

**Enterprise P&T Meeting
Committee Meeting Minutes
Email Proxy Vote December 3, 2020**

Committee Member	Approved	Reject	Excused	Committee Member	Approved	Reject	Excused
Christopher Antypas, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Emily Kryger, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David Batluck, DO	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kelly Martin, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Donald Beam, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Susan McAllister, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Floyd (John) Brinley, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kendra Michael, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
William Burnham, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Betty Muller, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cathryn Caton, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Michelle Murphy, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kirt Caton, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lavdena Orr, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Don Cooper, RPh	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Eric Peters, PharmD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Tracey Davis, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Andrew Peterson, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rogers Elebra, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	David Petkash, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fury Fecondo, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Kirby Smith, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lily Higgins, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wayne Weart, PharmD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Robert Hockmuth, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Rani Whitfield, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Karen Jordan, MD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Rodney Wise, MD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Item	Recommendations	Vote Results	Action/ Person Responsible
Criteria Recommendation: Plan specific prior authorization criteria update	PerformRx recommends approving prior authorization criteria for AHC with the following changes: <ol style="list-style-type: none"> 1. Removing Narrow Therapeutic Index exclusion due to drugs being managed by the state PDL the Brand Drug and Non-Specialty Reference Biologics criteria. 2. Prefer Gamunex-C where applicable for the Immune Globulins criteria. 	Total Sent – 28 Total Responses – 18 Approved – 18 Rejected – 0 Excused – 10 End: 12/16/2020	PerformRx will implement the criteria per the outcome of the committee vote. The vote has been approved with 18 approvals and no rejections received.
Criteria Recommendation: Plan specific prior authorization criteria update	PerformRx recommends approving the Oncology Drugs prior authorization criteria for AHC with the following changes: <ol style="list-style-type: none"> 1. Prefer generic abiraterone acetate 250 mg tablets over brand Zytiga 500 mg tablets 	Total Sent – 28 Total Responses – 18 Approved – 18 Rejected – 0 Excused – 10 End: 12/16/2020	PerformRx will implement the criteria per the outcome of the committee vote. The vote has been approved with 18 approvals and no rejections received.
Criteria Recommendation: Plan specific prior authorization criteria update	PerformRx recommends the following prior authorization criteria updates for AHC <ol style="list-style-type: none"> 1. Veklury Medical-Pharmacy criteria: Added reference to newly developed Emergency Use Authorization (EUA) Drugs/Products for COVID-19 policy for Emergency Use Authorizations for Veklury. 2. Approve the newly Developed Emergency Use Authorization (EUA) Drugs/Products for COVID-19 Medical-Pharmacy prior authorization criteria. 	Total Sent – 28 Total Responses – 18 Approved – 18 Rejected – 0 Excused – 10 End: 12/16/2020	PerformRx will implement the criteria per the outcome of the committee vote. The vote has been approved with 18 approvals and no rejections received.

William D. Burnham MD

12/18/2020

William Burnham, MD, FAAFP, CPE - Chair

Date