Enterprise P&T Meeting Committee Meeting Minutes July 27, 2020

Voting Members Present

Antypas, Christopher, PharmD	Caton, Kirt, MD	Davis, Tracey, PharmD	Martin, Kelly, PharmD	Orr, Lavenda, MD	Whitfield, Rani, MD
Batluck, David, DO		Fecundo, Fury, PharmD	McAllister, Susan MD	Peters, Eric, MD	Wide, Rodney, MD
Brinley, John, MD	Cherian, Sheena, MD	Higgins, Lily, MD	Michael, Kendra, MD	Peterson, Andrew, PharmD	
Burnham, William MD		Hockmuth, Robert, MD	Muller, Betty, MD	Petkash, David, MD	
Caton, Cathryn MD	Cooper, Don, Rph	Kryger, Emily, PharmD	Murphy, Michelle PharmD	Weart, Wayne, PharmD	

Excused Voting Members

Beam, Donald, MD	
Elebra, Rogers, MD	

Invited Guests Present

Albandoz, Linda	Hunter, Amanda, PharmD	Plante, Jeanine, PharmD	Westover, Scott
Cheely, George, MD	Megargell, Lauren PharmD	Seitz, Allison, PharmD	Wiseman, Arlene, PharmD
DeHoratius, Patrick, PharmD	Abad, Melissa, CPht	Trumbower, Devon, PharmD	
Guerriero, Monica	Meny, Chris, Rph	Vodoor, Calla, PharmD	
Holley, April	Oaster, Patty	Weiss, Erich, PharmD	

Issue	Discussion	Conclusion/Results	Vote	Action/ Person Responsible
1. Call to Order	The meeting was called to order at 6:01 PM EST. Welcomed all external and internal participants.	Informational Only		Dr. William Burnham
2. Conflict of Interest Disclosure	No conflicts announced	Informational Only		Dr. William Burnham
4 Raview and approval of May				Dr William
4. Review and approval of May P&T and March proxy minutes		Committee approved as recommended		Dr. William Burnham

	Motion: Kurt Katon Second: Wayne Weart	
5. Old Business		

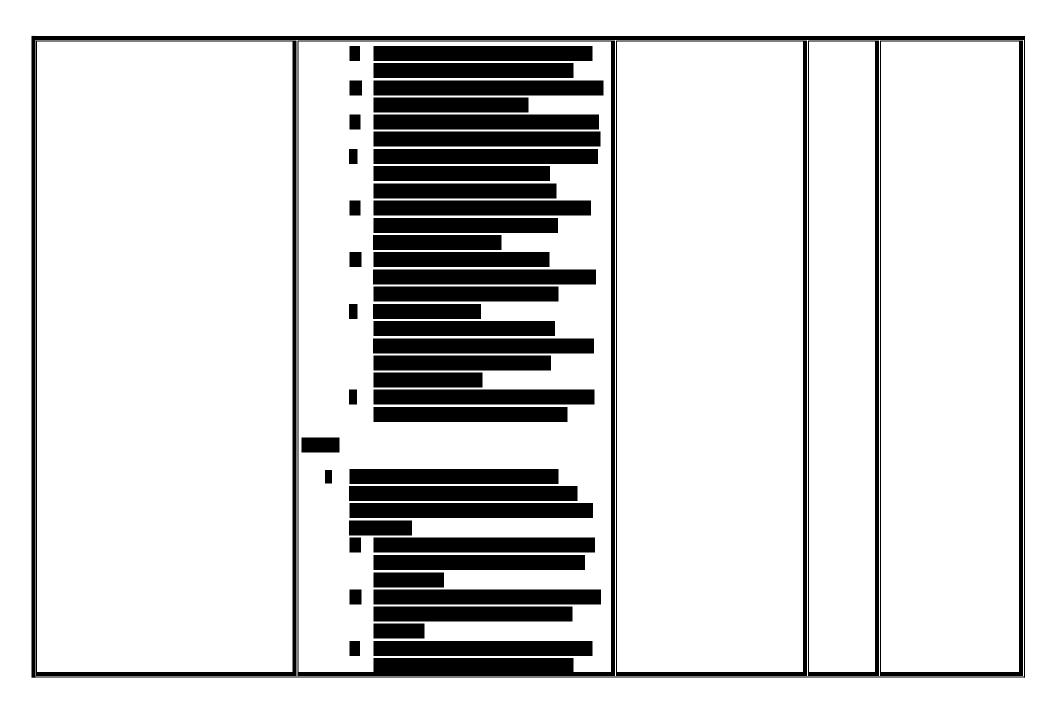
6. New Business			
Oxbryta	PerformRx makes the following recommendation: KF/AHC/AHNE • Authorize prescribing by a sickle cell specialist	Committee approved as recommended Motion: Wayne Weart	PerformRx will update the criteria and formulary/PDL with any changes

