DEPARTMENT OF HUMAN SERVICES Pharmacy & Therapeutics Committee Recommendations May 16, 2018

Committee Members Present:

Cheston Berlin, Jr., M.D	Pediatrician
Christopher Casella, Pharm.D.	Health Partners of Philadelphia Pharmacist
Terri Cathers, Pharm.D., Chair	OMAP Pharmacy Director
Sharon Connor, Pharm.D.	Academic Pharmacist
Jessica Daw, Pharm.D.	UPMC For You Pharmacist
Andrea Fox, M.D.	Internist
Donald Gerhart, R.Ph.	Community Pharmacist
James Hancovsky, R.Ph., MBA	United Health Care Pharmacy Director
David Kelley, M.D.	OMAP Chief Medical Officer
Jaymie Lako, Pharm.D.	Gateway Health Plan Pharmacist
Andrew Maiorini, Pharm.D.	Keystone/AmeriHealth Perform Rx Clinical Pharmacist
Meghan McNelly, Pharm.D.	PA Health & Wellness Pharmacist
Michele Musheno, R.Ph., M.S.	Academic/Hospital Pharmacist
Natalie Nkurunziza, Pharm.D.	Aetna Better Health Pharmacist
lan Paul, M.D.	Pediatrician
Adam Raphael Rom, M.D.	Family Practitioner
Kevin Szczecina, R.Ph.	Geisinger Health Plan Pharmacist
Andreas Wali, M.D.	Cardiologist
Lloyd Wertz	Consumer/Family Advocate

Committee Members Not Present:

Ivonne Acrich, M.D. Ad Hoc Child/Adolescent Psychiatrist David Haverstick, M.D. Family Practitioner Rosemary Keffer, M.D. Ad Hoc Adult Psychiatrist

Public Testimony Heard by the Committee:

Domenic Mantell (Novartis) - Entresto Karen Campbell (Allergan) - Botox Jay Moon (PTC Therapeutics) - Emflaza Amit Duggal (Gilead) – Vemlidy Tre Alexander (Prison Linkages Consultant Group) – HIV Prevention/Treatment/Access Paul Amato (Viiv) – Juluca Mark Veerman (Janssen) – Prezcobix Michael Raffaele (Sanofi Genzyme) – Dupixent Fawad Malik (Teva) – Austedo Carolyn McMicken (Neurocrine Biosciences) – Ingrezza Edward Casey (Pfizer) – Lyrica CR

Welcome and Introduction	Dr. Terri Cathers welcomed the Committee and the members introduced themselves.		
Approval of November 2017 Minutes	The Committee unanimously approved the minutes from the November 2017 meeting without revision.		
Drug Class Reviews, Public Tes	Drug Class Reviews, Public Testimony, Discussion and Voting:		
Acne Agents, Topical	The Committee reviewed the Acne Agents, Topical class and unanimously approved moving clindamycin-benzoyl peroxide gel (generic Duac) to preferred status and changing Benzaclin gel, dapsone gel, tazarotene cream and adapalene-benzoyl peroxide gel to non-preferred status.		
Analgesics, Non-Opioid Barbiturate Combinations	The Committee reviewed the Analgesics, Non-Opioid Barbiturate Combinations class and unanimously approved changing butalbital/acetaminophen/caffeine tablet and butalbital/aspirin/caffeine tablet to preferred status. All drugs in this class require clinical prior authorization.		
Analgesics, Opioid Long-Acting	The Committee reviewed the Analgesics, Opioid Long-Acting class and unanimously approved changing Kadian, Arymo ER and Morphabond ER to non-preferred Status.		
Analgesics, Opioid Short-Acting	The Committee reviewed the Analgesics, Opioid Short-Acting class and unanimously approved moving Oxaydo and Panlor to non-preferred status.		
Angiotensin Modulators	The Committee reviewed the Angiotensin Modulators class and discussed the current prior authorization guidelines for Entresto. Ultimately, the Committee unanimously voted to make no changes to the PDL and to refer the Entresto prior authorization guidelines to the DUR Board for review.		
Antibiotics, GI and Related Agents	The Committee reviewed the Antibiotics, GI and Related Agents class and unanimously approved adding Zinplava to the PDL with non-preferred status. The Committee discussed the new treatment guidelines for <i>Clostridium difficile (C. diff)</i> infection and the role of Dificid. A motion was made to move Dificid to Preferred Status. After continued discussion regarding the place in therapy of Dficid and also antibiotic resistance, the motion was withdrawn.		
Antifungals, Topical	The Committee reviewed the Antifungals, Topical class and unanimously approved adding butenafine cream to the PDL with non-preferred status.		
Antimigraine Agents, Triptans	The Committee reviewed the Antimigraine Agents, Triptans class and unanimously approved the following: moving Zomig Nasal Spray to preferred status and moving eletriptan tablets and sumatriptan/naproxen tablets to non-preferred status.		
Antipsoriatics, Oral	The Committee reviewed the Antipsoriatics, Oral class and unanimously approved moving acitretin capsules to preferred status and Soriatane to non-preferred status.		
Antipsoriatics, Topical	The Committee reviewed the Antipsoriatics, Topical class and unanimously approved changing tazarotene cream to non- preferred status.		
Beta-Blockers	The Committee reviewed the Beta Blockers class and unanimously approved adding carvedilol ER to the PDL with non- preferred status.		

