



Pharmacy Services

San Francisco Health Plan Pharmacy & Therapeutics Committee

Wednesday, July 19, 2017

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) Andrew Costiniano, CPhT (SFHP Pharmacy Specialist)
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) Nicolas Jew, MD Ronald Ruggiero, Pharm. D Robert (Brad) Williams, MD Shawn Houghtaling, Pharm. D. Linda Truong, Pharm. D. Ted Li, MD	Others in Attendance: Kaitlin Hawkins, Pharm. D (SFHP Pharmacist) Ralph Crowder, R.Ph. (SFHP Pharmacist) Tammie Chau, Pharm. D (SFHP Pharmacist) Ryan Cotten, Pharm. D (SFHP Resident Pharmacist) Jessica Shost, Pharm. D (SFHP Resident Pharmacist) Jenna Heath, Pharm. D (PerformRx Pharmacist) Jessica Huang, Pharm. D (Perform Rx Pharmacist) Jennifer Denning (BMS) Mike Barkett (Pfizer) Marc Rueckert (Pfizer) Nene Hardin (Neurocrine Biosciences) Alyssa Grasso (Otonomy) Troy Larsen (Otonomy)
Members Absent:	Joseph Pace, MD Jamie Ruiz, MD Roger Tiao, Pharm. D Steven Wozniak, MD	
Meeting Materials:	Summary of all approved changes are posted under “Materials” section at http://www.sfhp.org/providers/formulary/pharmacy-therapeutics-committee/ SFHP formulary is located at http://www.sfhp.org/providers/formulary/sfhp-formulary/ SFHP prior authorization criteria are located at http://www.sfhp.org/files/providers/formulary/Prior_Auth_Criteria.pdf	

	Topic	Brought By	Time/ Duration	Discussion	Action
1.	Call to Order	James Glauber		The meeting was called to order at 7:30 am.	
2.	Agenda overview and other topics	James Glauber	2 min	Introduction agenda topics.	Conflicts of Interest checked and instructions given.

	Topic	Brought By	Time/ Duration	Discussion	Action
3.	Informational Updates	James Glauber Lisa Ghotbi	10 min	<ul style="list-style-type: none"> In the news the Centers for Disease Control and Prevention (CDC) released the national diabetes statistics underscoring why diabetes medications are #2 in our pharmaceutical spending. The report referred to the number of people with type 2 diabetes and those unaware of their diagnosis: 84 million American adults with pre-diabetes which is (1 out of 3) in the U.S. Transitioning to better news, effective 7/18 Department of Health Care Services (DHCS) will be covering Diabetes Prevention Program(DPP) for Medi-Cal members. There are no details as yet to which type of DPP programs will be covered. Staffing updates: SFHP has 4 new pharmacists: Kaitlin Hawkins our new formulary management pharmacist, Two (2) one-year pharmacy managed care residents Ryan Cotten from University of Minnesota and Jessica Shost from University of California San Francisco , and Tammie Chau, clinical pharmacist (Temp) focusing our Medication Therapy Management (MTM) program. 	
4.	Review and Approval of April 19, 2017 P&T Minutes	James Glauber	2 min	The committee requested no corrections to the minutes.	<p>VOTE: <u>Review and Approval of April 19, 2017 P&T Minutes</u></p> <p><i>Motion:</i> Nicolas Jew; 2nd Brad Williams <i>Vote:</i> Unanimous approval (8/8)</p>
<p>****Adjourn to Closed Session****</p> <p>Closed Session pursuant to Welfare and Institutions Code Section 14087.36 (w)</p>					
5	<p>Discussion and Recommendation for Change to SFHP Formulary and Prior Authorization Criteria for Select Drug Classes</p> <p><u>Gastrointestinal:</u></p> <ul style="list-style-type: none"> Gattex Monograph (FDA-approved in 2012) Xermelo Monograph (FDA-approved 2/28/17) Irritable Bowel Syndrome Class Review Ulcerative Colitis/Crohn's 	Jenna Heath Kaitlin Hawkins	30 min	<p><i>The plan presented therapeutic review and recommendations for Gastrointestinal medications.</i></p> <p><i>Major recommendations included the following:</i></p> <p><u>Formulary Recommendations:</u> (Medi-Cal, Healthy Kids and Healthy San Francisco)</p> <ul style="list-style-type: none"> Remove prior authorization from Linzess® to align with American Gastroenterological Association (AGA) guidelines due to preferred pricing Remove Cesamet® (Nabilone) 1 mg capsule and Tigan® (Trimethobenzamide) 100 mg/mL vial from formulary and remove prior 	<p>VOTE: <u>Gastrointestinal:</u> Approve recommendations with noted changes:</p> <ul style="list-style-type: none"> The required panel test results will be removed from Ocalva criteria for medication consideration. <p><i>Motion:</i> Shawn Houghtaling; 2nd Lisa Ghotbi <i>Vote:</i> Unanimous approval (9/9)</p>

