Pharmacy and Therapeutics Committee Meeting
March 18, 2021
Draft Minutes

Members Present:
Chethan Bachireddy, M.D.
Tim Jennings, Pharm.D.
Megan Sarashinsky, Pharm.D.
Ira Bloomfield, M.D.
Angela Venuto-Ashton, M.D.
Carol Forster, M.D.
Sarah Melton, Pharm.D.
Gill Abernathy, M.S., R.Ph.
Michele Thomas, Pharm.D. for Alexis Aplasca, M.D.
Ananda Basu, M.D.

DMAS Staff:
Donna Proffitt, R.Ph., Pharmacy Manager
MaryAnn McNeil, R.Ph., Acting Pharmacy Manager, CCC Plus Pharmacist
Rachel Cain, Pharm.D., Clinical Pharmacist
Usha Koduru, Counsel to the Board, Office of the Attorney General
Nettie Emmelhainz, PharmD, Senior Pharmacy Policy and Data Analyst
John Morgan, M.D., Chief Clinical Innovation Officer

Absent:
Rachel M. Selby-Penczak, M.D.

Staff: Magellan Rx Management
Debbie Moody, R.Ph., Director, Clinical Account Services, Virginia
Nancy Eldin, Pharm.D., Pharmacist Account Executive, Virginia
Marcie Morris, R.Ph., Rebate Pharmacist
Chris Andrews, Pharm.D., VP, Account Management
Jeni Hodzic, CPhT, Lead Formulary Analyst

A quorum was present

Guests:
39 representatives from pharmaceutical companies, providers, advocates, associations, etc.

Welcome and Comments from Chethan Bachireddy, M.D., Chief Medical Officer and Chairman

Dr. Chethan Bachireddy welcomed the members of the Committee and thanked them for their participation during these unprecedented times. Dr. Bachireddy noted that Medicaid members are receiving high quality prescription medications based on sound clinical criteria at substantially reduced costs to the Commonwealth. Dr. Bachireddy stressed that during these unprecedented times, the work of the Medicaid Agency and this Committee continues and is more important than ever as our members are facing economic, physical and emotional and challenges.

Dr. Bachireddy recognized Donna Proffitt's 11 years of service as the Manager of the Pharmacy Unit and wished her best wishes for her retirement.

Dr. Bachireddy mentioned the General Assembly Sessions have kept DMAS very busy and the governor has not signed any legislation yet but more to come as things get finalized. These are initiatives to advance the health of all Virginians and in particular improve the health of Medicaid members.

Dr. Bachireddy noted that DMAS has decided to move from single state supplemental rebates to the National Medicaid Pooling Initiative (NMPI) effective July 1, 2021 based on therapeutic class recommendations. NMPI is a multi-state Medicaid pharmaceutical purchasing pool administered by Magellan Medicaid Administration. Currently DMAS negotiates supplemental rebates based on our 30,000 FFS lives. With this NMPI contract, Virginia joins 11 other state Medicaid programs, representing 16

million lives, to improve our pharmaceutical negotiating ability. Nothing about the P&T Meetings format will change based on this decision.

Dr. Bachireddy mentioned that draft bylaws were sent to all board members. He asked for the board members to review the bylaws and bring back comments or suggestions to the September 2021 P&T meeting.

Dr. Bachireddy took a roll call of the Committee members since this is an electronic meeting. The following members were present: Dr. Chethan Bachireddy, Dr. Tim Jennings, Dr. Megan Sarashinsky, Dr. Ira Bloomfield, Dr. Angela Venuto-Ashton, Dr. Carol Forster, Dr. Sarah Melton, Gill Abernathy, Dr. Michele Thomas for Dr. Alexis Aplasca, and Dr. Ananda Basu. Dr. Rachel M. Selby-Penczak was absent.

Call to Order: The meeting was called to order by Dr. Bachireddy.

