Attendance

[redacted]

Call to Order: 5:05pm

Approval of Minutes

Discussion	Action
May minutes – votes	10 Votes - accepted
Old Business: • None **New Business:** • None	No Discussion

New Products

Drug Name	Decision All Lines of Business (Where applicable)	Discussion	Vote Count
Mounjaro (tirzepatide) SQ	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Vivjoa (oteseconazole) capsule	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Vtama (tapinarof) cream	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Voquenza Triple & dual pak	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Amvuttra (vutrisiran) SQ	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0

Abbreviated New Products

Drug Name	Decision All Lines of Business (Where applicable)	Discussion	Vote Count
Drospirenone chewable tablet	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Ermeza (levothyroxine) oral solution	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Fylnetra (pegfilgrastim-pbbk) injection	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Priorix (MMR live) vaccine	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Radicava ORS oral suspension	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Relexxii (methylphenidate hydrochloride) extended release tablets	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Skyrizi (risankizumab-rzaa) IV & 360mg SQ	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
TPOXX (tecovirimat) IV	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Tyvaso (treprostinil) DPI	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Venbysi XR (venlafaxine) tablet	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0
Zonisade (zonisamide) oral solution	☐ Must Add ☒ May Add ☐ Do Not Add	None	Must Add- 0 May Add- 10 Do Not Add- 0

New FDA Indications

Drug Name	Decision All Lines of Business (Where applicable)	Discussion	Vote Count

Beovu (brolucizumab-dbll) injection	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Breyanzi (lisocabtagene maraleucel) IV	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Cellcept (mycophenolate) tablets	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Comirnaty (COVID-19, mRNA) vaccine	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Diacomit (stiripentol) cap/oral susp	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Dupixent (dupilumab) SQ	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Enhertu (fam-trastuzumab) IV	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Evrysdi (risdiplam) oral soln	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Hulio (adalimumab-fkjp) SQ	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Imcivree (setmelanotide) SQ	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Kymriah (tisagenlecleucel) IV	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Kyprolis (carfilzomib) IV	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Olumiant (baricitinib) tablet	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Opdivo (nivolumab) IV	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Qelbree (viloxazine) capsule	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Qsymia (phentermine/topiramate) ER capsule	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Riabni (rituximab-arrx) IV	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Rinvoq (upadacitinib) tablet	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Rubraca (rucaparib) tablet	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Skyrizi (risankizumab-rzaa) IV & 360mg SQ	☒ No Change ☐ Change	None	No Change- 10 Change- 0

Tibsovo (ivosidenib) tablet	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Vaxneuvance (pneumococcal 15-valent conjugate) vaccine	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Vidaza (azacitidine) SQ	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Xalkori (crizotinib) capsule	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Yervoy (ipilimumab) IV	☒ No Change ☐ Change	None	No Change- 10 Change- 0
Zulresso (brexanolone) IV	☒ No Change ☐ Change	None	No Change- 10 Change- 0

DURs

	Discussion
PA Medicaid	None

Formulary Revisions

PA Medicaid

Drug Name	Recommendation	Decision	Discussion	Vote Count
None	Add to formulary	☒ Add ☐ Do Not Add		Add- 10 Do Not Add-
Antiseptics (povidone-iodine solution and 10% ointment, iodine tincture, silver protein mild powder, antiseptic products misc-pads, thimerosal powder) Irrigants [Renacidin (citric acid-gluconolactone-magnesium carbonate solution), acetic acid 0.25% irrigation soln] Vitamins (vit C/E combo caps, Vit A & D w/C chew tab, Calcium/Vit C & D chew tab, glucose/Vit C chew tab, oral ascorbic acid crystals, wafer, powder, 100mg tab & chew tab, 1500mg ER tab)	Remove from formulary	☒ Remove ☐ Do Not Remove		Remove- 10 Do Not Remove-0

Policies

PA Medicaid

Policy Name	New/Revision	Decision (vote is for all new and revised policies)	Discussion
Gene Therapy Agents	☒ New Policy ☐ Policy Revision		None
Brineura Bylvay CAR-T Immunotherapy Compounds Corticotropin (HP Acthar, Purified cortrophin gel) Cystic Fibrosis Biologic Response Modifiers Daraprim (pyrimethamine) Enspryng Firdapse Gamifant Givlaari Livmarli Luxturna Oncology Medications, IV/Injectable Palforzia Pulmozyme Radicava Sandostatin LAR Depot SLE Agents SMA Medications Somatuline Depot Sublingual Allergy Immunotherapy (SLIT) Synagis Uplizna Zulresso	☐ New Policy ☒ Policy Revisions	☒ Approve as Written ☐ Do Not Approve as Written	None
PA Medicaid Operational Policies			
Continuity of Care Drug Recall or Withdrawal Process Drug Utilization Review (DUR) Program Formulary Management Oncology Medication Prior Authorization Process Pharmacy Audit of Denial Decisions Pharmacy Benefit Manager Oversight Pharmacy Denial System Controls Prior Authorization of Drugs Provider Accessibility to Staff Refill Too Soon Overrides	☐ New Policy ☒ Policy Revisions	☒ Approve as Written ☐ Do Not Approve as Written	COVID-19 at home test coverage: policy exists to ensure we are meeting state requirement and aligning all MCOs.

Final Discussion

None
Next Meeting Date: November 3, 2022
Time Meeting Adjourned: 5:25pm

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