

## PHARMACY AND THERAPEUTICS (P&T) COMMITTEE August 14, 2019

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 14, 2019, via webinar, accessible to the public through the Plan's website. Quorum was present.

### MEMBERS PRESENT:

Sundhar Ramalingam, MD, Oncologist, Duke Cancer Center  
Peter Robie, MD, General Internist, Wake Forest Baptist Community Physicians  
Tony Gurley, RPh, JD, Owner/Pharmacy Manager, Glenwood South Pharmacy + Market  
Jennifer Burch, PharmD, Owner, Central Compounding Center  
John J. Engemann, MD, Infectious Disease Specialist, Raleigh Infectious Disease Associates, PA  
Joseph Shanahan, MD, Owner, Shanahan Rheumatology & Immunotherapy  
David Konanc, MD, Neurologist, Raleigh Neurology Associates  
Matthew K. Flynn, MD, Founder, Family Dermatology

### MEMBERS ABSENT:

John Anderson, MD, MPH, Chief Medical Officer, Duke Primary Care

### PLAN & VENDOR STAFF:

Carl Antolick III, PharmD, Clinical Pharmacist (Chair), State Health Plan  
Tracy Linton, MPH, Sr. Director, Plan Benefits, State Health Plan  
Renee 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*

In compliance with the requirements of Chapter 138A-15(e) of the State Government Ethics Act the Chairperson read the NCSHP'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 summarized some of the Plan's recent formulary decisions. This includes removing the following products from the formulary: EPIVIR HBV, VEMLIDY, ZARXIO, ZORTRESS, BARACLUDGE tablets, HEPSERA, CHORIONIC GONADOTROPIN, NOVAREL, PREGNYL, FULPHILA, GRANIX, CELLCEPT, MYFORTIC, RAPAMUNE, ASTAGRAF XL, ENVARUSUS XR, ZORVOLEX, RHEUMATE, FOSTEUM, FOSTEUM PLUS, VASCULERA, FML LIQUIFILM & LACTULOSE (NDC: 46600020003010), NAPROXEN (NDC: 66100060001805) & ALTABAX; moving the following branded products to non-preferred status: SAVELLA, RAPAFLO, CANASA, CARAFATE, TENORETIC, & CIALIS (2.5 and 5 mg); and adopting the following new utilization management criteria: Opioid Policies for Age <19 (effective Oct. 1, 2019), Xiidra Policy, Specialty Quantity Limit for HIV Medications, Diacomit Quantity Limit, & Elzonris

Specialty Guideline Management. All these changes were approved by the Committee during February's meeting and subsequently went into effect July 1, 2019.

*Minutes from Previous P&T Meeting:*

The Chairperson asked the P&T Committee members to review the May 2019 P&T 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 Renee Jarnigan, RPh, & Stephanie Morrison, PharmD, BCPS whom would be presenting CVS Caremark's Quarterly Formulary Updates, effective October 1, 2019. This included drug removals and additions to the formulary as well as tier changes and utilization management policies.

Ms. Jarnigan began by reviewing the following products that will be excluded from the formulary starting on the effective date: SABRIL, COLCRYL, PERCOCET, TOPROL XL, XANAX IR/XR, LAMICTAL IR/ODT/CHEW/XR, ONFI, PRISTIQ, LEXAPRO, PROZAC, EVEKEO, SUBOXONE, BEYAZ, MINASTRIN 24 FE, YAZ, ORTHO TRI-CYCLIN LO, MINIVELLE, VIVELLE-DOT, LIALDA, ACIPHEX, RAPAFLO, CIALIS, COUMADIN, SINGULAIR, FINACEA, PREVIDENT, mupirocin cream 2%, metformin ER (Fortamet/Glumetza), glycopyrrolate 1.5mg, omeprazole/bicarb capsules/packets, fenoprofen 200mg, fenoprofen 400mg naproxen CR 375/500mg, naproxen 125mg/5mL, fenofibrate 120mg, fenoglide 120mg, VECTICAL, calcitriol ointment, diflorasone cream, PSORCON, CORDRAN, flurandrenolide, lidocaine/tetracaine, LIDOTREX diflorasone ointment, calcipotriene cream, doxepin cream, carbinoxamine 6mg, dihydroergotamine spray, & FOLIC-K. All products being removed have therapeutic alternatives or generic equivalents that are covered as preferred products on the Plan's custom formulary. During the discussions it was noted that there is an exceptions process available for any excluded product if deemed medically necessary. Dr. Robie asked how many manufacturers are currently making colchicine because there has been a drastic price increase. Ms. Jarnigan said there were at least 3 to 4 manufacturers but would research to confirm. There was no opposition to the formulary removals from the Committee members, so the changes were approved as presented.

Ms. Jarnigan identified all the branded products that will be moving to a non-preferred status, or up tiered. They included: FIORINAL, RANEXA, ANDROGEL, VESICARE, DIFFERIN, & ORACEA. All of these products have formulary alternatives that are preferred. There was no opposition from the Committee members so the changes were approved as presented.

Ms. Jarnigan identified all the branded products that will be moving to a preferred status, or down tiered. They include: none. There was no opposition from the Committee members so the changes were approved as presented.

Ms. Jarnigan identified all the medications that were being removed from CVS's New-to-Market block and would be available as covered products effective October 1, 2019, while Dr. Morrison covered any utilization management policies that went along with the new products. The new medications being added to the formulary are as follows: SKYRIZI, MAVENCLAD, QBREXA, KALYDECO, ZYKADIA, PRENATAL PLUS + DHA, KADIAN, RITUXAN, AVASTIN, HERCEPTIN, RUZURGI, KENALOG-80, QTERN,

SYMDEKO, LEVOLEUCOVORIN, & VANCOMYCIN. There was no other opposition from the Committee members, so the other product additions were approved as presented.

The Committee then reviewed new utilization management policies that were under consideration for adoption. They included: DUPIXENT Custom Enhanced SGM, MAVENCLAD SGM & SKYRIZI SGM. Dr. Flynn had some concerns with the step therapy requirements with the SKYRIZI SGM. Dr. Konanc had some concerns with the language in the MAVENCLAD SGM. Because of these concerns the question sets were going to be emailed to the Committee members to make sure that the language is proper. There was no other opposition from the Committee members regarding the policies, so they would be enacted on October 1, 2019.

*Adjourn*

Dr. Antolick addressed the Committee by thanking them for their service and informed them that the next meeting would be held on October 16, 2019 at 6:30 P.M. via webinar. The meeting was adjourned at approximately 7:50 P.M. (EST).



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Carl Antolick III, Chair