Approval of Minutes from September 17, 2020 meeting: Dr. Bachireddy asked if there were any corrections, additions or deletions to the draft meeting minutes. With no revisions or corrections, Dr. Jennings motioned that the minutes be approved as written. Dr. Sarashinsky seconded the motion. The Committee unanimously approved the minutes as written. (Reference Attachment 1 for the Committee Vote Tally)

DMAS' Drug Utilization Review (DUR) Board Update: Dr. Rachel Cain provided the DUR update. The last DUR Board meeting was supposed to be on March 11, 2021 and it was cancelled due to lack of a quorum. The DMAS DUR Board reviewed eight (8) new drugs at the December 10, 2020 DUR meeting. Evrysdi™, Gavreto™, Inqovi®, Lampit®, Mycapssa®, Ongentys®, Onureg®, and Rukobia® were reviewed and service authorizations (SA) criteria were placed on all of them except for Ongentys®. Additionally, the Board reviewed the results of several utilization analyses: impact reports for the 8 new drugs, hemoglobin A1c lab value over 9 and on diabetic medications for 6 months. The next DUR Board meeting is scheduled for June 10, 2021. The minutes from the DUR Board meetings can be found at: https://www.virginiamedicaidpharmacyservices.com/provider/drug-utilization-review/

PDL Management

PDL Phase I – New Drug Review *(Therapeutic Class)*

Brand Drugs

1. **Alkindi Sprinkle® and Ortikos™ *(Glucocorticoids, Oral):*** Dr. Nancy Eldin presented the clinical information for Alkindi Sprinkle® (hydrocortisone) and Ortikos™ (budesonide).

2. **Impeklo® *(Steroids, Topical Very High Potency*)**: Dr. Eldin presented the clinical information for Impeklo® (clobetasol propionate).

   Dr. Jennings motioned that Alkindi Sprinkle®, Ortikos™, and Impeklo® be PDL eligible. Dr. Melton seconded the motion. The Committee voted unanimously to consider these drugs as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

Generic Drugs or New Dosage Forms: Dr. Eldin noted the following new generics and new dosage forms:

- *(Anticonvulsants)*
  - rufinamide (generic for Banzel® Suspension)
- *(Intranasal Rhinitis Agents)*
  - azelastine/fluticasone nasal spray (generic for Dymista®)
- *(Lipotropics, Other)*
  - gemfibrozil (generic for Lopid®)
  - icosapent ethyl (generic for Vascepa®)

Dr. Jennings motioned that the new generics and new dosage forms be PDL eligible. Dr. Venuto-Ashton seconded the motion. The Committee voted unanimously to consider these drugs as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

PDL Phase II – Annual Review

1. ***Antimigraine Agents:*** Dr. Eldin presented the Antimigraine Agents clinical information.

2. ***Antimigraine Agents, Others:***

   Speakers
   - Nancy Njuguna, BPharm, MBA; Evidence & Outcomes Liaison, US Health Outcomes, Lilly (Emgality®)
   - Tammy Martin, BSN, MS, APRN, FNP Associate Director, Medical Science Liaison, Biohaven (Nurtec™ ODT)
   - Zachary Spurlin, PharmD, Medical Outcomes Science Liaison, AbbVie (Ubrelvy®)
   - Amy Bivens, PharmD, Health Economics Outcomes Specialist, Amgen (Aimovig®)

   Dr. Eldin presented the Antimigraine Agents, Others clinical information.

3. ***NSAIDs (includes Cox-2 inhibitors and topical agents):*** Dr. Eldin presented the NSAIDs clinical information.

4. ***Opioid Dependency Treatment Agents (Closed Class) (includes oral buprenorphine):*** Dr. Eldin presented the Opioid Dependency Treatment clinical information.

5. ***Opioids: Long Acting:*** Dr. Eldin presented the Opioids, Long Acting clinical information.

6. ***Opioids: Short Acting (includes combination drugs and lozenges):*** Dr. Eldin presented the Opioids, Short Acting clinical information.

