

Pharmacy and Therapeutics Committee Provider Update

Formulary and pharmacy benefit updates for Presbyterian Healthcare Services professionals, providers and staff

THIRD QUARTER 2023

P&T Committee Decisions Effective September, 2023

The Presbyterian Health Plan, Inc., and Presbyterian Insurance Company, Inc., (Presbyterian) Pharmacy and Therapeutics (P&T) Committee meets quarterly to promote the appropriate use of drugs to maintain the Presbyterian formularies and support our network of practitioners. The P&T Committee met on **July 19, 2023**, and we would like to share the decisions made at the meeting that affect our formularies and pharmacy benefits.

Centennial, Commercial and Metal Formulary Updates

Drug Name	Therapeutic Class	Centennial Care*	Commercial*	Metal Level Plans*
Formulary Additions				
Trikafta ® (elexacaftor/tezacaftor/ivacaftor; ivacafto) 100-50-75-75mg and 80-40-60-59.5mg oral granules	Respiratory Agent	F, PA, QL, SP	T4, PA, QL, SP	T5, PA, QL, SP
Kalydeco ® (ivacaftor) 150mg oral tablets and 5.8mg, 13.4mg, 25mg, 50mg, 75mg oral granules	Respiratory Agent	F, PA, QL, SP	T4, PA, QL, SP	T5, PA, QL, SP
Talzenna ® (talazoparib) 0.1mg, 0.25mg, 0.35mg, 0.5mg, 0.75mg, 1mg oral capsules	Respiratory Agent	F, PA, QL, SP	T4, PA, QL, SP	T5, PA, QL, SP
Zejula ® (niraparib) 100mg, 200mg, 300mg oral tablets	Antineoplastic	F, PA, QL, SP	T4, PA, QL, SP	T5, PA, QL, SP
Gvoke Hypopen ® (glucagon) <i>Added to Centennial Care and Exchange formularies effective July 20, 2023.</i>	Antidiabetic	F	T2	T3
Guardian 4 ® Continuous Glucose Monitoring System	Medical Device	F, PA, QL	T2, PA, QL	T3, PA, QL
Pheburane ® (sodium phenylbutyrate) 483mg/gm oral pellets <i>Added to Centennial Care formulary.</i>	Endocrine and Metabolic Agent	F, PA, QL, SP	NF	NF
sodium oxybate (authorized brand alternative for Xyrem ®) 500mg/mL oral solution <i>Effective June 26, 2023.</i>	Central Nervous System Depressant	F, PA, QL	T4, PA, QL	T5, PA, QL
*MB = Medical Benefit, ME = Medical Exception, F = Formulary, NF = Non-Formulary, PA = Prior Authorization Required, QL = Quantity Limits Apply, BH = Behavioral Health Drug, SP = Specialty Pharmacy Mandated, ST = Step Therapy Required, AL = Age Limit, BE = Benefit Exclusion, NDS = Non-extended day supply				

Centennial, Commercial and Metal Formulary Updates

Drug Name	Therapeutic Class	Centennial Care*	Commercial*	Metal Level Plans*
New Generics – unless otherwise noted. When a generic product becomes available, the brand-name product will be removed from the formularies.				
gefitinib (generic for Iressa [®]) 250mg oral tablets	Antineoplastic	F, PA, QL, SP	T4, PA, QL, SP	T5, PA, QL, SP
darunavir (generic for Prezista [®]) 600mg, 800mg oral tablets	Antiviral	F, QL	T2, QL	T3
Other Changes				
Rinvoq [®] (upadacitinib) 15mg, 30mg, 45mg extended-release oral tablets <i>Updated Prior Authorization Criteria for Centennial Care, Commercial and Exchange formularies.</i>	Janus Kinase Inhibitor	F, PA, QL, SP	T4, PA, QL, SP	T5, PA, QL, SP
Injectafer [®] (ferric carboxymaltose) 100mg/2mL, 750mg/15mL injection <i>Updated Prior Authorization Criteria for Centennial Care, Commercial and Exchange formularies.</i>	Iron Replacement Product	MB, PA	MB, PA	MB, PA
Descovy [®] (Emtricitabine-tenofovir alafenamide) 120-15mg and 200-25mg oral tablets <i>Added Prior Authorization Criteria for Centennial Care, Commercial and Exchange formularies.</i>	Antiviral	F, PA, QL	T4, PA, QL	T5, PA, QL
Glucagon [®] Emergency Kit (glucagon) <i>Removed from Centennial Care, Commercial and Exchange formularies effective July 13, 2023.</i>	Antidiabetic	NF	NF	NF
Imbruvica [®] (ibrutinib) 560mg oral tablets <i>Removed from Centennial Care, Commercial and Exchange formularies effective July 19, 2023.</i>	Antineoplastic	F, PA, QL, SP	T4, PA, QL, SP	T5, PA, QL, SP
Restasis [®] Multidose Vial (cyclosporine) 0.05% ophthalmic emulsion <i>Removed from Centennial Care, Commercial and Exchange formularies.</i>	Ophthalmic Agent	NF	NF	NF
insulin glargine-yfgn (generic for Semglee [®]) 100U/mL injection <i>Removed from Centennial Care formulary.</i>	Antidiabetic	NF	T2, QL	T3, QL
Xyrem [®] (sodium oxybate) 500mg/mL oral solution <i>Removed from Centennial Care, Commercial and Exchange formularies effective June 26, 2023.</i>	Central Nervous System Depressant	NF	NF	NF
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Medicare Formulary Changes

