codeine/Acetaminophen Tab	Rizatriptan Benzoate Tab
Diclofenac Sodium Tab DR	Rizatriptan Benzoate Tab Rapdis
Diclofenac Potassium Tab	Salsalate Tab
Diclofenac/Misoprostol (provided as combination or components)	Sulindac Tab
Diclofenac Topical	Sumatriptan Succinate/Naproxen Sodium Tab
Eletriptan HBr Tab	Sumatriptan Spray
Etodolac Cap/Tab	Sumatriptan Succinate Cartridge
Fentanyl Patch	Sumatriptan Succinate Inj Vial
Hydrocodone/Acetaminophen Soln, Oral	Sumatriptan Succinate Pen
Hydrocodone/Acetaminophen Tab	Sumatriptan Succinate Syringe
Hydrocodone/Ibuprofen Tab	Sumatriptan Succinate Tab
Hydromorphone HCl Tab	Tapentadol Tab, SA 12h
Indomethacin Cap	Tramadol HCl Tab
Indomethacin Cap, ER	Tramadol/Acetaminophen (provided as combination or components)
Indomethacin Supp, Rectal	Zolmitriptan Spray
Isometheptene/Dichloralphenazone/Acetaminophen Cap	Zolmitriptan Tab
Ketoprofen Cap	Zolmitriptan Tab Rapdis
Lidocaine 5% Patch	

Pharmaceutical agents relating to the control of pain, sleep disorders, and psychiatric conditions, including post-traumatic stress disorder, are included. Additionally, alcohol deterrents/narcotic antagonists and smoking cessation agents are included.

**Appendix A: Department of Defense – Department of Veterans Affairs
Transitional Continuity of Care Drug List**

Pharmaceutical Agent Names and Dosage Forms, by Category

MEDICATIONS FOR TREATMENT OF PSYCHIATRIC CONDITIONS, INCLUDING PTSD	
Alprazolam Tab	Divalproex Sodium Tab, SA, 24hr
Alprazolam Tab, ER 24h	Doxepin HCl Cap
Amitriptyline HCl Tab	Doxepin HCl Liq
Amphetamine/Dextroamphetamine (Eqv-Adderall) Tab	Duloxetine Cap, EC
Amphetamine/Dextroamphetamine Resin Complex (Eqv-Adderall XR) Cap, ER 24h	Ergoloid Mesylates Tab
Aripiprazole Inj, Susp, SA	Escitalopram Tab
Aripiprazole Tab	Fluoxetine Cap
Atomoxetine HCl Cap	Fluoxetine Soln, Oral
Bupropion HCl Tab	Fluoxetine Tab
Bupropion HCl Tab, SA (12hr-SR)	Fluphenazine Deconate Inj
Bupropion HCl Tab, SA (24hr-XL)	Fluphenazine Liq
Bupropion HCl Tab	Fluphenazine Tab
Carbamazepine Cap/Tab, SA 12h	Fluvoxamine Maleate Tab
Carbamazepine Susp	Gabapentin Cap/Tab
Carbamazepine Tab	Gabapentin Soln, Oral
Carbamazepine Tab Chew	Guanfacine HCl Tab, ER 24h (Eqv Intuniv)
Chlordiazepoxide HCl Cap	Haloperidol Decanoate Inj
Chlorpromazine Tab	Haloperidol Liq
Citalopram Hydrobromide Soln, Oral	Haloperidol Tab
Citalopram Hydrobromide Tab	Imipramine HCl Tab
Clomipramine Cap	Lamotrigine Tab
Clonazepam Tab	Lisdexamfetamine Dimesylate Cap
Clonazepam Tab Rapdis	Lithium Cap/Tab
Clonidine HCl Tab	Lithium Citrate Soln, Oral
Clonidine Patch	Lithium Tab, SA
Clozapine Tab	Lorazepam Tab
Desipramine HCl Tab	Loxapine Cap
Desvenlafaxine Succinate Tab, ER 24h (Eqv Pristiq ER)	Methylphenidate CPBP 30-70 (Eqv Metadate CD)
Dextroamphetamine Cap, ER	Methylphenidate HCl CPBP 50-50 (Eqv Ritalin LA)
Dextroamphetamine Cap, SA	Methylphenidate HCl Tab Chew
Dextroamphetamine Liq	Methylphenidate HCl Tab, ER 24h (Eqv Concerta)
Dextroamphetamine Tab	Methylphenidate Tab

Diazepam Tab	Methylphenidate Tab ER
Divalproex Sodium Cap, Sprinkle	Mirtazapine Tab

Pharmaceutical agents relating to the control of pain, sleep disorders, and psychiatric conditions, including post-traumatic stress disorder, are included. Additionally, alcohol deterrents/narcotic antagonists, and smoking cessation agents are included.

**Appendix A: Department of Defense – Department of Veterans Affairs
Transitional Continuity of Care Drug List**

Pharmaceutical Agent Names and Dosage Forms, by Category

MEDICATIONS FOR TREATMENT OF PSYCHIATRIC CONDITIONS, INCLUDING PTSD (Continued)	
Mirtazapine Tab Rapdis	Pregabalin Cap
Modafinil Tab	Quetiapine Fumarate Tab
Nortriptyline Cap	Quetiapine Fumarate Tab, ER 24h
Nortriptyline Soln, Oral	Risperidone Inj, Susp, SA
Olanzapine Tab	Risperidone Soln
Olanzapine Tab Rapdis	Risperidone Tab
Oxcarbazepine Tab	Sertraline Soln
Paliperidone Palmitate Inj, Susp, SA	Sertraline Tab
Paroxetine Tab	Thiothixene Cap
Perphenazine Tab	Tranylcypromine Sulfate Tab
Phenelzine Sulfate Tab	Trazodone Tab
Phenobarbital Elixir	Trifluoperazine Tab
Phenobarbital Tab	Venlafaxine Cap, ER 24h
Phenytoin Sodium Extended, Cap	Venlafaxine HCl Tab ER 24h
Phenytoin Susp	Venlafaxine Tab IR
Phenytoin Tab, Chew	Ziprasidone Cap
Pimozide Tab	Zonisamide Cap
Prazosin HCl Cap	
MEDICATIONS FOR SLEEP DISORDERS	
Doxepin HCl Tab (Eqv Silenor)	Triazolam Tab
Eszopiclone Tab	Zaleplon Cap
Hydroxyzine Cap/Tab	Zolpidem Tab
Hydroxyzine Liq	Zolpidem Tartrate Tab Mphase (Eqv Ambien CR)
Temazepam Cap	
TOBACCO CESSATION AGENTS	
Varenicline Tartrate Tab	

Pharmaceutical agents relating to the control of pain, sleep disorders, and psychiatric conditions, including post-traumatic stress disorder, are included. Additionally, alcohol deterrents/narcotic antagonists and smoking cessation agents are included.

Estimate of Cost to Prepare Congressionally-Mandated Report

ATTACHMENT

Short Title of Report: Report to Congress on Joint Formulary for VA and DoD
Report Required By: Public Law 114-92

In accordance with Title 38, Chapter 1, Section 116, the statement of cost for preparing this report and a brief explanation of the methodology used in preparing the cost statement are shown below.

Manpower Cost:	<u>\$6,193</u>
Contract(s) Cost:	<u>\$0</u>
Other Cost:	<u>\$0</u>
<u>Total Estimated Cost to Prepare Report:</u>	<u><u>\$6,193</u></u>