   Dr. Jennings motioned that Antimigraine Agents; Antimigraine Agents, Others; NSAIDs (includes Cox-2 inhibitors and topical agents); Opioid Dependency Treatment Agents (includes oral buprenorphine); Opioids, Long Acting; and Opioids, Short Acting (includes combination drugs and lozenges) classes continue to be PDL eligible. Dr. Bachireddy seconded the motion. The Committee voted unanimously to maintain these classes as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

7. ***Antibiotics, GI:*** Dr. Eldin presented the Antibiotics, GI clinical information.

8. ***Ketolides & Macrolides (Adult and Pediatric):*** Dr. Eldin presented the Ketolides & Macrolides (Adult and Pediatric) clinical information.

9. ***Otic Antibiotics:*** Dr. Eldin presented the Otic Antibiotics clinical information.

   Dr. Jennings motioned that Antibiotics, GI; Ketolides and Macrolides (Adult and Pediatric); and Otic Antibiotics classes continue to be PDL eligible. Dr. Bachireddy seconded the motion. The Committee voted unanimously to maintain these classes as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

10. ***Antivirals for Influenza, Oral:*** Dr. Eldin presented the Antivirals for Influenza, Oral clinical information.

11. ***Antihyperuricemics:*** Dr. Eldin presented the Antihyperuricemics clinical information.

12. ***Anticoagulants (includes oral agents, low molecular weight heparins and Factor XA Inhibitors) (Closed class):*** Dr. Eldin presented the Anticoagulants clinical information. The board members requested to check to see if there are more bleeding episodes and more utilization of anticoagulant reversals with the newer anticoagulant agents. This will be discussed at the DUR meeting.

    Dr. Jennings motioned that Antivirals for Influenza, Oral; Antihyperuricemics; and Anticoagulants (includes oral agents, low molecular weight heparins and Factor XA Inhibitors) classes continue to be PDL eligible. Dr. Bachireddy seconded the motion. The Committee voted unanimously to maintain these classes as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

13. ***Antihyperkinesis/CNS Stimulants (Closed class):*** Dr. Eldin presented the Antihyperkinesis/CNS Stimulants clinical information.

14. ***Multiple Sclerosis Agents:***

    Speakers
    - Samaneh Kalirai, PharmD, Associate Director, Field Health Economics & Outcomes Research, Bristol-Myers Squibb (Zeposia®)
    - Wallene Bullard, PharmD, BCPS, Director, Regional Medical Science Lead (Kesimpta®)

    Dr. Eldin presented the Multiple Sclerosis Agents clinical information.

15. ***Neuropathic Pain Agents:*** Dr. Eldin presented the Neuropathic Pain clinical information.

16. ***Smoking Cessation Agents:*** Dr. Eldin presented the Smoking Cessation Agents clinical information.

    Dr. Jennings motioned that Antihyperkinesis/CNS Stimulants, Multiple Sclerosis Agents, Neuropathic Pain Agents, and Smoking Cessation Agents classes continue to be PDL eligible. Dr. Bachireddy seconded the motion. The Committee voted unanimously to maintain these classes as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

17. ***Antifungals, Topical Agents:*** Dr. Eldin presented the Antifungals, Topical clinical information.

18. ***Bone Resorption Suppression and Related Agents (includes bisphosphonates, calcitonins and others):*** Dr. Eldin presented the Bone Resorption Suppression and Related Agents clinical information.

19. ***Hypoglycemics: Incretin Mimetics/Enhancers (includes DPP-IV Inhibitors, GLP-1 Agonists & comb) (Closed class):***

    Speaker
    - Nancy Njuguna, BPharm, MBA; Evidence & Outcomes Liaison, US Health Outcomes, Lilly (Trulicity®)

    Dr. Eldin presented the Hypoglycemics: Incretin Mimetics/Enhancers clinical information.

20. ***Hypoglycemics: Insulins:*** Dr. Eldin presented the Hypoglycemics: Insulins clinical information.

21. ***Hypoglycemics: Sodium-Glucose Cotransporter 2 (SGLT2) Inhibitors (Closed Class):*** Dr. Eldin presented the Hypoglycemics: Sodium-Glucose Cotransporter 2 (SGLT2) Inhibitors clinical information.

