

Enterprise Pharmacy and Therapeutics Committee Meeting

Call in number 646-876-9923 Meeting ID 918 3637 4956

May 2nd, 2022

6:00PM-8:00PM EST

Pre-register at jplante1@amerihealthcaritasla.com prior to the meeting

<u>Subject</u>	<u>Presenter</u>
1. Call to Order	B. Himmelstein
2. Conflict of Interest Disclosures	S. Cherian
3. BCC Positive Changes, PA Criteria Updates	C. Meny
4. Review and approval of January P&T and February Proxy minutes	S. Cherian
5. Old Business	PerformRx
A. Agents for Graft vs Host Disease	P. 79
B. Sodium Glucose CoTransporter-2 (SGLT-2) Inhibitor and Combinations	P. 84
C. Retacrit Shortage – Erythropoiesis-Stimulating Agents (ESAs)	P. 86
D. Entresto QL	P. 90
E. Calcitonin Gene-Related Peptide (CGRP) Antagonists for Headache Prevention	P. 91
F. BCC - Mucopolysaccharidosis VI (Maroteaux-Lamy Syndrome) Agents (Naglazyme).....	P. 96
G. ACDE – Carisoprodol.....	P. 97
6. New Business	PerformRx
A. AmeriHealth Caritas Ohio (ACOH) Medical Pharmacy Prior Authorization Criteria	P. 99
B. Oxbryta.....	P. 187
C. Chronic Dry Eyes	P. 192
D. Mycophenolic Acid	P. 196
E. Continuous Glucose Monitors	P. 198
F. Insulin Pumps.....	P. 200
G. Ozempic 2mg Dose.....	P. 204
H. Rituximab	P. 205
I. Enbrel.....	P. 225
J. BCC – Allergenic Extracts.....	P. 242
7. Drug Reviews:	PerformRx
A. Therapeutic Class:	
1. Atypical Antipsychotics	P. 244
2. Contraceptive Foams and Devices.....	P. 273
3. Potassium Replacement.....	P. 281
B. Single Products:	PerformRx

1. Provenge	p. 290
2. Sucraid	P. 301
3. Ridaura	P. 306
4. Leqvio	P. 315
5. Recorlev	P. 336
6. Tarpeyo	P. 350
7. Adbry	P. 359
8. Cibinqo	P. 381
9. Tezpire	P. 403
10. Ryplazim	P. 427
11. Vabysmo	P. 436
12. Voxzogo	P. 454
13. Vyvgart	P. 463

8. New Products PerformRx

9. Prior Authorization Criteria Review: PerformRx

A. Prior Authorization Criteria Annual Review:

1. Amyotrophic Lateral Sclerosis (ALS agents)	P. 485
2. Atovaquone Suspension (Mepron)	P. 491
3. Biologic Agents for Nasal Polyposis	P. 492
4. Complement Inhibitors	P. 498
5. Daliresp (ST)	P. 501
6. Healthcare professional (HCP) administered/IV Disease Modifying Therapies (DMTs) for Multiple Sclerosis (MS)	P. 502
7. Inhaled Antibiotics and Cystic Fibrosis Agents	P. 511
8. Injectable Infusible Bone Modifying Agents for Osteoporosis and Paget's Disease	P. 514
9. SHSC CNS Stimulant Age Limit	P. 528
10. Lidocaine Topical Patches	P. 531
11. Oxlumo	P. 532
12. Palynziq	P. 534
13. Pregabalin (Lyrica and Lyrica CR)	P. 537
14. Primary Hemophagocytic Lymphohistiocytosis (HLH) Agents	P. 539
15. Somatostatin Analogues	P. 541
16. SHSC - Weight Loss Medications	P. 550
17. ACDE – Savella	P. 552
18. ACDE - Infliximab Products	P. 553
19. ACDE – Benzodiazepines	P. 556

B. Prior Authorization Criteria Annual Review without Clinical Changes

1. Acute Migraine Treatments	P. 561
2. Agents for Thrombocytopenia	P. 567
3. Agents to Treat Gaucher's Disease	P. 571
4. Antisense Oligonucleotides for Duchenne Muscular Dystrophy ...	P. 577
5. Banzel	P. 581
6. B-Cell Maturation Antigen (BCMA) Directed Chimeric Antigen Receptor (CAR) T-Cell Therapy	P. 583
7. Colchicine (ST)	P. 585
8. Diagnosis Code Requirement	P. 586
9. Erythropoiesis-Stimulating Agents (ESAs)	P. 588
10. Immunosuppressants for Lupus Nephritis	P. 600

11. Insulin-Like Growth Factor-1 Receptor (Igf-1r) Antagonists	
For Thyroid Eye Disease	P. 601
12. Itraconazole (Sporanox)	P. 603
13. Ketamine	P. 605
14. Kuvan	P. 607
15. linezolid (Zyvox)	P. 609
16. Moxeza	P. 610
17. Multaq.....	P. 611
18. Non-preferred/Prior Authorization Required Medications	
Criteria.....	P. 612
19. Off Label Uses.....	P. 618
20. Paroxetine ER (ST)	P. 622
21. Peanut Allergy Immunotherapy Agents (FDA Approved)	P. 623
22. Potassium Removing Agents	P. 625
23. Self-administered Disease Modifying Therapies (DMTs) for	
Multiple Sclerosis (MS).....	P. 628
24. Serotonin Receptor Agonists (triptans).....	P. 635
25. Treatment of Hereditary Angioedema.....	P. 637
26. Injectable Infusible Bone Modifying Agents for	
Oncology Indications	P. 648
27. ACDE - Anti-Depressants for the Pediatric Patient.....	P. 652
28. ACDE - ICS/LABA Step Therapy.....	P. 653
29. ACDE - Incretin Mimetic Drugs Step Therapy	P. 654
30. ACDE – Symlin.....	P. 655
31. BCC – Siklos	P. 656
10. Additional Items	PerformRx
A. Veklury.....	P. 658
11. Recalls	PerformRx
12. Adjourn	B. Himmelstein

*****NEXT MEETING: July 25th, 2022*****