	Topic	Brought By	Time/ Duration	Discussion	Action
	<ul style="list-style-type: none"> ○ Disease Class Review ○ Anti-spasmodics Class Review ○ Anorexia/Weight Gain Class Review ○ Bile Salts Class Review ○ Ammonia Inhibitors Class Review ○ Pancreatic Enzyme Class Review ○ Antiemetic Class Review ○ Miscellaneous GI Medications (abbreviated review) <p><i>(20-155 July of 2017 P&T Packet)</i></p>			<p>authorization due to zero utilization</p> <ul style="list-style-type: none"> ● Add Transderm-Scopolamine to formulary with PA to align with current PA criteria guidelines. (Medi-Cal, Healthy Kids and Healthy Workers) ● Add Cortifoam® to formulary. ● Remove quantity limits from all formulary 5-acetylsalicylic acid (ASA) oral and rectal preparations. ● Remove branded Apriso®, Delzicol® and Uceris® from formulary and prior authorization due to limited utilization. (Medi-Cal, Healthy Kids, Healthy Workers and Healthy San Francisco) ● Remove atropine 0.05 mg/mL syringe from formulary due to zero utilization ● Remove chlordiazepoxide/clidinium from formulary with grandfathering due to very low utilization and the availability of formulary alternative glycopyrrolate, which is more utilized and more cost-effective ● Add Creon® (lipase/protease/amylase) 36-114k DR capsule to formulary due to preferred pricing. ● Remove quantity limits from Creon® and Zenpep® due to preferred pricing. ● Refer to Product Table detailed list of recommended changes (Medi-Cal, Healthy Kids, Healthy Workers and Healthy San Francisco (excluding where OTC exclusion applies)) ● Add lansoprazole capsule (Rx) and Nexium® capsule (OTC) to formulary due to significant utilization and cost-effectiveness. ● Remove the following due to availability of lower cost formulary alternatives and grandfather current users: <ul style="list-style-type: none"> ○ Ranitidine capsule (Rx), 150mg and 300mg ○ Protonix® granule packet ● Add age limit requirement to the following due to availability of lower cost formulary alternatives: <ul style="list-style-type: none"> ○ Famotidine oral suspension ○ Ranitidine oral syrup 	

	Topic	Brought By	Time/ Duration	Discussion	Action
				<ul style="list-style-type: none"> • Add quantity limit requirement to the following due to excessive quantity fills <ul style="list-style-type: none"> ○ Imodium® (loperamide) 2mg capsule, 30 capsules per 30 days • Evaluate chronic use of Proton-pump inhibitors (PPIs) for possible educational campaign. <p><u>PA Criteria Recommendations:</u> (Medi-Cal, Healthy Kids and Healthy San Francisco)</p> <ul style="list-style-type: none"> • Update criteria to reflect formulary status of Linzess®. • New criteria is proposed for alosetron based on indication and AGA guidelines • New criteria proposed for oxandrolone requiring appropriate diagnosis. • Add diagnosis and coverage criteria for postoperative nausea and vomiting (PONV) to Antiemetic/Antivertigo Agents criteria (for aprepitant and netupitant/palonosetron) (Medi-Cal, Healthy Kids and Healthy Workers) <ul style="list-style-type: none"> • Remove prior authorization (PA) criteria for Budesonide and Uceris® • Add ursodiol 500 mg tablet to formulary. • Add Cholbam and Ocalva to formulary and require prior authorization. <p>(Medi-Cal, Healthy Kids, Healthy Workers and Healthy San Francisco)</p> <ul style="list-style-type: none"> • Remove chlordiazepoxide/clidinium from PA criteria • Update criteria for PPI to reflect formulary changes <p><u>Committee Discussion:</u> <i>The committee inquired about why 2 PAs for Linzess® were denied. No specific denial information was available but it was speculated that at least 2 formulary laxatives were not tried. The proposal of updated criteria would address this.</i> <i>Discussion whether panel test results should be required for Ocalva® consideration. The committee decided to remove this requirement. Discussion of following up with a full in-depth clinical review of probiotics at a future P&T</i></p>	