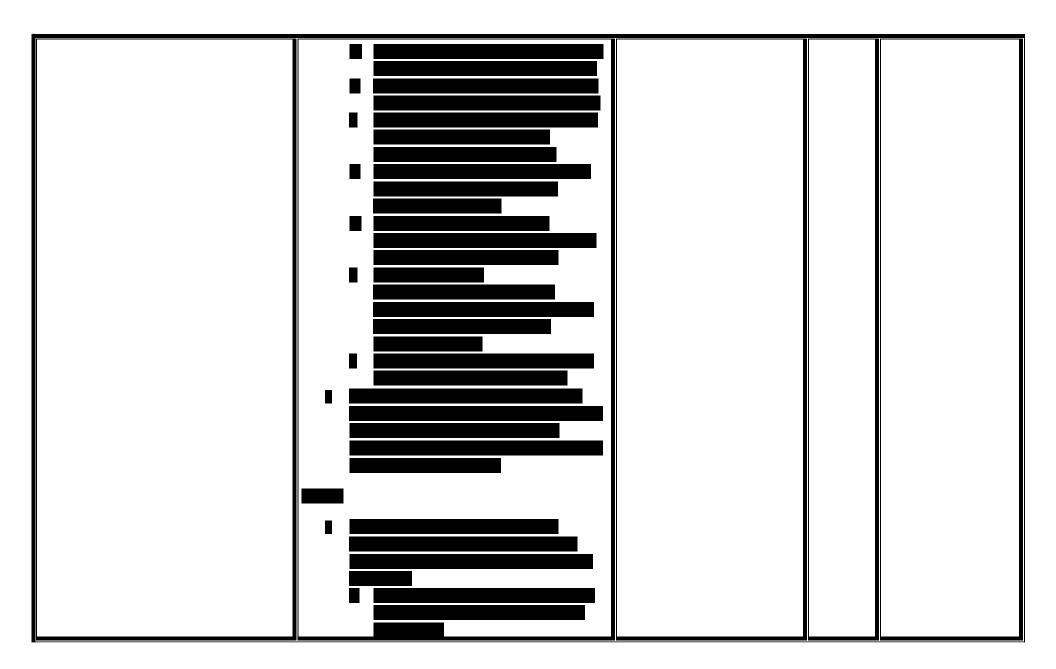
Adakveo	PerformRx makes the following recommendation: KF/AHC/AHNE • Authorize prescribing by a sickle cell specialist	Committee approved as recommended Motion: Wayne Weart Second: David Batluck	PerformRx will update the criteria and formulary/PDL with any changes

