## Pharmacy Services
**San Francisco Health Plan Pharmacy & Therapeutics Committee**

**Wednesday, April 17, 2019**  
**7:30AM – 9:30AM**  
**50 Beale St., 13th Floor, San Francisco, CA 94119**

| Meeting called by: | James Glauber, MD | Minutes: Sheila Zeno, CPhT (SFHP Pharmacy Analyst)  
Back-up: Rudy Wu, CPhT (SFHP Pharmacy Analyst) |
| Meeting Objective: | Vote on proposed formulary and prior authorization (PA) criteria changes | Type of meeting: Quarterly |
| Attendees: | Voting Members:  
James Glauber, MD (SFHP Chief Medical Officer)  
Lisa Ghotbi, Pharm. D (SFHP Director of Pharmacy)  
Nicholas Jew, MD  
Joseph Pace, MD  
Ronald Ruggiero, Pharm. D  
Jamie Ruiz, MD  
Ted Li, MD  
Maria Lopez, Pharm. D  
Linda Truong, Pharm. D  
Robert (Brad) Williams, MD  
Steven Wozniak, MD | Others in Attendance:  
Kaitlin Hawkins, Pharm. D (SFHP Pharmacist)  
Ralph Crowder, R.Ph (SFHP Pharmacist)  
Jessica Shost, Pharm. D (SFHP Pharmacist)  
Kent Truong, Pharm. D (SFHP Resident Pharmacist)  
Jenna Heath, Pharm. D (PerformRx Pharmacist)  
Patrick DeHoratius, Pharm. D (PerformRx Pharmacist) |
| | | Guests:  
Mike Pratscher- Osiris  
Scott Stepien- Osiris  
Brittany Speer- Lilly  
Chris Tanaka- Dexcom |
| Members Absent: | Shawn Houghtaling, Pharm. D |
| Meeting Materials: | Summary of all approved changes are posted under “Materials” section at https://www.sfhp.org/files/meeting_agendas/PnT_Committee/PnTMaterialsJanuary2019.pdf  
SFHP formulary is located at https://www.sfhp.org/providers/pharmacy-services/sfhp-formulary/  
SFHP prior authorization criteria are located at https://www.sfhp.org/files/providers/formulary/SFHP_Prior_Auth_Criteria.pdf |

### Agenda Topics

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| 1. Call to Order | James Glauber, MD | The meeting was called to order at 7:33 am.  
- Conflict of interest check  
- Agenda overview | Conflict of Interest checked and instructions given. Introduction agenda topics done. |
| 2. Informational Updates | Lisa Ghotbi, Pharm. D | Topics:  
- April 2019 Pharmacy Director’s report  
  - 2019 Brand Price Increases  
    - PBM - PerformRx Re-contracting and Re-Implementation  
    - 24/7/365 phone support for member with pharmacy benefit inquiries  
  - First Annual DUR (Drug Utilization Review) Report | A handout of the director’s report was given to the committee members at the meeting. |
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<td>A 40 page report with five evidence attachments submitted to DHCS on March 21 and accepted with this response by DHCS staff: “We were blown away by the scope and depth of your DUR report and attachments, and the excellent program you have at SFHP.”</td>
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<td>Executive Order N-01-19</td>
<td>Within the executive order, the governor has ordered the carve-out of the pharmacy benefit for Medicaid and to lay a formation for single-payer by 2021. He wants to use the buying power of California to deal with the trends of increasing prices for drugs especially Specialty drugs.</td>
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<td>SFHP representatives are participating in meetings with DHCS and legislators.</td>
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<td>SFHP supports the EO financial goals but:</td>
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<td>• concern for real-time access and benefit management by plans</td>
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<td>• concern for the loss of Knox-Keene member protections</td>
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<td>• concern for a clinically sound formulary and medication accessibility</td>
