North Carolina State Health Plan
FOR TEACHERS AND STATE EMPLOYEES
A Division of the Department of State Treasurer

STATE TREASURER OF NORTH CAROLINA
DALE R. FOLWELL, CPA

3200 Atlantic Avenue • Raleigh, NC 27604 • Phone: 919-814-4400 • Fax: 919-814-5817 • www.shpnc.org

PHARMACY AND THERAPEUTICS (P&T) COMMITTEE
August 10, 2022

The meeting of the Pharmacy and Therapeutics (P&T) Committee of the North Carolina State Health Plan for Teachers and State Employees (the Plan) was called to order at 6:30 P.M. (EST) on Wednesday, August 10, 2022, via webinar, accessible to the public through the Plan's website. Quorum was present.

MEMBERS PRESENT:
Ghassan Al-Sabbagh, MD, Gastroenterologist/ Hepatologist, Gastroenterology & Hepatology Consultants
Jennifer Burch, PharmD, CDE, Owner, Central Compounding Center
Laura Rachal, MD, Pediatric Infectious Diseases Specialist, University of North Carolina Hospitals
Peter Robie, MD, General Internist, Wake Forest Baptist Community Physicians
Phil Seats, RPh, Retired Pharmacist
John Anderson, MD, MPH, Chief Medical Officer, Duke Primary Care
Sundhar Ramalingam, MD, Oncologist, Duke Cancer Center
Sheel Solomon, MD, Dermatologist, Preston Dermatology and Skin Surgery

MEMBERS ABSENT:
David Konanc, MD, Neurologist, Raleigh Neurology Associates

PLAN & VENDOR STAFF:
Stephanie Craycroft-Andrews, PharmD, BCACP, Sr. Clinical Pharmacist, State Health Plan, Chairperson
Caroline Smart, Sr. Director, Plan Integration, State Health Plan
Dee Jones, Executive Director, State Health Plan
Sonya Dunn, MPA, BSPH, RN, Sr. Pharmacy Benefits Program Manager, State Health Plan
Renée Jarnigan, RPh, Clinical Advisor, CVS Health
Stephanie Morrison, PharmD, BCPS, Clinical Advisor, CVS Health

Welcome
The Chairperson welcomed the Committee members and guests to the webinar and performed roll call.

Conflict of Interest Statement
The Chairperson requested that the P&T Committee members review the agenda, which was distributed prior to the meeting, and disclose any actual or potential conflicts of interest with any item on the agenda. No conflicts of interest were noted.

Old Business
The Chairperson asked the P&T Committee members to review the May 11, 2022, P&T Committee Meeting minutes, which were distributed prior to the meeting. There were no additions or corrections to the minutes, so they were approved as is.

Tier 1 (Brand-over-generic) Strategy
The Chairperson introduced CVS Caremark's Clinical Advisor Heather Renée Jarnigan, RPh, who presented the Tier 1 Strategy, in which twelve branded products were proposed for placement at Tier 1, with their generics excluded. Ms. Jarnigan explained that this strategy supports the lowest net cost

3200 Atlantic Avenue • Raleigh, NC 27604 • Phone: 919-814-4400 • Fax: 919-814-5817 • www.shpnc.org

formulary principle and extends savings to members by allowing for certain cost-advantageous brand-name products to adjudicate at the Tier 1 cost share at point-of-service without requiring a new prescription. The twelve branded products to be added to Tier 1 with their generics excluded are as following: ADDERALL XR, ADVAIR DISKUS, ASACOL HD, CONCERTA, MITIGARE, ORACEA, VAGIFEM, VASCEPA CAPSULE 1 GM, SOOLANTRA CREAM 1%, UCERIS, NUVARING, and RESTASIS SINGLE DOSE. Ms. Jarnigan noted that, due to supply issues with ASACOL HD, the generic mesalamine ER will remain at Tier 2. The committee voted to approve the Tier 1 strategy, with opposition expressed by one committee member.

Formulary Updates

Ms. Jarnigan also presented CVS Caremark's Quarterly Formulary Updates, effective October 1, 2022. This included additions to the formulary, utilization management criteria, drug removals, and tier movements.

Dr. Anderson along with Ms. Jarnigan and Dr. Craycroft-Andrews identified six new molecular entities that were being removed from CVS's New-to-Market block and would be available as covered products, along with utilization management policies that went along with the new products. The new molecular entities being added to the formulary are as follows: EVKEEZA, RADICAVA, XPOVIO, VOQUEZNA (DUAL PAK and TRIPLE PAK), OPZELURA, and VIVJOA.

Ms. Jarnigan then presented other proposed formulary additions, including formulary add-backs and line extensions. The line extensions include: NUCALA INJ 40MG/0.4, NUCALA INJ 100MG/ML, SKYRIZI INJ 150MG/ML, SKYRIZI SOL 60MG/ML, TYVASO DPI POW 16-32MCG, LEVETIRACETAM/NACL SOL 250/50ML, DYANAVEL XR CHEW, and TWYNEO CREAM 0.1-3%. The medications being added back to the formulary are as follows: CELLCEPT, MYFORTIC, ASTAGRAF XL, ENVARSUS XR, ZORTRESS, RAPAMUNE, and LANOXIN 0.0625 MG.

There was no opposition from the Committee members, so the formulary additions were approved as presented.

The Committee also approved proposed utilization management including PA for ARAZLO LOTION 0.045%, OPZELURA, and VIVJOA; QL for OPZELURA and VIVJOA, and SGM and Specialty QL for EVKEEZA, RADICAVA, and XPOVIO. There was no opposition from the Committee members, so the utilization management proposals were approved as presented.

Ms. Jarnigan then explained that the Plan has a formulary exclusion exception process that is available to support Plan members who, per their provider, have a medical necessity to remain on an excluded drug. Ms. Jarnigan then reviewed the following hyperinflated products that will be excluded from the formulary starting on the effective date: MIACALCIN INJ, lansoprazole delayed-release ODT tab, betamethasone dipropionate ointment 0.05%, and clobetasol propionate emulsion foam 0.05%; TOVET.

All products being removed have therapeutic alternatives or generic equivalents that are covered as preferred products on the Plan's custom formulary. There was no opposition from the Committee members, so these product exclusions were approved as presented.

3200 Atlantic Avenue • Raleigh, NC 27604 • Phone: 919-814-4400 • Fax: 919-814-5817 • www.shpnc.org

Ms. Jarnigan then identified one branded product, GLEOSTINE, which will move from non-specialty to specialty status, and two branded products, PROGRAF and TRIDESILON CREAM 0.05%, which will have a change in tier from preferred to non-preferred. There was no opposition from the Committee members, so the formulary uptiers were approved as presented.

Adjourn

The Chairperson addressed the Committee by thanking them for their service and informed them that the next meeting would be held on October 12, 2022 at 6:30 P.M. via webinar. The meeting was adjourned at approximately 7:45 P.M. (EST).

_____

Stephanie Craycroft-Andrews, Chair