    Dr. Jennings motioned that Antifungals, Topical Agents; Bone Resorption Suppression and Related Agents; Hypoglycemics: Incretin Mimetics/Enhancers; Hypoglycemics: Insulins; Hypoglycemics: Sodium-Glucose Cotransporter 2 (SGLT2) Inhibitors classes continue to be PDL eligible. Dr. Bachireddy seconded the motion, the Committee voted unanimously to maintain this class as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

Comments from the Office of the Attorney General
Ms. Usha Koduru from the Attorney General's office stated that under the Virginia Freedom of Information Act (FOIA), specifically Virginia Code section 2.2-3711, a public body such as the P&T Committee, may go into a closed session for any one of the 51 reasons listed in that statute. The discussion of manufacturer and wholesaler prices is not one of the 51 reasons listed.

She stated the Attorney General strongly supports the principles of open government embodied by the FOIA and believes in the opportunity of the Commonwealth's citizens to witness the operation of government to the fullest extent.

Federal Law 42 U.S.C. 1396r-8(b) (3) (D) requires such pricing information to be kept confidential. On this point, federal law supersedes the Virginia FOIA. Since the P&T Committee must discuss this pricing information as part of its duties, pursuant to federal law a confidential meeting must occur for the consideration of this pricing information and she cautioned only this confidential pricing information should be discussed.

Following the teleconferenced Confidential Session, the Committee members re-assembled on the public teleconference session. Dr. Bachireddy took a roll call of the Committee members after the public meeting reconvened. The following members were present: Dr. Chethan Bachireddy, Dr. Tim Jennings, Dr. Megan Sarashinsky, Dr. Ira Bloomfield, Dr. Angela Venuto-Ashton, Dr. Carol Forster, Dr. Sarah Melton, Gill Abernathy, Dr. Michele Thomas, and Dr. Ananda Basu. Dr. Bachireddy then confirmed that to the best of each of the Committee member's knowledge the only information discussed at the confidential meeting was information regarding prices charged by the manufacturers and wholesalers of the drug classes

discussed at this P&T Committee meeting. As authorized by Federal Law at 42 U.S.C. § 1396r-8(b) (3) (D) that requires this information to be kept confidential. Dr. Jennings motioned to reconvene the meeting. Dr. Thomas seconded the motion. The Committee voted unanimously to reconvene. (Reference Attachment 1 for the Committee Vote Tally)

22. *Cytokine and CAM Antagonists and Related Agents (Closed Class):*

Speakers

- Jonathan Schreiber, MD, Dermatologist in Norfolk with Integrated Dermatology of Tidewater, Lilly (Taltz®)
- Amy Bivens, PharmD, Health Economics Outcomes Specialist, Amgen (Otezla®)
- Ahmad Nessar, PharmD, Medical Affairs Executive Director, Genentech (Enspryng®)
- Mark A. Vaughan, PharmD, BCMAS, Director Medical Outcomes Specialist, Pfizer (Inflectra®)
- Nancy Njuguna, BPharm, MBA; Evidence & Outcomes Liaison, US Health Outcomes Lilly (Taltz®)

Dr. Eldin presented the Cytokine and CAM Antagonists and Related Agents clinical information. Dr. Jennings motioned that the class continue to be PDL eligible. Dr. Bloomfield seconded the motion. The Committee voted unanimously to maintain this class as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