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<td>Annual Formulary Review (A summary handout was given to the committee members at the meeting)</td>
<td>Lisa Ghotbi, Pharm. D</td>
<td>The committee approved the Annual Review as presented.</td>
<td>VOTE: Review and Approval of 2018 Annual Formulary Review Approved recommendations as presented. Motion: Robert (Brad) Williams, MD 2nd: Ronald Ruggiero, Pharm. D Vote: Unanimous approval (8/8) (Other members arrived afterwards)</td>
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<td>Review and Approval of January 16, 2019 P&amp;T minutes (pp.5 - 13 of April 2019 P&amp;T Packet)</td>
<td>James Glauber, MD</td>
<td>The committee approved the minutes as presented.</td>
<td>VOTE: Review and Approval of January 16, 2019 P&amp;T Minutes Approved recommendations as presented. Motion: Ronald Ruggiero, Pharm. D 2nd: Maria Lopez, Pharm. D Vote: Unanimous approval (9/9) (Other members arrived afterwards)</td>
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<td>Discussion and Recommendation for Change to SFHP Formulary and Prior Authorization Criteria for Select Drug Classes.</td>
<td>Kaitlin Hawkins, Pharm. D</td>
<td>The following drug classes were reviewed for pertinent literature (including meta-analyses and pivotal clinical trials), guideline updates, and drug additions to or removals from market since last class review.</td>
<td>VOTE: Formulary Maintenance Items: Approved recommendations as presented.</td>
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****Adjourn to Closed Session****

Closed Session pursuant to Welfare and Institutions Code Section 14087.36 (w)
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<td><strong>Formulary Maintenance Items:</strong> &lt;br&gt;Endocrinology: Enzyme Therapy &lt;br&gt;(pp.14 - 27 of April 2019 P&amp;T Packet)</td>
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<td>Major recommendations included the following:&lt;br&gt;<strong>Last reviewed:</strong> April 2017&lt;br&gt;<strong>Formulary Update:</strong>&lt;br&gt;(Medi-Cal, Healthy Kids HMO, and Healthy Workers HMO)&lt;br&gt;• None&lt;br&gt;<strong>Prior Authorization Criteria Update:</strong>&lt;br&gt;• None&lt;br&gt;<strong>Drug Utilization Review Update:</strong>&lt;br&gt;• None&lt;br&gt;<strong>Committee Discussion:</strong>&lt;br&gt;The committee had no comments or questions.</td>
<td><strong>Motion:</strong> Ted Li, MD&lt;br&gt;<strong>2nd:</strong> Joseph Pace, MD&lt;br&gt;<strong>Vote:</strong> Unanimous approval (11/11)</td>
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<td>6. <strong>Formulary Maintenance Items:</strong> &lt;br&gt;Endocrinology: Antidiuretic Hormone &lt;br&gt;(pp.14 - 27 of April 2019 P&amp;T Packet)</td>
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<td><strong>Last reviewed:</strong> April 2017&lt;br&gt;<strong>Formulary Update:</strong>&lt;br&gt;(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &amp; Healthy San Francisco)&lt;br&gt;• None&lt;br&gt;<strong>Prior Authorization Criteria Update:</strong>&lt;br&gt;• Remove parenteral desmopressin listing from criteria due to lack of utilization and availability through the medical benefit&lt;br&gt;<strong>Drug Utilization Review Update:</strong>&lt;br&gt;• None&lt;br&gt;<strong>Committee Discussion:</strong>&lt;br&gt;The committee had no comments or questions.</td>
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<td>7. <strong>Formulary Maintenance Items:</strong> &lt;br&gt;Dermatology: Atopic Dermatitis &lt;br&gt;(pp.14 - 27 of April 2019 P&amp;T Packet)</td>