Bone Resorption Suppression and Related Agents	The Committee reviewed the Bone Resorption Suppression and Related Agents class and unanimously approved the following: changing ibandronate tablet to preferred status and adding Tymlos to the PDL with non-preferred status.
Botulinum Toxins	The Committee reviewed the Botulinum Toxins class and unanimously approved no changes to the class.
Calcium Channel Blockers	The Committee reviewed the Calcium Channel Blockers class and unanimously approved the following changes: verapamil ER 360 mg capsules to preferred status and diltiazem ER 12 hr and nicardipine to non-preferred status.
Colony Stimulating Factors	The Committee reviewed the Colony Stimulating Factors class and unanimously approved no changes to the class.
Contraceptives, Oral	The Committee reviewed the Contraceptives, Oral class and approved the following: preferred status for Philith, levonorgestrel-eth estradiol monophasic, Vyfemla, Lillow, Kimidess, Bekyree, Kariva, Azurette, Viorele, Pimtrea, Tri Femynor, levonorgestrel-eth estradiol triphasic, Jolessa, levonorgestrel-eth estradiol 3 month, Norlyda and Camila and non-preferred status for Vylibra, Mibelas 24 Fe, Melodetta 24 Fe, Tydemy, Tri-Vylibra, Rivelsa, Fayosim, Kaitlib Fe, and Camrese.
Fluoroquinolones, Oral	The Committee reviewed the Fluoroquinolones, Oral class and unanimously approved adding Baxdela to the PDL with non-preferred status.
Glucocorticoids, Oral	The Committee reviewed the Glucocorticoid, Oral class and discussed the use of steroids for DMD and the prior authorization guidelines for Emflaza. The Committee unanimously approved adding Taperdex and Emflaza to to the PDL with non-preferred status.
Hepatitis B Agents	The Committee reviewed the Hepatitis B Agents class and unanimously approved moving entecavir to preferred status, moving Baraclude to non-preferred status, and adding tenofovir disoproxil fumarate to the PDL at non-preferred status.
Hepatitis C Agents	The Committee reviewed the Hepatitis C Agents class and unanimously approved no changes to the class.
Hereditary Angioedema (HAE)	The Committee reviewed the Hereditary Angioedema (HAE) class and unanimously approved adding Haegarda to the PDL with preferred status.
HIV/AIDS	The Committee reviewed the HIV/AIDS class and approved the following: abacavir solution, Cimduo, Symfi Lo, Symfi, Complera, Biktarvy to preferred status and ritonavir, fosamprenavir, atazanavir, tenofovir disoproxil fumarate, efavirenz, Isentress HD, Juluca, Selzentry solution to non-preferred status.
Immunomodulators, Atopic Dermatitis	The Committee reviewed the Immunomodulators, Atopic Dermatitis class and approved adding Eucrisa to the PDL with preferred status and a clinical prior authorization, changing Protopic to preferred Status, and adding Dupixent to the PDL with non-preferred status. The Committee also reviewed proposed revisions to the prior authorization guidelines for Immunomodulators, Atopic Dermatitis. Clinical prior authorization guidelines were proposed for Eucrisa. The Committee recommended therapeutic failure, contraindication or intolerance to a preferred topical calcineurin inhibitor prior to use of Eucrisa. The Committee approved the prior authorization guidelines which will be presented at the June 2018 Medical Assistance Advisory Committee (MAAC) meeting for public comment.
Immunosuppressives, Oral	The Committee reviewed the Immunosuppressives, Oral class and unanimously approved moving cyclosporine capsules and mycophenolic acid DR tablet to preferred status and changing Gengraf solution to non-preferred status.