23. *Therapeutic Drug Classes Without Updates (Reviewed by the Department):*

- Acne Agents (includes benzoyl peroxide, clindamycin, retinoids & combinations)
- Alzheimer's Agents (Cholinesterase Inhibitors & NMDA Receptor Antagonist)
- Androgenic Agents
- Antibiotics (topical)
- Antifungals (oral)
- Antivirals for Herpes (HSV)
- Antivirals, Topical
- Cephalosporins (Second and Third Generations)
- Erythropoiesis Stimulating Proteins
- Estrogens (vaginal and oral)
- Hypoglycemics: Alpha-Glucosidase Inhibitors
- Hypoglycemics: Meglitinides
- Hypoglycemics: Metformin
- Hypoglycemics: Sulfonylureas
- Hypoglycemics: Thiazolidinediones
- Long-Acting Reversible Contraceptives (LARCS) (includes long-acting IUDs & injectable)
- Methotrexate
- Pancreatic Enzymes
- Platelet Aggregation Inhibitors
- Progestational Agents
- Psoriasis Agents
- Quinolones (Second and Third Generations)
- Rosacea Agents

- Skeletal Muscle Relaxants

Dr. Eldin noted that the above therapeutic classes had no significant changes since the last P&T Committee review.

Dr. Jennings motioned that these classes continue to be PDL eligible. Gill Abernathy seconded the motion. The Committee voted unanimously to maintain these classes as PDL eligible. (Reference Attachment 1 for the Committee Vote Tally)

PDL Generic Watch Changes Effective July 1, 2021

Dr. Jennings made a motion to make the following generic formulations preferred and the brand name equivalents non-preferred effective July 1, 2021. Dr. Sarashinsky seconded the motion and it was approved unanimously by the Committee: (Reference Attachment 1 for the Committee Vote Tally)

1. ***Phosphodiesterase 5 Inhibitors (PDE-5):*** Sildenafil suspension is preferred. Revatio® Suspension is non-preferred.

2. ***Urinary Antispasmodics (Bladder Relaxant):*** Solifenacin is preferred. Vesicare® is non-preferred.

PDL Changes Effective July 1, 2021

Phase II Annual Review
Dr. Jennings made the following motions that were seconded and approved unanimously by the Committee (Reference Attachment 1 for the Committee Vote Tally) (note the motions are for changes to the current PDL status):

1. ***Analgesics, Narcotics Short:*** Tramadol 100 mg is non-preferred.

2. ***Androgenic Agents:*** Androgel® Gel Pump is preferred. Testosterone gel pump is non-preferred.

3. ***Antihyperuricemics:*** Colchicine tablet is preferred. Colchicine capsule is non-preferred.

4. ***Antimigraine Agents, Other:*** Ajovy®, Ajovy® Autoinjector, Ajovy® Autoinjector 3-Pk and Ubrelvy™ are preferred.

5. ***Antimigraine Agents, Triptans:*** Imitrex® (Nasal) is preferred. Sumatriptan (Nasal) is non-preferred.

6. ***Cytokine & CAM Antagonists:*** Renflexis® is preferred.

7. ***Hypoglycemics, Incretin Mimetics/Enhancers:*** Trulicity® is preferred.

8. ***Macrolides/Ketolide:*** Erythromycin ethylsuccinate 200 susp is preferred. EryPed® 200 Suspension is non-preferred.

9. ***Multiple Sclerosis Agents:*** Kesimpta®, Tecfidera® and Tecfidera® Starter Pack are preferred. Gilenya®, Rebif® and Rebif® Rebidose Pen are non-preferred.

10. ***NSAIDs:*** Diclofenac sodium gel OTC is preferred.

11. Progestational Agents: Hydroxyprogesterone caproate single dose vial is non-preferred.

Dr. Jennings made the following motion to make no changes to the following PDL drug classes, which was seconded and approved unanimously by the Committee: (Reference Attachment 1 for the Committee Vote Tally)

- Acne Agents, Topical
- Alzheimer's Agents
- Analgesics, Narcotics Long
- Antibiotics, GI
- Antibiotics, Topical
- Anticoagulants
- Antifungals, Oral
- Antifungals, Topical
- Antipsoriatics, Topical
- Antivirals, Oral
- Antivirals, Topical
- Cephalosporins and Related Antibiotics
- Contraceptives, Other
- Fluroquinolones, Oral
- Glucocorticoids, Inhaled
- Glucocorticoids, Oral
- Hypoglycemics, Alpha-Glucosidase Inhibitors
- Hypoglycemics, Insulin & Related Agents
- Hypoglycemics, Meglitinides
- Hypoglycemics, Metformin
- Hypoglycemics, SGLT2
- Hypoglycemics, Sulfonylureas
- Hypoglycemics, TZD
- Neuropathic Pain
- Opiate Dependence Treatments
- Otic Antibiotics
- Pancreatic Enzymes
- Platelet Aggregation Inhibitors
- Rosacea Agents, Topical
- Skeletal Muscle Relaxants
- Smoking Cessation
- Steroids, Topical Very High
- Stimulants and Related Agents