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<td><strong>Last reviewed:</strong> July/October 2017&lt;br&gt;<strong>Formulary Update:</strong>&lt;br&gt;(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &amp; Healthy San Francisco)&lt;br&gt;• Add Dupixent® (dupilumab) to formulary tier 4 with PA required and restricted to specialty network&lt;br&gt;<strong>Prior Authorization Criteria Update:</strong>&lt;br&gt;• Update Atopic Dermatitis criteria to remove requirement of prior trial with Eucrisa® (crisaborole) for Dupixent® use, and include newly approved age group for Dupixent®&lt;br&gt;<strong>Drug Utilization Review Update:</strong>&lt;br&gt;• None&lt;br&gt;<strong>Committee Discussion:</strong>&lt;br&gt;The committee had no comments or questions.</td>
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<td>8. <strong>Formulary Maintenance Items:</strong> &lt;br&gt;Dermatology: Psoriasis (traditional therapies) &lt;br&gt;(pp.14 - 27 of April 2019 P&amp;T Packet)</td>
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<td><strong>Last reviewed:</strong> July 2017&lt;br&gt;<strong>Formulary Update:</strong>&lt;br&gt;(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &amp; Healthy San Francisco)&lt;br&gt;• Remove step requirement for calcipotriene (Dovonex®) 0.005% cream and ointment and maintained on formulary tier 1 with quantity limit #60 per 30 days&lt;br&gt;• Remove calcitriol ( Vectical®) 3mcg/g ointment from formulary due to lack of utilization and cost-effective</td>
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| **9. Formulary Maintenance Items:**  
Cardiology: Dyslipidemia  
(pp.14 - 27 of April 2019 P&T Packet) | | Last reviewed: January 2018  
(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO & Healthy San Francisco)  
Prior Authorization Criteria Update:  
• None  
Drug Utilization Review Update:  
• None  
Committee Discussion:  
The committee had no comments or questions. | |
| **10. Neurology:**  
Lokelma (Na zirconium cyclosilicate) Monograph  
(pp.28 - 34 of April 2019 P&T Packet) | Kaitlin Hawkins, Pharm. D | The plan presented a monograph and recommendations for Neurology medications.  
Major recommendations included the following:  
Formulary Recommendations:  
(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO & Healthy San Francisco)  
• Add Lokelma™ to formulary tier 2 with quantity limit #35 per 30 days  
• Remove Veltassa® from formulary and grandfather any current users  
Prior Authorization Criteria (PA) Recommendations:  
• None (no active criteria)  
Drug Utilization Review (DUR) Recommendations:  
• None  
Committee Discussion:  
The committee had no comments or questions. | VOTE: Neurology  
Approved recommendations as presented.  
Lokelma (Na zirconium cyclosilicate) Monograph  
Motion: Robert (Brad) Williams, MD  
2nd: Joseph Pace, MD  
Vote: Unanimous approval (11/11) |
| **11. Rheumatology**  
Biologic and Non-Biologic DMARDs Class Review  
(pp.35 - 67 of April 2019 P&T Packet) | Kent Truong, Pharm. D | The plan presented a class review and recommendations for Rheumatology medications.  
Major recommendations included the following:  
Formulary Recommendations:  
(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO & Healthy San Francisco)  
• Add Olumiant® to formulary tier 4 specialty with prior authorization required to ensure appropriate diagnosis, and prefer over Xeljanz® for rheumatoid arthritis based on relative cost-effectiveness and emerging safety data  
• Add Orencia®, Kineret®, Otezla®, Cimzia®, Simponi®, Cosentyx®, and Stelara® to Healthy Workers HMO formulary tier 3 with prior authorization required to align with Medi-Cal and Healthy Kids HMO  
Committee Discussion:  
The committee had no comments or questions. | VOTE: Rheumatology  
Approved recommendations as presented.  