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				meeting.	
	<p><u>Ophthalmics</u></p> <ul style="list-style-type: none"> o Glaucoma Class Review o Mydriatics Class Review o Cystaran Monograph (FDA-approved in 2012) (P156-177 of July 2017 P&T Packet) 		15 min	<p><i>The plan presented therapeutic review and recommendations for Ophthalmic medications. Major recommendations included the following:</i></p> <p><u>Formulary Recommendations:</u> (Medi-Cal, Healthy Kids and Healthy San Francisco)</p> <ul style="list-style-type: none"> • Add a second prostaglandin analog, generic bimatoprost 0.3% drops to formulary • Add the alpha agonist, Alphagan P® (brimonidine) 0.1% drops, to formulary • Add the beta blocker/alpha agonist combination agent, Combigan® (brimonidine/timolol), to formulary. • Remove Lopidine® (apraclonidine) from formulary due to no utilization and limited place in therapy. • Remove carteolol, metipranolol from formulary due to being obsolete. <p>(Medi-Cal, Healthy Kids, Healthy Workers and Healthy San Francisco)</p> <ul style="list-style-type: none"> • Remove Paremyd® (hydroxyamphetamine/tropicamide) from formulary due to zero utilization • Remove tropicamide 0.5% from formulary due to zero utilization <p><u>PA Criteria Recommendations:</u> (Medi-Cal, Healthy Kids and Healthy San Francisco)</p> <ul style="list-style-type: none"> • Remove travoprost (with benzalkonium) 0.004% eye drops from criteria due to product being obsolete <p><u>Committee Discussion:</u> <i>The committee had no comments or questions.</i></p>	<p>VOTE: <u>Ophthalmics</u> Approve recommendations as presented.</p> <p><u>Motion:</u> Nicholas Jew; 2nd Ron Ruggiero <u>Vote:</u> Unanimous approval (9/9)</p>
	<p><u>Dermatology</u></p> <ul style="list-style-type: none"> o Topical Immunomodulators Class Review o Miscellaneous Dermatology Medications (abbreviated review) o Eucrisa Monograph (FDA-approved 12/14/16) (P178-209 of July 2017 P&T) 		15 min	<p><i>The plan presented therapeutic review and recommendations for Dermatology. Major recommendations included the following:</i></p> <p><u>Formulary Recommendations:</u> (Medi-Cal, Healthy Kids, Healthy Workers and Healthy San Francisco (excluding where OTC exclusion applies):</p> <ul style="list-style-type: none"> • Add calcipotriene 0.005% topical solution to formulary due to cost-effectiveness comparable to alternative formulations 	<p>VOTE: <u>Dermatology</u> Approve recommendations as presented.</p> <p><u>Motion:</u> Brad Williams; 2nd Lisa Ghotbi <u>Vote:</u> Unanimous approval (9/9)</p>

