

Attendance	
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]

Call to Order: 5:02

Approval of Minutes	
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Discussion	Action
August minutes - Vote	Vote - accepted
<u>Old Business:</u> <ul style="list-style-type: none"> None <u>New Business:</u> <ul style="list-style-type: none"> PA Medicaid and Medicare = Highmark Wholecare 	No Discussion

New Products

Drug Name	Decision	Discussion	Vote Count
	All Lines of Business (Where applicable)		
Fexinidazole	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Saphnelo (anifrolumab-fnia)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Nexviazyme (avalglucosidase alfa-ngpt)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Tavneos (Avacopan)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0

Qulipta (atogepant)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Skytrofa (lonapegsomatropin-tcgd)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Korsuva (difelikefalin)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Welireg (belzutifan)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Bylvay (odevixibat)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Livmarli (maralixibat)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Exkivity (mobocertinib)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Tivdak (tisotumab vedotin-tftv)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0

Abbreviated New Products			
Drug Name	Decision	Discussion	Vote Count
	All Lines of Business (Where applicable)		
Twynéo (tretinoin and benzoyl peroxide)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Semglee (insulin glargine-yfgn)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Uptravi (selexipag)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Gvoke (glucagon)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0

Trudhesa (dihydroergotamine mesylate)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Invega Hafyera (paliperidone palmitate)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add	██████████ Zercapli is the same sertraline but just a new strength and the Invega Hafyera is just a different dosing interval. Will there be prior authorization on these agents? ██████████ This is still to be discussed, but on the Medicare side these medications will be added as protected class medications. The LAIAs will likely have to fail a short acting product	Must Add- 0 May Add- 10 Do Not Add- 0
Byooviz (ranibizumab-nuna)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Opzelura (ruxolitinib)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Talzenna (talazoparib)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Zercapli (sertraline hydrochloride)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add	██████████ Zercapli is the same sertraline but just a new strength and the Invega Hafyera is just a different dosing interval. Will there be prior authorization on these agents? ██████████ This is still to be discussed, but on the Medicare side these medications will be added as protected class medications. The LAIAs will likely have to fail a short acting product	Must Add- 0 May Add- 10 Do Not Add- 0
Zimhi (naloxone hydrochloride)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Seglantis (celecoxib/tramadol)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0
Tyrvaya (varenicline solution)	<input type="checkbox"/> Must Add <input checked="" type="checkbox"/> May Add <input type="checkbox"/> Do Not Add		Must Add- 0 May Add- 10 Do Not Add- 0

New FDA Indications			
Drug Name	Decision	Discussion	Vote Count
	All Lines of Business (Where applicable)		
Keytruda (pembrolizumab)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Lenvima (lenvatinib)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0

Opdivo (nivolumab)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Tibsovo (ivosidenib)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Brukina (zanubrutinib)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Jemperli (dostarlimab-gxly)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Cabometyx (cabozantinib)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Jakafi (ruxolitinib)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Tasigna (nilotinib)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Tecartus (brexucabtagene autoleucel)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Erbitux (cetuximab)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Verzenio (abemaciclib)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Tecentriq (atezolizumab)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Bydureon (exenatide)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Dalvance (dalbavancin)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Lexette (halobetasol propionate)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Briviact (brivaracetam)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Repatha (evolocumab)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Biktarvy (bictegravir/emtricitabine/tenofovir alafenamide)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Vimpat (lacosamide) IV and PO	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Octagam IVIG	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Drizalma Sprinkle (duloxetine)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Nucala (mepolizumab)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Botox (onabotulinumtoxinA)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0

Mirena (levonorgestrel)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Xywav (calcium, magnesium potassium, and sodium oxybates)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Jardiance (empagliflozin)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Xarelto (rivaroxaban)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0
Dextenza (dexamethasone)	<input checked="" type="checkbox"/> No Change <input type="checkbox"/> Change		No Change- 10 Change- 0

DURs	
	Discussion
PA Medicaid	No Discussion

Formulary Revisions				
PA Medicaid				
Drug Name	Recommendation	Decision	Discussion	Vote Count
AutoPen	Remove from formulary	<input checked="" type="checkbox"/> Remove <input type="checkbox"/> Do Not Remove		Remove- 10 Do Not Remove-0
CeQur Simplicity	Remove from formulary	<input checked="" type="checkbox"/> Remove <input type="checkbox"/> Do Not Remove		Remove- 10 Do Not Remove-0
Medtronic InPen	Remove from formulary	<input checked="" type="checkbox"/> Remove <input type="checkbox"/> Do Not Remove	██████ for the INPEN, are the alternatives approved for all ages because the INPEN is frequently used for children ██████ Novopen Echo has been used in children 2 years of age and this change will only affect new starts.	Remove- 10 Do Not Remove-0
BD Pen Mini	Remove from formulary	<input checked="" type="checkbox"/> Remove <input type="checkbox"/> 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
Bylvay (odevixibat)	<input checked="" type="checkbox"/> New Policy <input type="checkbox"/> Policy Revision	<input checked="" type="checkbox"/> Approve as Written <input type="checkbox"/> Do Not Approve as Written	None

Strensiq Phenylketonuria Medications- Palynziq (pegvaliase-PQPZ) and Kuvan (sapropterin) Xywav (calcium, magnesium, potassium, and sodium oxybates) and Xyrem (sodium oxybate) Isturisa (osilodrostat) Immune Globulin Products Systemic Lupus Erythematosus (SLE) Agents Enzyme Replacement Therapy, Pompe Disease Gattex (teduglutide) Compounds Nuedexta (dextromethorphan hydrobromide and quinidine sulfate) Myalept (metreleptin) Qbrexza (glycopyrronium) Crysvisa (burosumab-twza) Vyndaqel (tafamidis meglumine) and Vyndamax (tafamidis) Sucraid (sacrosidase) Xiaflex (collagenase clostridium histolyticum) Alpha1 Proteinase Inhibitors Pulmonary Arterial Hypertension (PAH) injectable agents Onpattro (patisirán) and Tegsedi (inotersen) Spinal Muscular Atrophy (SMA) Medications	<input type="checkbox"/> New Policy <input checked="" type="checkbox"/> Policy Revisions		None
Zyvox	<input checked="" type="checkbox"/> Retire		None

PA Medicaid Operational Policies

Pharmacy Copays Pharmacy Auxiliary Services	<input checked="" type="checkbox"/> New Policy <input type="checkbox"/> Policy Revisions	<input checked="" type="checkbox"/> Approve as Written <input type="checkbox"/> Do Not Approve as Written	None
Formulary Management Pharmacy and Therapeutics Committee Clinical Policy Development Process Restricted Members Pharmacy Access During Disasters Specialty Pharmacy Program Pharmacy Member Portal Pharmacy Coding Requests Direct Member Reimbursement (DMR) Split Fill Program Pharmacy Care Coordination with BH-MCOs Second Level PBM Provider Pricing Dispute Resolution Process Oncology Analytics Prior Authorization Process Pharmacy System Controls	<input type="checkbox"/> New Policy <input checked="" type="checkbox"/> Policy Revisions	<input checked="" type="checkbox"/> Approve as Written <input type="checkbox"/> Do Not Approve as Written	None

Final Discussion

None

Next Meeting Date: February 3, 2022

Time Meeting Adjourned: 5:44

Respectfully Submitted:

[Redacted Signature]