Biologic and Non-Biologic DMARDs Class Review  
Motion: Ronald Ruggiero, Pharm. D  
2nd: Nicholas Jew, MD  
Vote: Unanimous approval (11/11) |
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<td>PA Criteria Recommendations:</td>
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<td>• Update Disease Modifying Biologics to include Ilumya® as non-formulary</td>
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<td>• Update Disease Modifying Biologics to include the following as non-preferred agents due to their expanded FDA-approved indications</td>
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<td>o Polyarticular and Systemic Juvenile Idiopathic Arthritis: Actemra®</td>
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<td>o Psoriatic Arthritis: Taltz® and Xeljanz®</td>
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<td>o Plaque Psoriasis: Cimzia®</td>
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<td>o Ulcerative Colitis: Xeljanz®</td>
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<td>• For the diagnosis of plaque psoriasis and psoriatic arthritis, moved Cosentyx® and Taltz® to parity with Humira® and Enbrel® due long-term safety and efficacy data and superior efficacy compared to older biologic agents</td>
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<td>• For the diagnosis of plaque psoriasis, require light therapy unless contraindicated prior to biologic therapy</td>
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<td>• For the diagnosis of ankylosing spondylitis, move Cosentyx® to parity with Humira® and Enbrel® due to long-term safety and efficacy data</td>
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<td>• Add criteria and dosing for Humira in hidradenitis suppurativa based on FDA indication</td>
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<td>DUR Recommendations:</td>
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<td>• None</td>
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<td>Committee Discussion:</td>
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<td>The committee had no comments or questions.</td>
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<td><strong>12.</strong> <strong>Endocrinology</strong>&lt;br&gt;Osteoporosis Class Review&lt;br&gt;(pp. 68 - 81 of April 2019 P&amp;T Packet)</td>
<td>Kaitlin Hawkins, Pharm. D</td>
<td>The plan presented class reviews and recommendations for Endocrinology medications. Major recommendations included the following:&lt;br&gt;&lt;br&gt; <strong>Formulary Recommendations:</strong>&lt;br&gt;(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &amp; Healthy San Francisco)&lt;br&gt;• Add Tymlos® to formulary and require prior authorization to ensure appropriate diagnosis&lt;br&gt;• Remove Prolia® and Xgeva® injections from formulary as they require administration by a healthcare professional and should be provided via the medical benefit&lt;br&gt;<strong>Prior Authorization Criteria Recommendations:</strong>&lt;br&gt;• Update Forteo® (teriparatide) criteria to include Tymlos® and prefer over Forteo® for postmenopausal osteoporosis&lt;br&gt;• Update Bisphosphonates criteria to reflect current ibandronate formulary status&lt;br&gt;• Retire Prolia® and Xgeva® (denosumab) criteria based on restriction to medical benefit&lt;br&gt;<strong>DUR Recommendations:</strong>&lt;br&gt;• None&lt;br&gt;<strong>Committee Discussion:</strong>&lt;br&gt;The committee had no comments or questions.</td>
<td>VOTE:&lt;br&gt;Endocrinology&lt;br&gt;Approved recommendations as presented.</td>
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<td>Osteoporosis Class Review&lt;br&gt;<strong>Motion:</strong> Ronald Ruggiero, Pharm. D&lt;br&gt;<strong>2nd:</strong> Linda Truong, Pharm. D&lt;br&gt;<strong>Vote:</strong> Unanimous approval (11/11)</td>
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<td><strong>13.</strong> <strong>Endocrinology</strong>&lt;br&gt;Systemic Corticosteroids Abbreviated Class Review&lt;br&gt;(pp. 82 – 88 of April 2019 P&amp;T Packet)</td>
<td>Jenna Heath, Pharm. D</td>
<td>Formulary Recommendations:&lt;br&gt;(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &amp; Healthy San Francisco):&lt;br&gt;• None&lt;br&gt;<strong>PA Criteria Recommendations:</strong>&lt;br&gt;• None&lt;br&gt;<strong>DUR Recommendations:</strong>&lt;br&gt;• None&lt;br&gt;<strong>Committee Discussion:</strong>&lt;br&gt;The committee had no comments or questions.</td>
<td>VOTE:&lt;br&gt;Endocrinology&lt;br&gt;Approve recommendations as presented.</td>
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<td>Systemic Corticosteroids Abbreviated Review&lt;br&gt;<strong>Motion:</strong> Lisa Ghotbi, Pharm. D&lt;br&gt;<strong>2nd:</strong> Ted Li, MD&lt;br&gt;<strong>Vote:</strong> Unanimous approval (11/11)</td>