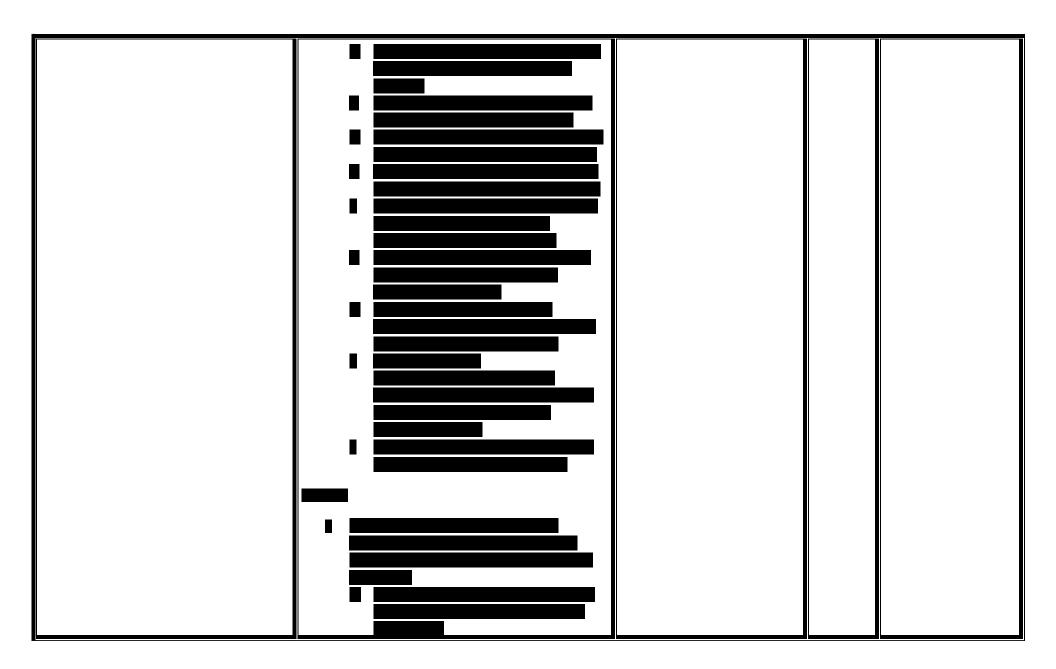
Anti-FGF23 Monoclonal Antibodies	PerformRx makes the following recommendation: KF/AHC/AHNE • Add appropriate requirements, age restriction, and prescriber restriction for newly approved indication of tumorinduced osteomalacia.	Committee approved as recommended Motion: Wayne Weart Second: David Batluck	PerformRx will update the criteria and formulary/PDL with any changes

Heparins	PerformRx makes the following recommendation: KF/AHC/AHNE • Add the currently available heparin lock flushes to the formulary for additional member availability	Tabled	No Changes
Injectable Steroids	PerformRx makes the following recommendation: KF/AHC/AHNE • Add the following products to the formulary, as these are cost effective products which will increase access for members: a. Betamethasone acetate and sodium phosphate (PF) 6 mg/ml injection suspension	Tabled	No Changes

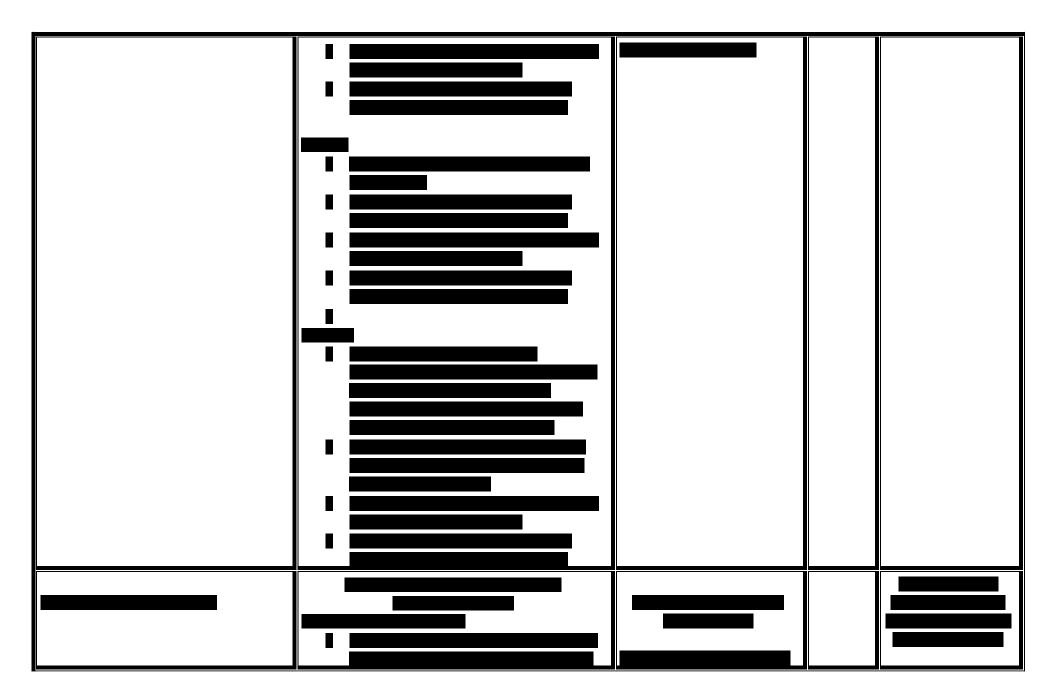
	b. Betamethasone sodium phosphate 6
	mg/ml in sterile water injection
	solution
	cDexamethasone sodium phosphate
	(PF) 10 mg/ml injection syringe
	dSolu-Cortef (hydrocortisone
	sodium succinate) 100 mg injection
	solution
	e. Methylprednisolone acetate (PF) 40
	mg/ml, 80 mg/ml in sodium
	chloride injection suspension
	fMethyprednisolone acetate (Depo-
	Medrol) 40 mg/ml, 80 mg/ml
	injection suspension
	g. Methylprednisolone sodium
	succinate (Solu-Medrol) 40 mg,
	125 mg, 500 mg injection solution
	h. Solu-Medrol (PF)
	(methylprednisolone sodium
	succinate) 40 mg/ml, 125 mg/2 ml,
	500 mg/4 ml,1,000 mg/8 ml
	injection solution
	i. Triamcinolone acetonide (Kenalog)
	40 mg/ml injection suspension
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7. Drug Reviews		
Therapeutic Class		



