SAN FRANCISCO HEALTH PLAN Here for you	Pharmacy Services San Francisco Health Plan Pharmacy & The Wednesday, October 20, 2021 7:30AM – 9:30AM 50 Beale St., San Francisco, CA 94119 (Held remotely via MS Teams)	In Francisco Health Plan Pharmacy & Therapeutics Committee dnesday, October 20, 2021 DAM – 9:30AM		
Meeting called by:	Lisa Ghotbi, Pharm. D	Minutes: Luke Nelson, CPhT (SFHP Pharmacy Analyst)		
Meeting Objective:	Vote on proposed formulary and prior authorization (PA) criteria changes	Type of meeting: Quarterly		
Attendees:	Voting Members: Lisa Ghotbi, Pharm. D (SFHP Director of Pharmacy) Nicholas Jew, MD Maria Lopez, Pharm. D Ronald Ruggiero, Pharm. D Robert (Brad) Williams, MD Jamie Ruiz, MD Linda Truong, Pharm. D Steven Wozniak, MD	Others in Attendance: Kaitlin Hawkins, Pharm. D (SFHP Pharmacist) Jessica Shost, Pharm. D (SFHP Pharmacist) Tammie Chau, Pharm. D (SFHP Pharmacist) Guests: *No guests due to remote meeting format in response to COVID-19*		
Members Absent:	James Glauber MD Joseph Pace, MD			
Meeting Materials:	Summary of all approved changes is posted under "Materials" section at https://www.sfhp.org/about-us/committees/pharmacy-and-therapeutics-committees/ SFHP formulary and prior authorization criteria are located at https://www.sfhp.org/providers/pharmacy-and-therapeutics-committees/			

	Торіс	Brought By	Discussion	Action
1.	Call to Order	Lisa Ghotbi, Pharm. D	The meeting was called to order at 7:31 am. • Agenda overview	Introduction agenda topics done.
2.	Informational Updates	Lisa Ghotbi, Pharm. D	 On January 1st, 2022, DHCS will take control of pharmacy services (carve-out) for the Medi-Cal population. SFHP P&T Committee will continue due to maintaining pharmacy benefit for the ~14K Healthy Workers HMO members and DUR board functions. DHCS will have 60-day notices of the Medi-Cal carve-out sent to members by November 1st. DHCS used implementation delay to reduce gap in MCP formularies and CDL (e.g. inhalers and insulin pens) SFHP's P&T Committee has been recognized by the state for quality and acknowledges much of this is due to the long-standing dedication of the committee members for upwards of 	

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			25 years of service.	
3.	Review and Approval of July 21, 2021 P&T minutes (pp.5 - 16)	Lisa Ghotbi, Pharm. D	The committee approved the minutes as presented.	VOTE: <u>Review and Approval of July 21, 2021 P&T</u> <u>Minutes</u> Approved minutes as presented. Vote: Unanimous approval (8/8)
4.	Discussion and Recommendation for Change to SFHP Formulary and Prior Authorization Criteria for Select Drug Classes. Formulary Maintenance Items: Cardiology: Antiplatelets (pp.18 - 20)	Kaitlin Hawkins, Pharm. D	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. Major recommendations included the following: Last reviewed: October 2019 Formulary Update: (Medi-Cal, Healthy Workers HMO, and Healthy San Francisco) • No changes are recommended Prior Authorization (PA) Criteria Update: • None (no active criteria) Drug Utilization Review (DUR) Update: • None <u>Committee Discussion:</u> The committee had no comments or questions.	VOTE: <u>Formulary Maintenance Items:</u> Approved recommendations as presented. <u>Vote: Unanimous approval (8/8)</u> (Committee collectively voted on items 4 thru 8)
5.	Formulary Maintenance Items: Endocrinology: Gaucher Disease (pp.21)	Kaitlin Hawkins, Pharm. D	Last reviewed: April 2019 Formulary Update: (Medi-Cal, Healthy Workers HMO, and Healthy San Francisco) • No changes are recommended PA Criteria Update: • None DUR Update: • None <u>Committee Discussion:</u> The committee had no comments or questions.	
6.	Formulary Maintenance Items: Genitourinary: Benign Prostatic Hyperplasia (pp.22 - 24)	Kaitlin Hawkins, Pharm. D	Last reviewed: October 2019 Formulary Update: (Medi-Cal, Healthy Workers HMO, and Healthy San Francisco) • No changes are recommended PA Criteria Update: • None DUR Update: • None <u>Committee Discussion:</u> The committee had no comments or questions.	
7.	Formulary Maintenance Items: Neurology: Movement Disorders (pp.25 - 26)	Kaitlin Hawkins, Pharm. D	Last reviewed: January 2020 Formulary Update: (Medi-Cal, Healthy Workers HMO, and Healthy San Francisco) • None PA Criteria Update: • None	

