SAN FRANCISCO HEALTH PLAN	G(A)

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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/		

	Topic	Brought By	Discussion	Action
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.

SFHP prior authorization criteria are located at https://www.sfhp.org/files/providers/formulary/SFHP_Prior_Auth_Criteria.pdf

		Topic	Brought By	Discussion	Action
3	3.	Annual Formulary Review	Lisa Ghotbi, Pharm. D	to DHCS 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." Executive Order N-01-19 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. SFHP representatives are participating in meetings with DHCS and legislators. SFHP supports the EO financial goals but: concern for real-time access and benefit management by plans concern for the loss of Knox-Keene member protections concern for a clinically sound formulary and medication accessibility The committee approved the Annual Review as presented.	VOTE:
		(A summary handout was given to the committee members at the meeting)			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)
4	1.	Review and Approval of January 16, 2019 P&T minutes (pp.5 - 13 of April 2019 P&T Packet)	James Glauber, MD	The committee approved the minutes as presented.	VOTE: Review and Approval of January 16, 2019 P&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)
			Closed Session nu	****Adjourn to Closed Session**** rsuant to Welfare and Institutions Code Section 14087.36 (w)	
	5 .	Discussion and Recommendation for	Kaitlin Hawkins, Pharm. D	The following drug classes were reviewed for pertinent	VOTE:
		Change to SFHP Formulary and Prior Authorization Criteria for Select Drug Classes.	, -	literature (including meta-analyses and pivotal clinical trials), guideline updates, and drug additions to or removals from market since last class review.	Formulary Maintenance Items: Approved recommendations as presented.

	Topic	Brought By	Discussion	Action
			Major recommendations included the following:	Motion: Ted Li, MD
	Formulary Maintenance Items:		Last reviewed: April 2017	2 nd : Joseph Pace, MD
	Endocrinology: Enzyme Therapy		Formulary Update:	<u>Vote:</u> Unanimous approval (11/11)
	(pp.14 - 27 of April 2019 P&T Packet)		(Medi-Cal, Healthy Kids HMO, and Healthy Workers HMO)	
			None	
			Prior Authorization Criteria Update:	
			• None	
			Drug Utilization Review Update:	
			• None	
			Committee Discussion:	
	F 1 11 11 11		The committee had no comments or questions.	
6.	Formulary Maintenance Items:		Last reviewed: April 2017	
	Endocrinology: Antidiuretic Hormone		Formulary Update:	
	(pp.14 - 27 of April 2019 P&T Packet)		(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &	
			Healthy San Francisco)	
			None None	
			Prior Authorization Criteria Update:	
			Remove parenteral desmopressin listing from criteria due to look of utilization and quality little through the	
			due to lack of utilization and availability through the medical benefit	
			Drug Utilization Review Update:	
			None	
			Committee Discussion:	
			The committee had no comments or questions.	
7.	Formulary Maintenance Items:		Last reviewed: July/October 2017	
''	Dermatology: Atopic Dermatitis		Formulary Update:	
	(pp.14 - 27 of April 2019 P&T Packet)		(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &	
	(pp. 11 21 of the 2010 that the defice)		Healthy San Francisco)	
			Add Dupixent® (dupilumab) to formulary tier 4 with PA	
			required and restricted to specialty network	
			Prior Authorization Criteria Update:	
			Update Atopic Dermatitis criteria to remove	
			requirement of prior trial with Eucrisa® (crisaborole) for	
			Dupixent® use, and include newly approved age group	
			for Dupixent®	
			Drug Utilization Review Update:	
			None	
			Committee Discussion:	
			The committee had no comments or questions.	
8.	Formulary Maintenance Items:		Last reviewed: July 2017	
	<u>Dermatology</u> : Psoriasis (traditional		Formulary Update:	
	therapies)		(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &	
	(pp.14 - 27 of April 2019 P&T Packet)		Healthy San Francisco)	
			Remove step requirement for calcipotriene (Dovonex®)	
			0.005% cream and ointment and maintained on	
			formulary tier 1 with quantity limit #60 per 30 days	
			Remove calcitriol (Vectical®) 3mcg/g ointment from	
			formulary due to lack of utilization and cost-effective	

	Topic	Brought By	Discussion	Action
			alternatives available Prior Authorization Criteria Update: Retire Topical Vitamin D Analogs criteria Drug Utilization Review Update: None Committee Discussion: The committee had no comments or questions.	
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) None 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	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)