	Topic	Brought By	Time/ Duration	Discussion	Action
	Packet)			<ul style="list-style-type: none"> Remove Condylox® (podofilox) gel from formulary due to availability of lower cost formulary alternatives <p><u>PA Criteria Recommendations:</u> (Medi-Cal, Healthy Kids, Healthy Workers and Healthy San Francisco (excluding where OTC exclusion applies):</p> <ul style="list-style-type: none"> Update criteria for Vitamin D Analogs to reflect the addition of Dovonex® (calcipotriene) 0.005% solution on the formulary. <p><u>Committee Discussion:</u> <i>The committee had no comments or questions.</i></p>	
	<p>Otic</p> <ul style="list-style-type: none"> Otic Antibiotic-Steroid Preparations Class Review (P210-218 of July 2017 P&T Packet) 		10 min	<p><i>The plan presented therapeutic review and recommendations for tic medications. Major recommendations are listed below.</i></p> <p><u>Formulary Recommendations:</u></p> <ul style="list-style-type: none"> No recommendations for change. <p><u>PA Criteria Recommendations:</u></p> <ul style="list-style-type: none"> No recommendations for change. <p><u>Committee Discussion:</u> <i>The committee discussed removal of step therapy(ST) on Ciprodex® 0.3%-0.1% ear drops, suspension</i></p>	<p>VOTE: Otic Approve recommendations as presented except step therapy (ST) edit on Ciprodex® 0.3%-0.1% ear drops, suspension.</p> <p><u>Motion:</u> Lisa Ghotbi; 2nd Ted Li <u>Vote:</u> Unanimous approval (9/9)</p>
c.	<p><u>Provider Request for Formulary Modification</u></p> <p>(P219-224 of July 2017 P&T Packet)</p>	Ralph Crowder	10 Mins	<p>The plan discussed requests by providers for formulary inclusion:</p> <p>Anoro Ellipta® (umeclidinium bromide/vilanterol) 62.5-25 mcg inhaler):</p> <p><u>Recommendation:</u></p> <p>Option #1: Add the following product to formulary with prior authorization required:</p> <ul style="list-style-type: none"> Anoro Ellipta® (umeclidinium 62.5 mcg/vilanterol 25 mcg) See attached prior authorization criteria <p>Option #2: ST if following criteria are met:</p> <ul style="list-style-type: none"> Past claims for inhaled corticosteroid steroid (ICS)/ long-acting beta-2 agonist (LABA) combination product OR Past claims for long-acting anti-muscarinic agents (LAMA) OR Past claims for LABA <p><u>Committee Discussion:</u> <i>The committee discussed both options presented and selected Option#2</i></p>	<p>VOTE: <u>Provider Request for Formulary Modification</u></p> <p>Reviewed recommendations as presented and approved Option #2</p> <p><u>Motion:</u> Lisa Ghotbi; 2nd Ted Li <u>Vote:</u> Unanimous approval (9/9)</p>
6.	****RECONVENE IN OPEN SESSION****				
7.	Summary of Closed Session	James Glauber	2 min	Reconvened Open session around 9:15am	<i>Non-voting</i>

	Topic	Brought By	Time/ Duration	Discussion	Action
9.	Pharmacy Policy & Procedure Updates and Monitoring (P220-244 July 2017 P&T Packet)	Lisa Ghotbi	7 min	<i>The plan presented changes to the Pharmacy Policy and Procedures (P&P): Pharm 01- Pharmacy and Therapeutics Committee Pharm 02- Prior Authorization Pharm 14- Pharmacy Drug Utilization Review(DUR) Program</i> For detail of changes, please see pages 220-243 P&T packet. <u>Committee Discussion:</u> <i>The committee discussed briefly the addition to prospective & retrospective DUR and educational program review to be done by the committee per APL 17-008.</i>	VOTE: <u>Pharmacy Policy and Procedure Updates</u> Approve recommendations as presented. <i>Motion:</i> Ted Li; 2 nd Brad Williams <i>Vote:</i> Unanimous approval (9/9)
10.	Review and Approval of Interim Formulary Changes and Formulary Placement for New Drugs to Market (P245-248 of July 2017 P&T Packet)	Kaitlin Hawkins	5 min	<i>The plan presented interim formulary changes and formulary status for new drugs to market.</i> <u>Committee Discussion:</u> <i>The committee had no comments or questions</i>	VOTE: <u>Review and Approval of Interim Formulary Changes and Formulary Placement for New Drugs to Market</u> Approve recommendations as presented. <i>Motion:</i> Lisa Ghotbi; 2 nd Ted Li <i>Vote:</i> Unanimous approval (9/9)
11.	Informational Update on New Developments in the Pharmacy Market (P249-264 of July 2017 P&T Packet)	Jenna Heath	5 min	<i>The plan provided information on new developments in the pharmacy market.</i> <u>Noted:</u> Food and drug Administration (FDA) approved generic Air Duo for patients 12 yrs. & older for asthma.	<i>Non-voting item</i>
12.	Adjournment	James Glauber	2 min	The meeting adjourned at 9:30 am. 2017-18 P&T Committee Meeting dates are: <ul style="list-style-type: none"> • Wednesday, October 18, 2017 • Wednesday, January 17, 2018 • Wednesday, April 18, 2018 • Wednesday, July 18, 2018 	

The meeting was adjourned at 9:30 AM

Respectfully submitted by:



September 18, 2017

James Glauber, MD, MPH
Chief Medical Officer

Date



Pharmacy Services

San Francisco Health Plan Pharmacy & Therapeutics Committee

Interim Vote by email

Completion: Tuesday, August 29, 2017

50 Beale St., 13th Floor, San Francisco, CA 94119

Meeting called by:	James Glauber, MD	Minutes: Sheila Zeno, CPhT (SFHP Pharmacy Analyst)
Meeting Objective:	Vote on proposed formulary and prior authorization(PA) criteria changes	Type of meeting: Ad-Hoc (Email)
Attendees:	<p>Voting Members: James Glauber, MD (SFHP Chief Medical Officer) Lisa Ghotbi, Pharm. D (SFHP Director of Pharmacy) Nicolas Jew, MD Ronald Ruggiero, Pharm. D Robert (Brad) Williams, MD Shawn Houghtaling, Pharm. D. Linda Truong, Pharm. D. Ted Li, MD Jamie Ruiz, MD Steven Wozniak, MD</p>	<p>Others Participants: Kaitlin Hawkins, Pharm. D (SFHP Pharmacist) Ralph Crowder, R.Ph. (SFHP Pharmacist) Tammie Chau, Pharm. D (SFHP Pharmacist) Ryan Cotten, Pharm. D (SFHP Resident Pharmacist) Jessica Shost, Pharm. D (SFHP Resident Pharmacist)</p>
Members Absent:	Joseph Pace, MD	
Meeting Materials:	Summary of all approved changes are posted under “Materials” section at http://www.sfhp.org/providers/formulary/pharmacy-therapeutics-committee/ SFHP formulary is located at http://www.sfhp.org/providers/formulary/sfhp-formulary/ SFHP prior authorization criteria are located at http://www.sfhp.org/files/providers/formulary/Prior_Auth_Criteria.pdf	

	Topic	Brought By	Discussion	Action
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	Topic	Brought By	Discussion	Action
1.	Interim Vote Summary	Kaitlin Hawkins	<p>SFHP Pharmacy & Therapeutics Committee reviewed the interim vote packet pertaining to the newest Hepatitis C drugs, Mavyret and Vosevi. The packet contains a monograph for each of the two new drugs, and an appendix containing our “forecast” of changes to the American Association for the Study of Liver Diseases (AASLD)/ Infectious Diseases Society of America (IDSA) guidelines. The guidelines have not yet been updated to include these drugs, as they were recently approved by the Food and Drug Administration (FDA); the Mavyret™ (FDA-approved 08/03/17) and Vosevi™ (FDA-approved 07/18/17); and added to market in August 2017. However, these drugs will significantly impact treatment of Hepatitis C virus (HCV) for our members and providers; therefore we asked for an <u>interim vote</u> on the formulary and Prior Authorization criteria changes from SFHP Pharmacy & Therapeutics Committee.</p>	<p>Hepatitis C interim vote packet was emailed to the SFHP Pharmacy & Therapeutics Committee on Tuesday, August 22, 2017 for review and vote.</p>
2.	<p>Discussion and Recommendation for Change to SFHP Formulary and Prior Authorization Criteria for Select Drug Classes</p> <p><u>Hepatitis C:</u></p> <ul style="list-style-type: none"> o Mavyret™ Monograph (FDA-approved 08/03/17) o Vosevi™ Monograph (FDA-approved 07/18/17) <p><i>(P 3-36 Interim vote of 2017 P&T Packet)</i></p>	Kaitlin Hawkins Ryan Cotten	<p><i>The plan presented therapeutic review and recommendations for Hepatitis C medications. Major recommendations included the following:</i></p> <p><u>Formulary Recommendations:</u> (Medi-Cal, Healthy Kids and Healthy Workers)</p> <ul style="list-style-type: none"> • Add Mavyret™ to formulary with PA required, as preferred agent for treatment naïve patients with HCV genotypes 1-6, and for select treatment-experienced patients per table below <i>(also add Vosevi™ per separate Monograph)</i> • Add Vosevi™ to formulary with PA required, as preferred agent for select treatment-experienced patients per table below <i>(also add Mavyret™ per separate Monograph)</i> • Keep Eplclusa®, Harvoni®, and Zepatier® on formulary with PA; available for patients unable to use preferred agents due to failure/intolerance/contraindication • Remove the following from formulary: Viekira Pak®, Technivie®, Sovaldi®, Daklinza® <p><u>PA Criteria Recommendations:</u> (Medi-Cal, Healthy Kids and Healthy Workers)</p> <ul style="list-style-type: none"> • Update Hepatitis C prior authorization criteria to include Mavyret™ for non-direct acting 	<p><u>VOTE:</u> <u>Hepatitis C:</u> <u>Motion & Vote:</u> See Voting section below</p>