Antitubercular Antibiotics	PerformRx makes the following recommendation: KF/AHC/AHNE:	Committee approved as recommended Motion: Robert Hockmuth Second: Lavdena Orr	PerformRx will update the criteria and formulary/PDL with any changes

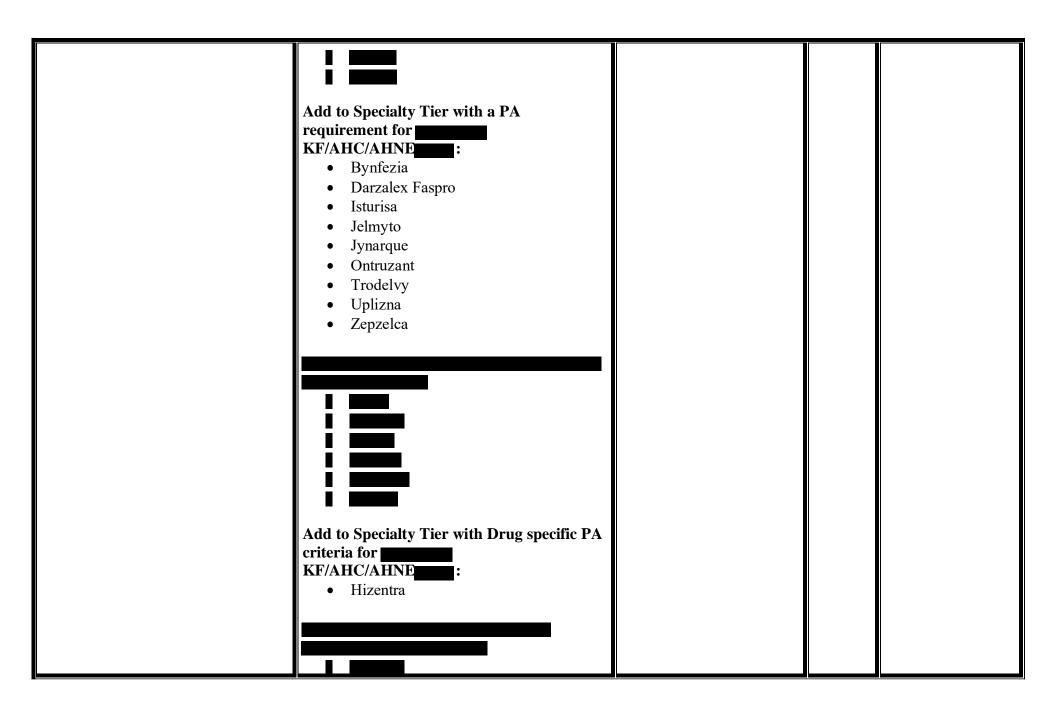
Remove Isoniazid 50 mg/5 mL oral solution from the formulary due to limited utilization and the availability of more cost effective formulations on the formulary.		