Topic	Brought By	Discussion	Action
		(specialty is not utilized for HW) PA Criteria Recommendations: Update Disease Modifying Biologics to include llumya® as non-formulary Update Disease Modifying Biologics to include the following as non-preferred agents due to their expanded FDA-approved indications Polyarticular and Systemic Juvenile Idiopathic Arthritis: Actemra® Psoriatic Arthritis: Taltz® and Xeljanz® Plaque Psoriasis: Cimzia® Ulcerative Colitis: Xeljanz® 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 For the diagnosis of plaque psoriasis, require light therapy unless contraindicated prior to biologic therapy For the diagnosis of ankylosing spondylitis, move Cosentyx® to parity with Humira® and Enbrel® due to long-term safety and efficacy data Add criteria and dosing for Humira in hidradenitis suppurativa based on FDA indication DUR Recommendations: None Committee Discussion: The committee had no comments or questions.	

	Topic	Brought By	Discussion	Action
12.	Endocrinology	Kaitlin Hawkins, Pharm. D	The plan presented class reviews and recommendations for	VOTE:
	Osteoporosis Class Review		Endocrinology medications.	Endocrinology
	(pp.68 - 81 of April 2019 P&T Packet)		Major recommendations included the following:	Approved recommendations as presented.
	,		Formulary Recommendations:	
			(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &	Osteoporosis Class Review
			Healthy San Francisco)	Motion: Ronald Ruggiero, Pharm. D
			Add Tymlos® to formulary and require prior	2 nd : Linda Truong, Pharm. D
			authorization to ensure appropriate diagnosis	Vote: Unanimous approval (11/11)
			Remove Prolia® and Xgeva® injections from formulary	1 - Color Condition of the Color of the Colo
			as they require administration by a healthcare	
			professional and should be provided via the medical	
			benefit	
			Prior Authorization Criteria Recommendations:	
			Update Forteo® (teriparatide) criteria to include	
			Tymlos® and prefer over Forteo® for postmenopausal	
			osteoporosis	
			Update Bisphosphonates criteria to reflect current	
			ibandronate formulary status	
			Retire Prolia® and Xgeva® (denosumab) criteria based	
			on restriction to medical benefit	
			DUR Recommendations:	
			None	
			Committee Discussion:	
			The committee had no comments or questions.	
13.	Endocrinology	Jenna Heath , Pharm. D	Formulary Recommendations:	VOTE:
	Systemic Corticosteroids Abbreviated	·	(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO &	Endocrinology
	Class Review		Healthy San Francisco):	Approve recommendations as presented.
	(pp.82 – 88 of April 2019 P&T		None	
	Packet)		PA Criteria Recommendations:	Systemic Corticosteroids Abbreviated Review
			None	Motion: Lisa Ghotbi, Pharm. D
			DUR Recommendations:	2 nd : Ted Li, MD
			None	<u>Vote:</u> Unanimous approval (11/11)
			Committee Discussion:	
			The committee had no comments or questions.	
14.	<u>Pulmonology</u>	Jenna Heath, Pharm. D	The plan presented a class review and recommendations	VOTE:
	Asthma/COPD Class Review		for Pulmonology medications.	Pulmonology
	(pp. 89 - 115 of April 2019 P&T		Major recommendations included the following:	Approve recommendations as presented.
	Packet)		Formulary Recommendations:	
			(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and	Asthma/COPD Class Review
			Healthy San Francisco):	Motion: Joseph Pace, MD
			Remove Spiriva Handihaler® from formulary and	2 nd : Maria Lopez, Pharm. D
			prefer Spiriva Respimat® (grandfather current users)	<u>Vote:</u> Unanimous approval (11/11)
			PA Criteria Recommendations:	
			Update Inhaled Beta-Adrenergic and Glucocorticoid	
			Combinations (ICS/LABA) PA criteria based on	
			available generic inhalers	
			DUR Recommendations:	
			Consider developing provider education to optimize	