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<td><strong>14.</strong> <strong>Pulmonology</strong>&lt;br&gt;Asthma/COPD Class Review&lt;br&gt;(pp. 89 - 115 of April 2019 P&amp;T Packet)</td>
<td>Jenna Heath, Pharm. D</td>
<td>The plan presented a class review and recommendations for Pulmonology medications. Major recommendations included the following:&lt;br&gt;&lt;br&gt; <strong>Formulary Recommendations:</strong>&lt;br&gt;(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and Healthy San Francisco):&lt;br&gt;• Remove Spiriva Handihaler® from formulary and prefer Spiriva Respimat® (grandfather current users)&lt;br&gt;<strong>PA Criteria Recommendations:</strong>&lt;br&gt;• Update Inhaled Beta-Adrenergic and Glucocorticoid Combinations (ICS/LABA) PA criteria based on available generic inhalers&lt;br&gt;<strong>DUR Recommendations:</strong>&lt;br&gt;• Consider developing provider education to optimize&lt;br&gt;</td>
<td>VOTE:&lt;br&gt;Pulmonology&lt;br&gt;Approve recommendations as presented.</td>
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<td>Asthma/COPD Class Review&lt;br&gt;<strong>Motion:</strong> Joseph Pace, MD&lt;br&gt;<strong>2nd:</strong> Maria Lopez, Pharm. D&lt;br&gt;<strong>Vote:</strong> Unanimous approval (11/11)</td>
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| **Pulmonary Biologics Review**<br>(pp.116 - 128 of April 2019 P&T Packet) | Jenna Heath, Pharm. D           | **Formulary Recommendations:** (Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and Healthy San Francisco):  
• Add Dupixent® to formulary tier 4 with prior authorization required to ensure appropriate diagnosis and use of preferred therapies as appropriate  
• Remove Xolair® from formulary and remove prior authorization due to preferred alternatives and required administration by a healthcare professional  
**PA Criteria Recommendations:**  
• New criteria is proposed for Dupixent® in asthma  
• Update atopic dermatitis criteria to include “For requests for Dupixent for asthma diagnosis, refer to Pulmonary Biologics criteria”<br>**DUR Recommendations:**  
• None | VOTE: **Pulmonology**<br>Approve recommendations as presented. **Pulmonary Biologics Class Review**<br>**Motion:** Robert (Brad) Williams, MD  
**2nd:** Nicholas Jew, MD  
**Vote:** Unanimous approval (11/11) |
| **Neurology**<br>Tegsedi (inotersen) Monograph<br>(pp.129 - 132 of April 2019 P&T Packet) | Jenna Heath, Pharm. D           | The plan presented a monograph and recommendations for Neurology medications. Major recommendations included the following:  
**Formulary Recommendations:** (Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and Healthy San Francisco):  
• None  
**PA Criteria Recommendations:**  
• None (no active criteria)  
**DUR Recommendations:**  
• None | VOTE: **Neurology**<br>Approve recommendations as presented. **Tegsedi (inotersen) Monograph**<br>**Motion:** Ronald Ruggiero, Pharm. D  
**2nd:** Linda Truong, Pharm. D  
**Vote:** Unanimous approval (11/11) |
| **Immunology**<br>Immunosuppressants Class Review<br>(pp.133 -142 of April 2019 P&T Packet) | Kaitlin Hawkins, Pharm. D       | The plan presented a class review and recommendations for Immunology medications. Major recommendations are listed below:  
**Formulary Recommendations:** (Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and Healthy San Francisco):  
• Add the following drugs to formulary based on utilization and high approval rates:  
  o Zortress® oral tablets (all strengths) to tier 2  
  o sirolimus oral tablets (all strengths to tier 1) | VOTE: **Immunology**<br>Approve recommendations as presented. **Immunosuppressants Class Review**<br>**Motion:** Maria Lopez, Pharm. D  
**2nd:** Jaime Ruiz, MD  
**Vote:** Unanimous approval (11/11) |
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| • Add the following drugs to formulary with age limit based on limited alternatives and high approval limits:  
  o Rapamune® 1mg/mL oral solution to tier 2  
  o cyclosporine modified 100mg/mL oral solution to tier 1  
• Move cyclosporine 25, 100 mg capsules from formulary with prior authorization to non-formulary (T5-NF) due to lack of utilization and available alternatives<br><br>**PA Criteria Recommendations:**  
• Retire Immunosuppressants criteria based on formulary changes above; use blanket criteria for requests outside recommended age limits or for non-formulary drugs<br><br>**DUR Recommendations:**  
• None<br><br>**Committee Discussion:**  
The committee had no comments or questions. |
| Obstetrics & Gynecology  
Endometriosis Class Review  
(pp.143 - 153 of April 2019 P&T Packet) | Kaitlin Hawkins, Pharm. D | The plan presented a class review and recommendations for Immunology medications. Major recommendations are listed below.  