Drug Name	Coverage*	Effective Date
Formulary Additions		
quetiapine (generic for Seroquel ®) 150mg tablet	T2	05/01/2023
posaconazole (generic for Noxafil ®) 40mg/mL suspension	T5	07/01/2023
vancomycin (generic for Firvanq ®) 250mg/5mL solution	T3	07/01/2023
Formulary Deletions		
Celontin ® (methsuximide) 300mg oral capsules		08/01/2023
New Generics		
methsuximide (generic for Celontin ®) 300mg oral capsules	T4	
New Products		
primidone (generic for Mysoline ®) 125mg tablet	T2	07/01/2023
Rotarix ® (rotavirus vaccine live) oral suspension	T3	07/01/2023
Tyblume ® (levonorgestrel and ethinyl estradiol) 20mcg; 0.1mg	T3	06/01/2023
Austedo ® XR (deutetrabenazine er) 6mg, 12mg, 24mg tablet	T5	07/01/2023
Lumakras ® (sotorasib) 320mg tablet	T5	07/01/2023
Other Formulary Changes		
Humira ® (adalimumab) 80mg/0.8mL, 40 mg/0.4mL, 80mg/0.8mL pediatric Crohns start prefilled syringe kits 40mg/0.8mL, 80mg/0.8mL cd/uc/hs starter pen injector kits 80mg/0.8mL pediatric uc start pen-injector kit 80mg/0.8mL, 0mg/0.4mL psor/uveit starter pen-injector kit 40mg/0.8mL ps/uv/adol hs start pen-injector kit 40mg/0.4mL, 40mg/0.8mL, 80mg/0.8mL pen-injector kits;10mg/0.1mL, 20mg/0.2mL, 40mg/0.4mL, 40mg/0.8mL prefilled syringe kits <i>PA updated</i>	T5	05/01/2023
Kineret ® (anakinra) 100mg/0.67mL prefilled syringe <i>PA updated</i>	T5	05/01/2023
Orencia ® (abatacept) 50mg/0.4mL, 87.5mg/0.7mL, 125mg/mL prefilled syringe 125mg/mL Clickject auto-injector 250mg reconstituted IV solution <i>PA updated</i>	T5	05/01/2023
Otezla ® (apremilast) 30mg tablet 10mg, 20mg, 30mg therapy pack <i>PA updated</i>	T5	05/01/2023
Rinvoq ® (upadacitinib) 15mg, 30mg, 45mg 24-hour extended-release tablet <i>PA updated</i>	T5	05/01/2023
Stelara ® (ustekinumab) 130mg/26mL IV solution, 45mg/0.5mL solution 45mg/0.5mL, 90mg/mL prefilled syringe <i>PA updated</i>	T5	05/01/2023
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Medicare Formulary Changes

Drug Name	Coverage*	Effective Date
Xeljanz [®] (tofacitinib) 1mg/mL solution, <i>PA updated</i>	T5	05/01/2023
hydroxyzine (generic for Atarax [®]) 10mg, 25mg, 50mg tablet; 25mg, 50mg, 100mg capsule; <i>PA updated</i>	T4	06/01/2023
Belsomra [®] (suvorexant) 5mg, 10mg, 15mg, 20mg tablet; <i>PA updated</i>	T4	06/01/2023
Dayvigo [®] (lemborexant) 5mg, 10mg tablet; <i>PA updated</i>	T4	06/01/2023
Aimovig [®] (erenumab-aooe) 70mg/mL, 140mg/mL auto-injector solution; <i>Tier lowered</i>	T3	07/01/2023

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ADDITIONAL ALERTS

Prior Authorization Criteria Updates – Oncology

Product Lines: Centennial Care, Commercial and Metal Level Plans

Recommendation: Update the oncology prior authorization criteria for the Centennial Care, Commercial and Metal Level formularies to the following:

- There must be a Category 1 or 2A recommendation in the National Comprehensive Cancer Network (NCCN) compendium
 - If two or more regimens/agents carry the same NCCN recommendation, a review of the evidence blocks should be submitted with the requesting documentation OR
- There must be a Class I or II recommendation in the Thomson Micromedex DrugDex compendium

Analyzing the NCCN Evidence Blocks during the prior authorization review for an oncology drug will allow for a more comprehensive review of the NCCN Guidelines. Requiring 2A and above will allow for a regimen/agent with a stronger level of support for its use.

Medicare Part B Step Therapy Criteria Updates

A recent review of the Medicare Part B Step Therapy Criteria was performed, and the following agents are recommended as additions: Actemra, Entyvio, Infliximab, Orencia, Tepezza and Stelara. Adding step requirements to these agents will ensure that our preferred, more cost-effective therapies that are used to treat the same indications are selected.