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			DUR Update: None <u>Committee Discussion:</u> The committee had no comments or questions.	
8.	Formulary Maintenance Items: <u>Psychiatry</u> : Insomnia (pp.27 - 29)	Kaitlin Hawkins, Pharm. D	Last reviewed: October 2019 Formulary Update: (Medi-Cal, Healthy Workers HMO, and Healthy San Francisco) • None PA Criteria Update: • None DUR Update: • None <u>Committee Discussion:</u> The committee had no comments or questions.	
9.	Cardiology Pulmonary Hypertension Class Review (pp.30 - 49)	Kaitlin Hawkins, Pharm. D	 The plan presented a class review and recommendations for pulmonary hypertension. Major recommendations included the following: Last reviewed: October 2019 Formulary Update: (Medi-Cal, Healthy Workers HMO, and Healthy San Francisco) None PA Criteria Update: Update Pulmonary Hypertension criteria to incorporate criteria for inhaled Tyvaso® in group 3 PH requiring documentation of diagnosis via imaging and hemodynamic parameters DUR Update: None Committee Discussion: The committee had no comments or questions. 	VOTE: <u>Cardiology:</u> Approved recommendations as presented. <u>Pulmonary Hypertension Class Review</u> <u>Vote: Unanimous approval (8/8)</u>
10.	Endocrinology Diabetes Types 1 and 2 Class Review (pp.50 - 91)	Kaitlin Hawkins, Pharm. D	 The plan presented a class review and recommendations for type 1 and type 2 diabetes. Major recommendations included the following: Last reviewed: April 2020 Formulary Update: (Medi-Cal, Healthy Workers HMO and Healthy San Francisco) None PA Criteria Update: Update SGLT-2 Inhibitors criteria to allow Jardiance® use as indicated in heart failure regardless of diabetes, and prefer over Farxiga® in this indication DUR Update: Evaluate adherence of non-insulin antihyperglycemic medications and assess monotherapy rates and medication choice versus polytherapy in separate analysis Committee Discussion: The committee had no comments or questions. 	VOTE: <u>Endocrinology:</u> Approved recommendations as presented. <u>Diabetes Types 1 and 2 Class Review</u> <u>Vote: Unanimous approval (8/8)</u>

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11.	Topic Endocrinology Diabetes Adherence and Monotherapy Drug Utilization Review (pp.92 - 96)	Brought By Jessica Shost, Pharm. D	 Discussion Goal: Assess adherence for Medi-Cal members on medications to treat diabetes and the appropriateness of regimen choice. Summary: Most drug classes had an average PDC above 80%, suggesting that many SFHP members and Healthy Workers members are taking their antidiabetic medications regularly. Adherence is higher in the Asian and Pacific Islander population and lowest in the Black and Hispanic population. Drug choice for monotherapy appears to be mostly appropriate, with only 8% of members on an inappropriate monotherapy choice. It is possible, given the 62% of patients on multidrug therapy but not on insulin, that members undergoing antidiabetic therapy could benefit from earlier insulin initiation. Recommendations: Make CDC educational materials available on the SFHP website Partner with SFHP's population health team and diversity, equity, and inclusion (DEI) group to ensure that diabetes educational materials available to the SFHP population are culturally competent Outreach to clinics and organizations serving Black and Hispanic populations to provide support and gather further recommendations. Committee Discussion: Dr. Ruggiero inquired if the DUR contained a breakdown within ethnic classes monitored. He has observed in practice that elderly Hispanics seemed to drop off in adherence. SFHP acknowledged an in-depth analysis and education plan is likely warranted. 	Non-voting item
12.	Endocrinology Hypoglycemia and Diabetes Supplies Abbreviated Review (pp.97 - 110)	Kaitlin Hawkins, Pharm. D	 The plan presented an abbreviated class review and recommendations for hypoglycemia and diabetes supplies. Major recommendations included the following: Last reviewed: April 2020 Formulary Update: (Medi-Cal, Healthy Workers HMO, and Healthy San Francisco) Add Gvoke® HypoPen® to formulary tier 2 to align with other glucagon dosage forms; maintain Zegalogue® nonformulary at this time due to cost-effective alternatives on formulary PA Criteria Update: None DUR Update: None Dr. Ruggiero inquired regarding the coverage status of test solutions for blood glucose monitors and was informed that Accu-Chek Guide test solution is covered at tier 1. Dr. Lopez observed that perhaps the increase in blood glucose meter requests could be due to an increase in self-monitoring during the pandemic.	VOTE: <u>Endocrinology:</u> Approved recommendations as presented. <u>Hypoglycemia and Diabetes Supplies</u> <u>Abbreviated Review</u> <u>Vote: Unanimous approval (8/8)</u>