**Formulary Recommendations:**  
(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and Healthy San Francisco):  
• Add Orilissa™ (elagolix) oral tablet to formulary (tier 3) due to limited alternatives available, with prior authorization required to ensure appropriate diagnosis  
• Add Lupron® Depot 3.75 (1-mo) and 11.25mg (3-mos) kits to Healthy Workers HMO formulary tier 3 prior authorization with required to ensure appropriate diagnosis, to align with other lines of business  
• Remove Synarel® nasal spray from formulary due to lack of utilization or requests and cost-effective alternatives available<br><br>**PA Criteria Recommendations:**  
• Update Gonadotropin Releasing Hormone (GnRH) Agonists—Obstetric criteria to include Orilissa™<br><br>**DUR Recommendations:**  
• None<br><br>**Committee Discussion:**  
The committee had no comments or questions. | VOTE:  
Obstetrics & Gynecology  
Approve recommendations as presented.  

**Endometriosis Class Review**  
Motion: Maria Lopez, Pharm. D  
2nd: Jaime Ruiz, MD  
Vote: Unanimous approval (11/11) |
| Drug Utilization Review (DUR)  
• DUR Program Updates  
• Prospective Program Reports  
(pp.1154 - 175 of April 2019 P&T Packet) | Jessica Shost, Pharm. D  
Kaitlin Hawkins, Pharm. D | DUR Program Updates  
Prospective Program Reports:  
• Prospective DUR quarterly report Q3.2018  
• Prospective DUR quarterly report Q4.2018<br><br>**Committee Discussion:**  
The committee requested the Specialty cost to be added to the Pharmacy Trend Report. | Non-Voting Items |

*****RECONVENE IN OPEN SESSION*****
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<td>20. Summary of Closed Session</td>
<td>James Glauber, MD</td>
<td>Reconvened Open session around 9:05 am</td>
<td>Non-voting item</td>
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| 21. Review and Approval of Prior Authorization Criteria Interim Changes (pp.176 – 179 April 2019 P&T Packet) | Kaitlin Hawkins, Pharm. D | The plan presented Prior Authorization interim changes of (New Criteria, Revised Existing Criteria & a table of criteria that were evaluated per the Annual review process where no clinical changes were mad) for review and approval that will be implemented on 2/20/2019: | VOTE: Review and Approval of Prior Authorization Criteria Interim Changes  
Approve recommendations as presented.  
Motion: Ronald Ruggiero, Pharm. D  
2nd: Jaime Ruiz, MD  
Vote: Unanimous approval (11/11) |
| 22. Review and Approval of Interim Formulary Changes and Formulary Placement for New Drugs to Market (pp.180 – 193 of April 2019 P&T Packet) | Kaitlin Hawkins, Pharm. D | The plan presented interim formulary changes and formulary status for new drugs to market.                                                                                                                                 | VOTE: Review and Approval of Interim Formulary Changes and Formulary Placement for New Drugs to Market  
Approve recommendations as presented.  
Motion: Ronald Ruggiero, Pharm. D  
2nd: Jaime Ruiz, MD  
Vote: Unanimous approval (11/11) |
| 23. Informational Update on New Developments in the Pharmacy Market (pp.194 – 200 of April 2019 P&T Packet) | Jenna Heath, Pharm. D     | The plan provided information on new developments in the pharmacy market.                                                                                                                                 | Non-voting item                                                      |
| 24. Adjournment                                                      | James Glauber, MD        | The meeting adjourned at 9:25 am.  
2019 – 2020 P&T Committee Meeting dates are:  
- Wednesday, July 17, 2019  
- Wednesday, October 16, 2019  
- Wednesday, January 15, 2020  
- Wednesday, April 15, 2020 |                                                                                                                                     |

Respectfully submitted by:

James Glauber, MD, MPH  
Chief Medical Officer

April 30, 2019