Clinical Criteria and Service Authorization (SA) Forms

The Committee members reviewed the proposed new or revised clinical criteria including new and updated service authorization fax forms. Dr. Jennings made the following motion to approve new or revised clinical criteria for the following drugs and drug classes, which was seconded and approved unanimously by the Committee: (Reference Attachment 1 for the Committee Vote Tally)

- Eliminate the Sublocade® fax form and criteria
- Updates to Cytokine & CAM Antagonists indications and quantity limits (Appendix A)
- Update the criteria for all oral Hypoglycemics to allow a second hypoglycemic agent when the hemoglobin A1c is greater than 7.5% instead of 9%
- Criteria for new Multiple Sclerosis drug Kesimpta® (ofatumumab) AutoPA
- Allow continuation of therapy for the new non-preferred Multiple Sclerosis drugs: Gilenya®, Rebif® and Rebif® Rebidose Pen.
- Remove age edits on the Asthma Agents

The next P&T Committee Meeting is tentatively scheduled for September 14, 2021.

Dr. Bachireddy made a motion to adjourn the meeting that was seconded by Dr. Jennings. After a unanimous vote, the meeting was adjourned. (Reference Attachment 1 for the Committee Vote Tally)

DMAS March 18, 2021 P&T Committee Vote Talley:	Chethan Bachireddy (Chair)	Gill Abernathy	Alexis Aplasca	Ananda Basu	Ira Bloomfield	Michele Thomas for Alexis Aplasca	Carol Forster	Tim Jennings	Sarah Melton	Rachel Selby-Penczak	Megan Sarashinsky	Angela Venuto-Ashton
P&T Committee Meeting September 17, 2020 Minutes	A	A	O	A	A	A	A	M	A	O	S	A
PDL Phase I New Drugs: Alkindi Sprinkle®, Ortikos™, Impeklo®, Be PDL eligible	A	A	O	A	A	A	A	M	S	O	A	A
PDL Phase I New generics or dosage forms: rufinamide, azelastine/fluticasone nasal spray, gemfibrozil, and icosapent ethyl, Be PDL eligible	A	A	O	A	A	A	A	M	A	O	A	S
PDL Phase II Annual Review												
Antimigraine Agents, Antimigraine Agents: Other, Non-Steroidal Anti-Inflammatory Drugs, Opioid Dependency Treatment Agents, Opioids: Long Acting and Opioids: Short Acting **continues to be PDL Eligible**	S	A	O	A	A	A	A	M	A	O	A	A
Gastrointestinal Antibiotics, Ketolides & Macrolides (Adult and Pediatric), Otic Quinolones **continues to be PDL Eligible**	S	A	O	A	A	A	A	M	A	O	A	A
Antivirals for Influenza (Oral), Antihyperuricemics, and Anticoagulants (includes oral agents, low molecular weight heparins & Factor XA Inhibitors) **continues to be PDL Eligible**	S	A	O	A	A	A	A	M	A	O	A	A
Antihyperkinesis/CNS Stimulants, Multiple Sclerosis Agents, Neuropathic Pain, Smoking Cessation Agents **continues to be PDL Eligible**	S	A	O	A	A	A	A	M	A	O	A	A
Antifungal Agents (Topical), Bone Resorption Suppression and Related Agents (includes bisphosphonates, calcitonins and others), Hypoglycemics: Incretin Mimetics/Enhancers, Hypoglycemics: Insulins, Hypoglycemics: Sodium-Glucose Cotransporter 2 (SGLT2) **continues to be PDL Eligible**	S	A	O	A	A	A	A	M	A	O	A	A
Confidential Pricing Meeting			O							O		
Motion to Reconvene public meeting	A	A	O	A	A	S	A	M	A	O	A	A
Self-administered Cytokine & CAM Antagonists with Related Agents including Methotrexate (all indications: Rheumatoid Arthritis (RA), Juvenile Idiopathic Arthritis (JIA), Ankylosing Spondylitis (AS), Plaque Psoriasis, Psoriatic Arthritis (PsA), Crohn's Disease (CD), Ulcerative Colitis, Cryopyrin-Associated Periodic Syndromes (CAPS) **continues to be PDL Eligible**	A	A	O	A	S	A	A	M	A	O	A	A