	Topic	Brought By	Discussion	Action																								
			<p>antivirals (DAA) failure patients <u>Committee Discussion:</u> <i>A committee member asked, "Do you keep track of how many patients that receive the treatment have their Hepatitis C status resolved and how many patients continue with Hepatitis C despite treatment? Unrelated to treatment but you might want to know that people are compliant and there is resolution with the diagnosis." Plan responded, "Right now we don't actively track HCV resolution for our treated patients. We do actively track compliance via Rx filling. We agree that this would be worth looking into and will follow up with our team. Thanks for the input!"</i></p>																									
3.	Committee Voting		<table border="1"> <thead> <tr> <th data-bbox="863 545 1283 605">Committee Member</th> <th data-bbox="1283 545 1425 605">Vote: Y/N</th> </tr> </thead> <tbody> <tr> <td data-bbox="863 605 1283 639">James Glauber, MD</td> <td data-bbox="1283 605 1425 639">Yes</td> </tr> <tr> <td data-bbox="863 639 1283 673">Lisa Ghotbi, Pharm D</td> <td data-bbox="1283 639 1425 673">Yes</td> </tr> <tr> <td data-bbox="863 673 1283 786">Joseph Pace, MD</td> <td data-bbox="1283 673 1425 786">No Response by deadline</td> </tr> <tr> <td data-bbox="863 786 1283 820">R. Brad Williams, MD</td> <td data-bbox="1283 786 1425 820">Yes</td> </tr> <tr> <td data-bbox="863 820 1283 854">Nicholas Jew, MD</td> <td data-bbox="1283 820 1425 854">Yes</td> </tr> <tr> <td data-bbox="863 854 1283 888">Ron Ruggiero, Pharm D</td> <td data-bbox="1283 854 1425 888">Yes</td> </tr> <tr> <td data-bbox="863 888 1283 922">Steven Wozniak, MD</td> <td data-bbox="1283 888 1425 922">Yes</td> </tr> <tr> <td data-bbox="863 922 1283 956">Jaime Ruiz, MD</td> <td data-bbox="1283 922 1425 956">Yes</td> </tr> <tr> <td data-bbox="863 956 1283 990">Shawn Houghtaling, Pharm D</td> <td data-bbox="1283 956 1425 990">Yes</td> </tr> <tr> <td data-bbox="863 990 1283 1024">Ted Li, MD</td> <td data-bbox="1283 990 1425 1024">Yes</td> </tr> <tr> <td data-bbox="863 1024 1283 1058">Linda Truong, Pharm D</td> <td data-bbox="1283 1024 1425 1058">Yes</td> </tr> </tbody> </table>	Committee Member	Vote: Y/N	James Glauber, MD	Yes	Lisa Ghotbi, Pharm D	Yes	Joseph Pace, MD	No Response by deadline	R. Brad Williams, MD	Yes	Nicholas Jew, MD	Yes	Ron Ruggiero, Pharm D	Yes	Steven Wozniak, MD	Yes	Jaime Ruiz, MD	Yes	Shawn Houghtaling, Pharm D	Yes	Ted Li, MD	Yes	Linda Truong, Pharm D	Yes	<p>The interim P&T Committee vote completed on COB Tuesday, August 29th, 2017 resulted in the approval on the recommendation presented that became effective on September 12, 2017.</p> <p><u>Vote: Approval (10/11)</u> *Please note: Dr. Pace failed to respond with vote by posted deadline.</p>
Committee Member	Vote: Y/N																											
James Glauber, MD	Yes																											
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4.	Adjournment		<p>2017-18 P&T Committee Meeting dates are:</p> <ul style="list-style-type: none"> • Wednesday, October 18, 2017 • Wednesday, January 17, 2018 • Wednesday, April 18, 2018 • Wednesday, July 18, 2018 																									

The interim vote was adjourned COB **Tuesday, August 29th, 2017**

Respectfully submitted by:



September 19, 2017

James Glauber, MD, MPH
Chief Medical Officer

Date