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13.	Topic Endocrinology Wegovy™ (semaglutide) Monograph (pp.111 - 120)	Brought By Kaitlin Hawkins, Pharm. D	Discussion The plan presented a monograph and recommendations for endocrinology medications. Major recommendations included the following: Last reviewed: n/a, FDA approved 6/3/2021 Formulary Update: (Medi-Cal and Healthy Workers HMO): • Add Wegovy™ to formulary tier 3 with PA required to ensure appropriate diagnosis PA Criteria Update: • Update Anti-Obesity Medications criteria to include Wegovy™ on par with Saxenda®, and remove additional requirements for approval of either (either diabetes diagnosis or trial/failure of or contraindication to Alli® or Contrave®) DUR Update: • None Committee Discussion: Dr. Ghotbi informed the committee that SFHP is continuing to advocate for this class with DHCS and the upcoming carve-out.	Action VOTE: Endocrinology: Approved recommendations as presented. Wegovy™ (semaglutide) Monograph Vote: Unanimous approval (8/8)
14.	Obstetrics & Gynecology Myfembree® (relugolix-estradiol- norethindrone) Monograph (pp.121 - 129)	Kaitlin Hawkins, Pharm. D	 The plan presented a monograph and recommendations for obstetrics and gynecology medications. Major recommendations included the following: Last reviewed: n/a, FDA approved 5/26/2021 Formulary Update: (Medi-Cal, Healthy Workers HMO, and Healthy San Francisco): Maintain Myfembree® as non-formulary at this time due to costeffective alternatives on formulary PA Criteria Update: Update Oriahnn® criteria to list Myfembree® as non-formulary and require trial of Oriahnn® for approval DUR Update: None Committee Discussion: The committee had no comments or questions. 	VOTE: <u>Obstetrics & Gynecology:</u> Approved recommendations as presented. <u>Myfembree® (relugolix-estradiol-norethindrone)</u> <u>Monograph</u> <u>Vote: Unanimous approval (8/8)</u>
15.	Pain Muscle Relaxants Class Review & DUR (pp.130 - 136)	Jessica Shost, Pharm. D	 The committee had no comments of questions. The plan presented a class review and DUR adherence analyses for pain medications. Major recommendations included the following: Last reviewed: October 2019 Formulary Update: (Medi-Cal, Healthy Workers HMO and Healthy San Francisco): None PA Criteria Update: None (no active criteria) <u>DUR Summary:</u> Based on additional DUR analysis, muscle relaxant prescribing for the SFHP Medi-Cal population appears to be within guideline recommendations, with 54% of members receiving a 30-day supply or less. Most (93%) members received only one type of muscle relaxant during the year; polypharmacy within the muscle relaxant class is not 	VOTE: <u>Pain:</u> Approved recommendations as presented. <u>Muscle Relaxants Class Review & DUR</u> <u>Vote: Unanimous approval (8/8)</u>

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			 a concern for SFHP members. As no major concerns have been identified with muscle relaxant prescribing in this review, provider and member educational efforts should focus on other concerns, such as co-prescribing with opioids. DUR Update: Focus drug safety education on opioid and muscle relaxant co- prescribing through the Pain and Opioid Workgroup <u>Committee Discussion:</u> The committee had no comments or questions. 	
16.	Drug Utilization Review (DUR) Prospective Program Reports (pp.137 – 146)	Kaitlin Hawkins, Pharm. D	 The plan provided DUR program updates and reports for committee review Prospective DUR quarterly report Q2.2021 Reporting Update: Continue quarterly review of the Prospective DUR Report, with presentation of notable findings and resulting recommendations for formulary changes to P&T as needed Drug-Specific Formulary Update: None DUR Education Update: None Committee Discussion: The committee had no comments or questions. 	Non-voting item

17.	Review and Approval of Prior Authorization Criteria Interim Changes (pp.147 - 148)	Kaitlin Hawkins, Pharm. D	The plan presented Prior Authorization Criteria interim changes (New Criteria, Revised Existing Criteria & a table of criteria that were evaluated per the Annual review process where no clinical changes were made) for review and approval <u>Committee Discussion:</u> The committee had no comments or questions.	VOTE: <u>Review and Approval of Prior Authorization Criteria</u> <u>Interim Changes</u> Approved recommendations as presented. VOTE: <u>Review and Approval of Interim Formulary Changes</u>
18.	Review and Approval of Interim Formulary Changes and Formulary Placement for New Drugs to Market (pp.149 - 198)	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.	and Formulary Placement for New Drugs to Market Approve recommendations as presented. <u>Vote: Unanimous approval (8/8)</u>
19.	Adjournment	Lisa Ghotbi, Pharm. D	The meeting adjourned at 9:26 am. 2022 P&T Committee Meeting dates are: • Wednesday, January 19, 2022 • Wednesday, April 20, 2022 • Wednesday, July 20, 2022 • Wednesday, October 19, 2022	

Respectfully submitted by:

Lisa Ghotbi, Pharm. D *on behalf of*: James Glauber, MD, MPH Health Plan Physician Advisor 1/19/2022

Date