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Phase II - Reviewed by Dept with no significant clinical changes: Antibiotics (topical), Antifungals (oral), Cephalosporins (Second and Third Generations), Quinolones (Second and Third Generation), Antivirals for Herpes (HSV), Erythropoiesis Stimulating Proteins, Platelet Aggregation Inhibitors, Alzheimer's Agents (Cholinesterase Inhibitors & NMDA Receptor Antagonist), Skeletal Muscle Relaxants, Long-Acting Reversible Contraceptives (LARCS) (includes long-acting IUDs & injectable), Acne Agents (includes benzoyl peroxide, clindamycin, retinoids & combinations), Antivirals (topical), Psoriasis Agents, Rosacea Agents, Androgenic Agents, Estrogens (vaginal and oral), Hypoglycemics: Alpha-Glucosidase Inhibitors, Hypoglycemics: Meglitinides, Hypoglycemics: Metformin, Hypoglycemics: Sulfonylureas, Hypoglycemics: Thiazolidinediones, Pancreatic Enzymes, Progestational Agents, and Methotrexate **continues to be PDL Eligible**	A	S	O	A	A	A	A	M	A	O	A	A
PDL Recommendations: **ANALGESICS, NARCOTICS LONG** NO change to the class	A	S	O	A	A	A	A	M	A	O	A	A
PDL Recommendations: **ANALGESICS, NARCOTICS SHORT** - The following drug changed from preferred to **NON-PREFERRED**: Tramadol 100 mg (Oral)	A	A	O	A	A	A	A	M	A	O	S	A
PDL Recommendatons: **ANDROGENIC AGENTS -** The following drug changed from non-preferred to **PREFERRED**: Androgel Gel Pump. The following drug changed from preferred to **NON-PREFERRED**: Testosterone Gel Pump (Androgel) (Transdermal)	A	A	O	A	A	A	A	M	A	O	S	A
PDL Recommendatons: **Antihyperuricemics** - The following drug changed from non-preferred to **PREFERRED**: Colchicine Tablet. The following drug changed from preferred to **NON-PREFERRED**: Colchicine Capsule. **Antimigraine Agents, Other** - The following drugs change from non-preferred to **PREFERRED:** Ajovy, Ajovy Autoinjector, Ajovy Autoinjector 3-PK, and Ubrelvy.	A	S	O	A	A	A	A	M	A	O	A	A
PDL Recommendatons: **ANTIMIGRAINE AGENTS, TRIPTANS** - The following drug changed from non-preferred to **PREFERRED**: Imitrex (Nasal). The following drug changed from preferred to **NON-PREFERRED**: sumatriptan (Nasal).	A	A	O	A	A	A	A	M	A	O	S	A