	PerformRx makes the following		
Peak Flow Meter	recommendation:		
	KF/AHC/AHNE:		
	Remove In-Check Oral Flow meter, In- Check Nasal with Mask, and Clever	Committee approved as	PerformRx will
	ChoicePeak Flow Meter from the	recommended	update the criteria
	formulary due to lack of utilization and		and formulary/PDL
	the availability of more cost effective	Motion: Robert Hockmuth	with any changes
	devices on the formulary	Second: Lavdena Orr	

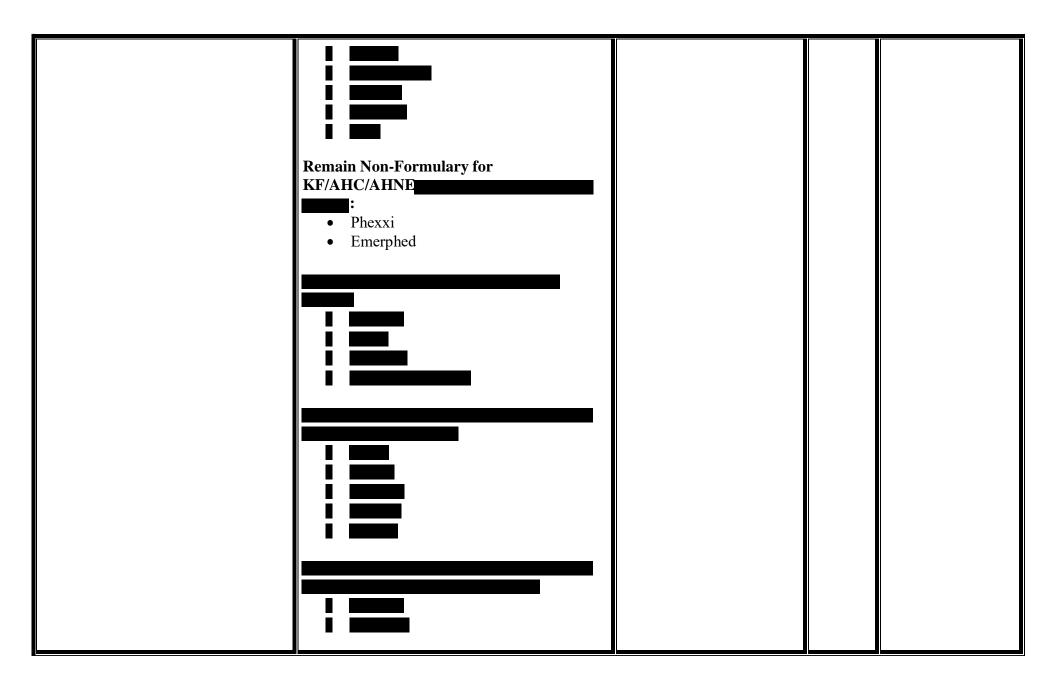
Single Products		

Reblozyl	PerformRx makes the following recommendation: KF/AHC/AHNE • Add Reblozyl (luspatercept) to the specialty tier with prior authorization. • Approve the Reblozyl prior authorization criteria as a new policy.	Committee approved as recommended Motion: David Batluck Second: Lavdena Orr	PerformRx will update the criteria and formulary/PDL with any changes

