

PHARMACY AND THERAPEUTICS (P&T) COMMITTEE
October 27, 2021

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, October 27, 2021, via webinar, accessible to the public through the Plan's website. Quorum was present.

MEMBERS PRESENT:

David Konanc, MD, Neurologist, Raleigh Neurology Associates
Jennifer Burch, PharmD, CDE, Owner, Central Compounding Center
John Anderson, MD, MPH, Chief Medical Officer, Duke Primary Care
Peter Robie, MD, General Internist, Wake Forest Baptist Community Physicians
Phil Seats, RPh, Retired Pharmacist
Sheel Solomon, MD, Dermatologist, Preston Dermatology and Skin Surgery

MEMBERS ABSENT:

John J. Engemann, MD, Infectious Disease Specialist, Raleigh Infectious Disease Associates, PA
Sundhar Ramalingam, MD, Oncologist, Duke Cancer Center
Joseph Shanahan, MD, Owner, Shanahan Rheumatology & Immunotherapy

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 R. 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

In compliance with the requirements of Chapter 138A-15(e) of the State Government Ethics Act, the Chairperson read the Plan's Ethics Awareness & Conflict of Interest Reminder to the P&T Committee members and requested that members who have either an actual or perceived conflict of interest identify the conflict and refrain from discussion and voting in those matters as appropriate. No conflicts of interest were noted.

Old Business

The Chairperson asked the P&T Committee members to review the August 11, 2021 and October 13, 2021 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.

Formulary Updates

The Chairperson introduced CVS Caremark's Clinical Advisors Heather Renée Jarnigan, RPh, & Stephanie Morrison, PharmD, BCPS whom would be presenting CVS Caremark's Quarterly Formulary Updates, effective January 1, 2022. This included additions to the formulary, utilization management criteria, drug removals, and tier movements.

Ms. Jarnigan along with Dr. Morrison and Dr. Craycroft-Andrews identified eight 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: RUKOBIA, INQOVI, WAKIX, ENSPRYNG, VERQUVO, QELBREE, KERENDIA, and MYFEMBREE.

Ms. Jarnigan then presented other proposed formulary additions, including formulary add-backs. The medications being added to the formulary are as follows: BEPOTASTINE DROP 1.5%, CALCITONIN INJ 200/ML, PREGABALIN ER, AUVI-Q, MYRBETRIQ SUS 8MG/ML, NATAZIA, AVONEX, LUPR DEP-PED, ORLADEYO, PLEGRIDY, SEVENFACT, TAVALISSE, UPTRAVI INJ 1800MCG, and XYWAV.

CIMZIA was also added as a preferred product for specific autoimmune indications according to the Plan's Autoimmune Indication-Based Exceptions Criteria.

DEXCOM CONTINUOUS GLUCOSE MONITORING (CGM) SYSTEM was also added to the formulary. Dr. Craycroft-Andrews presented the proposed prior authorization criteria regarding CGMs. After some discussion regarding requirements for documenting attention-deficit hyperactivity disorder (ADHD) diagnosis for coverage of ADHD medications, such as the new molecular entity QELBREE, all product additions were approved as presented. The Committee also approved proposed utilization management including SGM and Specialty QL for Inqovi, Wakix and Enspryng, as well as prior authorizations for Verquvo, Qelbree, Kerendia, Myfembree and CGMs.

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 products that will be excluded from the formulary starting on the effective date: TRUVADA, ATRIPLA, LEUKINE, ICLUSIG, BOTOX, TAVABOROLE TOPICAL SOLUTION, AIMOVIG, BALCOLTRA, ELIQUIS, ARANESP, FEIBA, CINRYZE, HAEGARDA, MULPLETA, NPLATE, XALKORI, AFINITOR, SYMJEPI, and ADRENALIN. 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.

Dr. Morrison identified all the branded products that will have a change in tier from preferred to non-preferred. They included: REYVOW, DDAVP TABLET, DDAVP NASAL SPRAY, DOPTelet, and DIPROLENE OINTMENT. There was no opposition from the Committee members, so the formulary uptiers were approved as presented.

Dr. Morrison identified all the branded products that will have a change in tier from non-preferred to preferred: BRUKINSA, IMBRUVICA, ZYKADIA, ROZLYTREK, VITRAKVI, WEGOVY, NOVOSEVEN RT, and PROMACTA. There was no opposition from the Committee members, so the formulary downtiers were approved as presented.

Dr. Morrison identified all the branded products that will have a change in tier from non-specialty to specialty. They included: ABRAXANE, LYSODREN, and PROVENGE. There was no opposition from the Committee members, so the specialty product movements 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 February 9, 2022 at 6:30 P.M. via webinar. The meeting was adjourned at approximately 8:00 P.M. (EST).

Stephanie Craycroft-Andrews

Stephanie Craycroft-Andrews, Chair