	Topic	Brought By	Discussion	Action
			use of generic ICS/LABA inhalers where appropriate	
			Evaluate member adherence with controller therapy	
			versus rescue therapy use for potential further	
			education	
			Committee Discussion:	
			The committee had no comments or questions.	
15.	<u>Pulmonology</u>	Jenna Heath, Pharm. D	Formulary Recommendations:	VOTE:
	Pulmonary Biologics Class Review		(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and	<u>Pulmonology</u>
	(pp.116 - 128 of April 2019 P&T		Healthy San Francisco):	Approve recommendations as presented.
	Packet)		Add Dupixent® to formulary tier 4 with prior	
	,		authorization required to ensure appropriate diagnosis	Pulmonary Biologics Class Review
			and use of preferred therapies as appropriate	Motion: Robert (Brad) Williams, MD
			Remove Xolair® from formulary and remove prior	2 nd : Nicholas Jew, MD
			authorization due to preferred alternatives and	<u>Vote:</u> Unanimous approval (11/11)
			required administration by a healthcare professional	
			PA Criteria Recommendations:	
			New criteria is proposed for Dupixent® in asthma	
			Update atopic dermatitis criteria to include "For The project for During at for path and diagraphic refer to	
			requests for Dupixent for asthma diagnosis, refer to	
			Pulmonary Biologics criteria" DUR Recommendations:	
			None	
			Committee Discussion:	
			The committee had no comments or questions.	
16.	Neurology	Jenna Heath, Pharm. D	The plan presented a monograph and recommendations for	VOTE:
10.	Tegsedi (inotersen) Monograph	defina Floatii, Friami. B	Neurology medications.	Neurology
	(pp.129 - 132 of April 2019 P&T		Major recommendations included the following:	Approve recommendations as presented.
	Packet)		Formulary Recommendations:	, Approve recommendations are presented.
	racket)		(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and	Tegsedi (inotersen) Monograph
			Healthy San Francisco):	Motion: Ronald Ruggiero, Pharm. D
			None	2 nd : Linda Truong, Pharm. D
			PA Criteria Recommendations:	<u>Vote:</u> Unanimous approval (11/11)
			None (no active criteria)	
			DUR Recommendations:	
			• None	
			Committee Discussion:	
4=	lanar in ala mi	17 18 11 11 51 5	The committee had no comments or questions.	VOTE
17.	Immunology	Kaitlin Hawkins, Pharm. D	The plan presented a class review and recommendations	VOTE:
	Immunosuppressants Class Review (pp.133 -142 of April 2019 P&T		for Immunology medications. Major recommendations are	Immunology Approve recommendations as presented
	(pp.133-142 of April 2019 P&1 Packet)		listed below. Formulary Recommendations:	Approve recommendations as presented.
	i doket)		(Medi-Cal, Healthy Kids HMO, Healthy Workers HMO and	Immunosuppressants Class Review
			(Meal-Cal, Healthy Rius HMO, Healthy Workers HMO and Healthy San Francisco):	IIIIIIIUIIUSUPPIESSAIIIS CIASS REVIEW
			Troditry Odit i talioiscoj.	Motion: Maria Lopez, Pharm. D
			Add the following drugs to formulary based on	2 nd : Jaime Ruiz, MD
			utilization and high approval rates:	Vote: Unanimous approval (11/11)
			 Zortress[®] oral tablets (all strengths) to tier 2 	Total Straining approval (11/11)
			o sirolimus oral tablets (all strengths to tier 1	
		l	o on ominate oral tableto fall offering the field i	

	Topic	Brought By	Discussion	Action
	Topic	Brought By	Add the following drugs to formulary with age limit based on limited alternatives and high approval limits:	Action
18.	Obstetrics & Gynecology Endometriosis Class Review (pp.143 - 153 of April 2019 P&T Packet)	Kaitlin Hawkins, Pharm. D	Committee Discussion: The committee had no comments or questions. 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 PA Criteria Recommendations: Update Gonadotropin Releasing Hormone (GnRH) Agonists—Obstetric criteria to include Orilissa™ DUR Recommendations: None 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)
19.	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 Committee Discussion: The committee requested the Specialty cost to be added to the Pharmacy Trend Report. *****RECONVENE IN OPEN SESSION*****	Non-Voting Items
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	Topic	Brought By	Discussion	Action
20.	Summary of Closed Session	James Glauber, MD	Reconvened Open session around 9:05 am	Non-voting item
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: Committee Discussion: The committee had no comments or questions.	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. Committee Discussion: The committee had no comments or questions.	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 Gaules

April 30, 2019

James Glauber, MD, MPH Chief Medical Officer Date