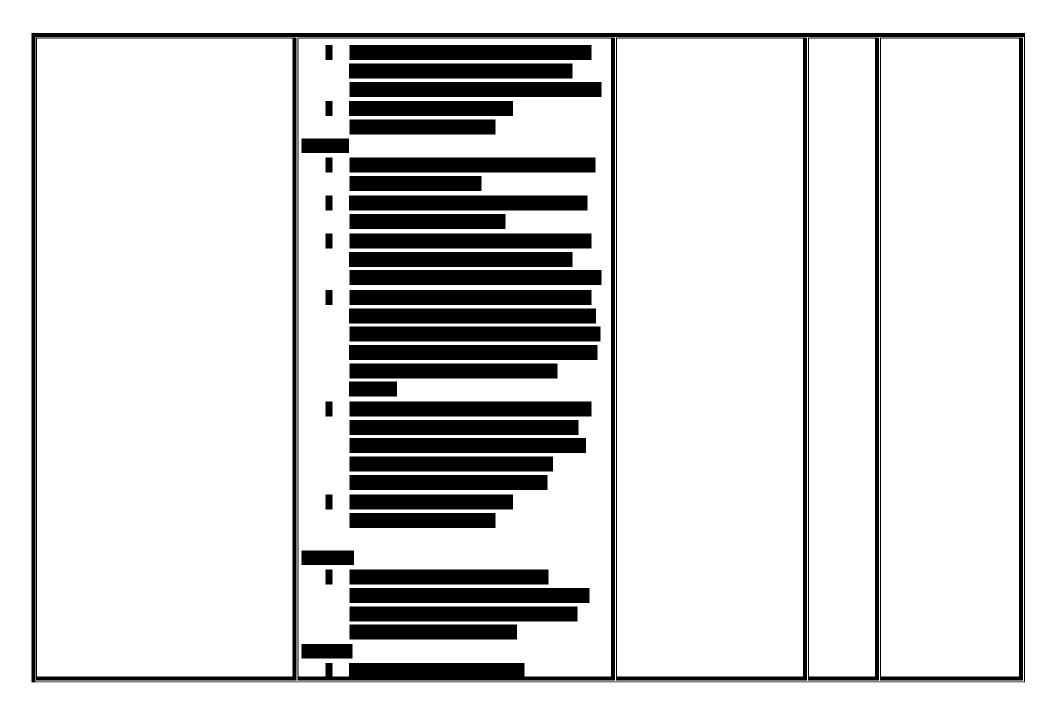
8. New Products			
	PerformRx makes the following recommendation:		