Iron, Oral	The Committee reviewed the Iron, Oral class and unanimously approved the following: Purevit Dual Fe Plus to preferred status and Iron Chews Pediatric, Ferralet 90, Triferic Powder to non-preferred status.
Lipotropics, Other Non-Statins	The Committee reviewed the Lipotropics, Other class and unanimously approved the following: Welchol Powder, fenofibrate 48 and 145 mg, ezetimibe, omega-3 acid ethyl esters and Praluent to preferred status and Zetia and Tricor to non-preferred status.
Lipotropics, Statins	The Committee reviewed the Lipotropics, Statins class and unanimously approved adding ezetimibe/simvastatin to the PDL with non-preferred status.
Monoclonal Antibodies,Anti- IL,Anti-IgE	The Committee reviewed the Monoclonal Antibodies,Anti-IL,Anti-IgE class and unanimously approved adding this new class to the PDL with Xolair and Nucala at preferred status and Cinqair and Fasenra to non-preferred Status. The Committee recognized that while this is a new PDL class clinical prior authorization is already in place for these agents. Dr Laura Zulli presented prior authorization guideline revisions for this class. The Committee unanimously approved the guidelines which will be presented at the June 2018 MAAC meeting for public comment.
Neuropathic Pain Agents	The Committee reviewed the Neuropathic Pain Agents class and unanimously approved moving Savella to preferred status and adding Lyrica CR to the PDL at non-preferred status.
NSAIDs	The Committee reviewed the NSAIDs class and unanimously approved moving the following drugs to preferred status: naproxen suspension, diclofenac sodium ER tablet, sulindac, Flector Patch, naproxen sodium DS tablet and celecoxib. The Committee also unanimously voted to move Nalfon to non-preferred status.
Oncology Agents, Oral	The Committee reviewed the Oncology Agents, Oral class and approved preferred status for the following drugs: Alunbrig, Nerlynx, Erleada, Rubraca, Rydapt, Zejula, Verzenio, Calquence, Kisqali Femara, Kisqali and Idhifa.
Prenatal Vitamins	The Committee reviewed the Prenatal Vitamins class and unanimously approved moving O-Cal FA and Vol-Plus to preferred status and moving Folivane-OB, Taron-C DHA, Elite-OB, Ultimatecare One, Taron-Prex Prenatal, Dothelle DHA Virt-Nate DHA, Zatean-PN DHA and Zatean-PN Plus to non-preferred status.
Steroids, Topical	The Committee reviewed the Steriods, Topical class and unanimously approved changing betamethasone dipropionate cream and lotion to preferred status, moving clobetasol propionate foam and clobetasol emollient foam to non-preferred status, and adding hydrocortisone butyrate lotion and flurandrenolide ointment to the PDL at non-preferred status.
Tetracyclines	The Committee reviewed the Tetracyclines class and unanimously approved adding Ximino ER to the PDL at non- preferred status.
VMAT2 Inhibitors	The Committee reviewed the VMAT2 Inhibitors class and unanimously approved adding this new class to the PDL with Xenazine at preferred status and Austedo, Ingrezza and tetrabenazine at non-preferred status.

PDL Classes with No Recommended Changes and No Testimony	There were no recommended changes and no testimony for the following PDL classes: Angiotensin Modulator Combinations; Antibiotics, Inhaled; Antibiotics, Topical; Antibiotics, Vaginal; Antifungals, Oral; Antihypertensives, Sympatholytic; Antimigraine Agents, Other; Antiparasitics, Topical; Antivirals, Oral; Antivirals, Topical; Bile Salts; Bladder Relaxant Preparations; BPH Treatment; Cephalosporins and Related Antibiotics; Contraceptives, Other; Emollients; Enzyme Replacement, Gauchers Disease; Epinephrine, Self-Injected; Erythropoiesis Stimulating Proteins; Idiopathic Pulmonary Fibrosis; Immunomodulators, Topical; Intra-Articular Hyaluronates; Iron, Parental; Macrolides/Ketolides; Nitrofuran Derivatives; Oncology Agents, Breast Cancer; Skeletal Muscle Relaxants; Thalidomide and Derivatives; Thyroid Hormones; and Vasodilators, Coronary. The Committee unanimously recommended no changes to these classes.
Additional Prior Authorization Guideline Revisions	 Dr. Cathers also presented proposed prior authorization guideline revisions related to the prior authorization of non-preferred medications in certain PDL classes. Bone Resorption Suppression and Related Agents – Dr. Cathers proposed to remove the Evista "grandfathering" clause within the prior authorization guidelines. The Committee unanimously approved this recommendation. Enyzme Replacement, Gauchers Disease; Idiopathic Pulmonary Fibrosis; Oncology Agents, Oral and Thalidomide and Derivatives – Dr. Cathers proposed a new prior authorization guideline to address patients already taking non-preferred medications in these classes. The guideline related to non-preferred status would now read: "whether the beneficiary has a history of therapeutic failure, contraindication or intolerance to the preferred agents in the PDL class or the beneficiarly has been on the same non-preferred agent within the past 90 days." Dr. Cathers reminded the Committee that clinical prior authorization guidelines would apply, but beneficiaries would not be required to change to a preferred agent if they are already taking the requested non-preferred agent. The Committee approved the proposed changes which will be presented at the June 2018 MAAC meeting for public comment.
Meeting Adjourned	Dr. Cathers thanked the Committee for their participation and adjourned the meeting.