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PDL Recommendatons: **Cytokine & CAM Antagonists -** The following drug changed from non-preferred to **PREFERRED**: Renflexis (Intraven.) Biosimilar to Remicade. **Hypoglycemics: Incretin Mimetics/Enhancers** - The following drug changed from non-preferred to **PREFERRED**: Trulicity.	S	A	O	A	A	A	A	M	A	O	A	A
PDL Recommendatons: **Macrolides/Ketolides -** The following drug changed from non-preferred to **PREFERRED**: Erythromycin Ethylsuccinate 200 Susp (Oral). The following drug changed from preferred to **NON-PREFERRED**: EryPed 200 Susp (Oral)	S	A	O	A	A	A	A	M	A	O	A	A
PDL Recommendatons : **Multiple Sclerosis Agents -** The following drugs change from non-preferred to **PREFERRED**: Kesimpta (Subcutaneous), Tecfidera & Tecfidera Starter Pack (ORAL). The following drugs change from preferred to **NON-PREFERRED:** Gilenya (Oral), Rebif (Subcutaneous), and Rebif Rebidose Pen Injector (Subcutaneous).	A	A	O	A	A	A	A	M	A	O	S	A
PDL Recommendatons : **NSAIDS -** The following drug changed from non-preferred to **PREFERRED**: Diclofenac Sodium Gel OTC (Topical). **Progestational Agents -** The following drug changed from preferred to **NON-PREFERRED**: hydroxyprogesterone caproate single dose vial (IM).	A	A	O	A	A	A	A	M	A	O	S	A
Generic watch: Phosphodiesterase 5 Inhibitors (PDE-5) - The following drug changed from preferred to **NON-PREFERRED**: Revatio Suspension. The following drug changed from non-preferred to **PREFERRED**: sildenafil suspension. **Urinary Antispasmodics (Bladder Relaxant)** - The following drug changed from preferred to **NON-PREFERRED**: Vesicare. The following drug changed from non-preferred to **PREFERRED**: solifenacin.	A	A	O	A	A	A	A	M	A	O	S	A

DMAS March 18, 2021 P&T Committee Vote Talley:	Chethan Bachireddy (Chair)	Gill Abernathy	Alexis Aplasca	Ananda Basu	Ira Bloomfield	Michele Thomas for Alexis Aplasca	Carol Forster	Tim Jennings	Sarah Melton	Rachel Selby-Penczak	Megan Sarashinsky	Angela Venuto-Ashton
No changes to the following PDL classes: Acne Agents (topical), Alzheimer's Agents, GI Antibiotics, Antibiotics (topical), Anticoagulants, Antifungals (oral), Antifungals (topical), Antipsoriatic (topical), Antivirals (oral), Antivirals (topical), Cephalosporins And Related Antibiotics, Contraceptives (Other), Fluoroquinolones (oral), Glucocorticoids (inhaled), Glucocorticoids (oral), Hypoglycemics: Alpha-Glucosidase Inhibitors, Hypoglycemics: Insulin & Related Agents, Hypoglycemics: Meglitinides, Hypoglycemics: Metformin, Hypoglycemics: SGLT2, Hypoglycemics: Sulfonylureas, Hypoglycemics: TZD, Neuropathic Pain Agents, Opiate Dependence Treatments, Otic Antibiotics, Pancreatic Enzymes, Platelet Aggregation Inhibitors, Rosacea Agents (topical), Skeletal Muscle Relaxants, Smoking Cessation, Topical Very High Steroids, Stimulants and Related Agents	A	S	O	A	A	A	A	M	A	O	A	A
Update the criteria for all oral Hypoglycemics to allow a second hypoglycemic agent when the hemoglobin A1c is greater than 7.5% instead of 9%	A	A	O	A	A	A	A	M	A	O	S	A
Service Authorization Criteria for new MS drug - Kesimpta	A	S	O	A	A	A	A	M	A	O	A	A
Allow continuation of therapy for the new non-preferred Multiple Sclerosis drugs: Gilenya, Rebif and Rebif Rebidose Pen	A	A	O	A	A	A	A	M	A	O	S	A
Remove hard edit for Age on Asthma drugs, allow ProDUR edit to manage age	A	S	O	A	A	A	A	M	A	O	A	A
Motion to Adjourn Meeting	M	A	O	A	A	A	A	S	A	O	A	A

KEY
M = member made motion
S = member seconded motion
A = member approved
D = member voted against
X = member did not vote

O - absent