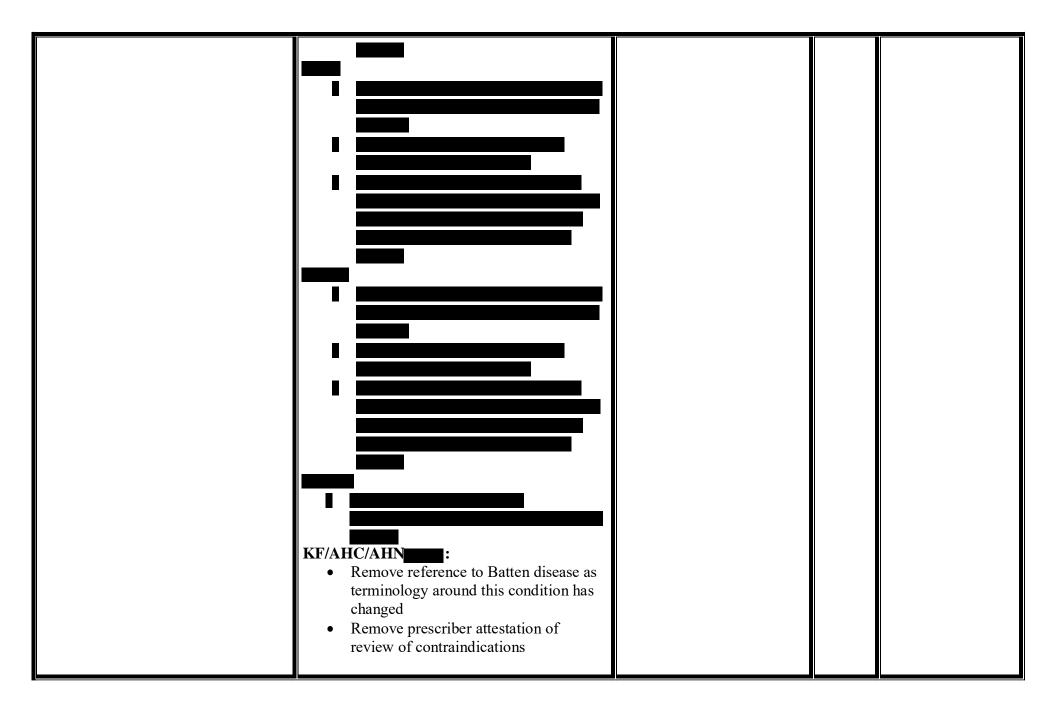




9. Prior Authorization Criteria Review		
Prior Authorization Annual Criteria		



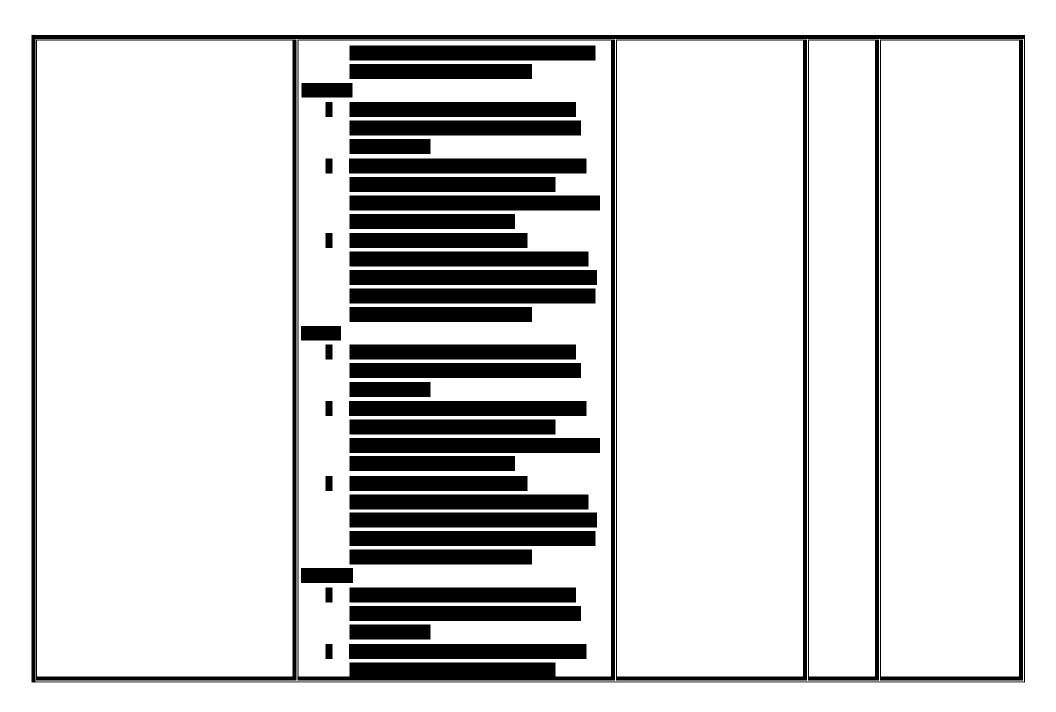
Brineura	PerformRx makes the following recommendation:	Committee approved as recommended Motion: Wayne Weart Second: Lavdena Orr	PerformRx will update the criteria and formulary/PDL with any changes

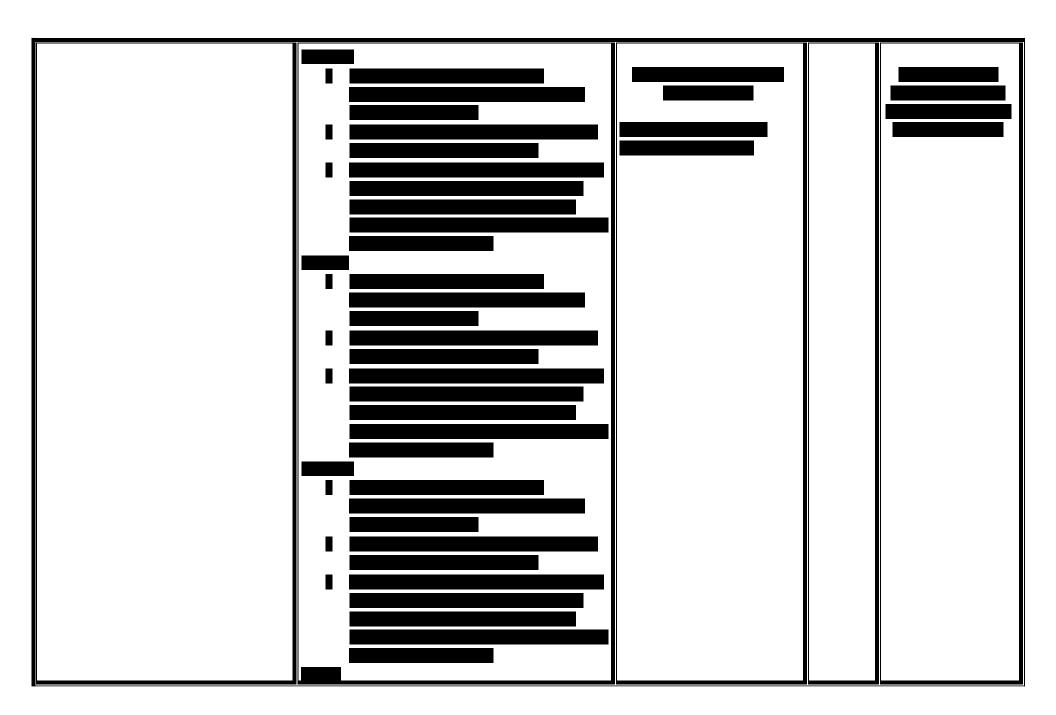


Exondys 51	PerformRx makes the following recommendation:	Committee approved as recommended Motion: Wayne Weart Second: Lavdena Orr	PerformRx will update the criteria and formulary/PDL with any changes

KF/AHC/AHN: • Approve the Exondys 51 (eteplirsen) prior authorization criteria with no clinical changes		







Synagis	PerformRx makes the following recommendation:	Committee approved as recommended Motion: David Batluck Second: Don Cooper	PerformRx will update the criteria and formulary/PDL with any changes

 KF/AHC/AHN Re-formatting to align with Enterprise format Modify chronic lung disease verbiage Remove the excluded disease states, as the indications laid out in the Other Criteria section include the covered indications. Define all abbreviations Moving criteria for indications where Synagis can be considered to the appropriate section based on ag 		

Vimizim	PerformRx makes the following recommendation: KF/AHC/AHN • Remove the reauthorization requirement for continuous	Committee approved as recommended	PerformRx will update the criteria and formulary/PDL with any changes

improvement in 6 minute walk tests for	Motion: David Batluck	
each renewal request, as this treats a	Second: Don Cooper	
progressive disorder where sustained		
improvement compared to baseline is the goal.		
 Add alternative criteria for members new 		
to the plan who may not have done a 6-		
minute walk test at baseline		
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B. Prior Authorization New Criteria			
Increlex	PerformRx makes the following recommendation: KF/AHC/AHNE • Approve the newly developed Increlex prior authorization criteria	Committee approved as recommended Motion: Wayne Weart Second: Don Cooper	PerformRx will update the criteria and formulary/PDL with any changes

Mucopolysaccharidosis II (Hunter Syndrome) Agents	PerformRx makes the following recommendation: KF/AHC/AHNE: • Approve the newly developed Mucopolysaccharidosis II (Hunter Syndrome) Agents prior authorization criteria	Committee approved as recommended Motion: Wayne Weart Second: Don Cooper	PerformRx will update the criteria and formulary/PDL with any changes

Remdesivir	PerformRx makes the following recommendation: KF/AHC/AHNE: • Approve the Remdesivir Medical-Pharmacy prior authorization criteria	Committee approved as recommended Motion: Wayne Weart Second: Robert Hockmuth ,	PerformRx will update the criteria and formulary/PDL with any changes
10. Recalls	Metformin Extended Releases 500mg and 1.000mg tablets ongoing recall across manufactures.	Informational	Sheena Cherian

11. Adjournment			William Burnham
	The meeting adjourned at 7:32 PM EST	N/A	The next meeting October 26, 2020 from 6:00 PM- 8:00 PM.

Willia D Bahang

 $\frac{10/27/2020}{\text{Date}}$