How to Enroll Eligible Members into the Synagis[®] Program for 2023 -2024 RSV Season

Presbyterian is committed to providing quality healthcare services to our members. We would like to take this opportunity to remind you of the process for members to join the Synagis[®] Program for the 2023-2024 respiratory syncytial virus (RSV) season. RSV season typically begins in the late fall and extends through spring, but the start of the season is determined yearly by the New Mexico Pediatric Society.

Providers can enroll eligible members for the Synagis® Program by completing the New Mexico Synagis® Prior Authorization/Statement of Medical Necessity/Order Form. The criteria for admission are in alignment with current guidance from the American Academy of Pediatrics. A copy of the New Mexico Synagis® Prior Authorization/Statement of Medical Necessity/Order Form and the criteria for admission may be found online at https://onbaseext.phs.org/PEL/DisplayDocument?ContentID=PEL_00179418.

Presbyterian Specialty Care Pharmacy will be dispensing Synagis to providers and home health agencies for administration. For timely processing, please send the completed form to Presbyterian Specialty Care Pharmacy at the same time the form is sent to Presbyterian Health Plan for authorization (see below for fax numbers). Please include the name of the group that will be administering the medication – office, home health agency, etc. Home health requires referrals from the prescriber. The pharmacy will work with the home health agency or office to schedule delivery once the prescription is ready. The pharmacy will dispense epinephrine with the first fill of Synagis for each patient and can provide refills if requested. **To obtain prior authorization, fax request to both numbers below:**

Presbyterian Health Plan Pharmacy Services: 1-800-724-6953

Presbyterian Specialty Care Pharmacy: 1- 866-248-0801

For prior authorization questions, please call (505) 923-5757 (select option 3 and follow the prompts) or 1-800-356-2219. For specialty pharmacy questions, please call (505) 823-8800 or 1-855-775-7737.

Food and Drug Administration (FDA) Alerts April 11, 2023, to July 12, 2023

For a full list of FDA alerts and additional information, see the FDA website at:

<https://www.fda.gov/safety/recalls-market-withdrawals-safety-alerts>.

- 1. Recall of Freestyle Libre Readers Manufactured by Abbott [04/12/2023]:** Abbott announced a voluntary recall of Freestyle Libre, Libre 14-day and Libre 2 Flash Glucose Management Systems' reader devices because the batteries may get extremely hot, spark or catch on fire if not properly stored, charged or used with its Abbott-provided USB cable and power adapter. Patients were advised to contact their pharmacy or Abbott to check if their reader needs to be replaced or to ask for a replacement USB cable and charger.
Presbyterian's Response: Informed providers in the Pharmacy and Therapeutics Committee Updates newsletter (P&T newsletter) and sent letters to notify prescribing providers and members with prescription claims for potentially affected lots of the device.
- 2. Recall of Various Products Manufactured by Akorn [04/26/2023]:** Akorn announced a voluntary, consumer-level recall of multiple drug products due to the company declaring bankruptcy and ceasing all operations. Patients should contact their pharmacy to ask if they can get a safe replacement.
Presbyterian's Response: Informed providers in the P&T newsletter and sent letters to notify prescribing providers and members with prescription claims for potentially affected lots of medication.
- 3. Recall of Fentanyl Buccal Tablets CII Manufactured by Teva USA [04/27/2023]:** Teva announced a voluntary, consumer-level recall of specific lots of Fentanyl Buccal Tablets CII due to a labeling error in which safety updates were omitted in the products' insert/medication guide. Patients should contact their pharmacy to ask if they can get a safe replacement.
Presbyterian's Response: Informed providers in the P&T newsletter.

4. **Recall of Dronabinol 2.5mg Capsules and Ziprasidone 20mg Capsules Manufactured by The Harvard Drug Group, LLC [06/13/2023]:** The Harvard Group, LLC announced a voluntary recall of a single lot of Dronabinol 2.5mg capsules and Ziprasidone 20mg capsules due to a labeling mix-up that resulted in packaging that may contain the incorrect product. Patients should contact their physician or healthcare provider if they have experienced any problems that may be related to taking or using this drug product.

Presbyterian's Response: Informed providers in the P&T newsletter.

5. **Recall of Albuterol Sulfate 90mcg Inhalation Aerosol Manufactured by Cipla [07/06/2023]:** Cipla announced a voluntary, consumer-level recall of six batches of Albuterol Sulfate 90mcg Inhalation Aerosol due to failure to deliver the recommended dose. Patients should stop using the recalled product and contact their pharmacy to ask if they can get a safe replacement.

Presbyterian's Response: Informed providers in the P&T newsletter and sent letters to notify prescribing providers and members with prescription claims for potentially affected lots of medication.

NOTE: Notification is sent to Presbyterian members regarding Class I or II drug recalls or market withdrawals due to a drug safety issue. Notifications regarding drug recalls that are lot-specific are not required as it is not possible for the health plan to identify members who were dispensed a specific lot of a medication.

Presbyterian formularies and updates, including restrictions (e.g., quantity limits, step therapy and prior authorization criteria) and preferences, are available online at the following link:

www.phs.org/providers/formularies/Pages/default.aspx.

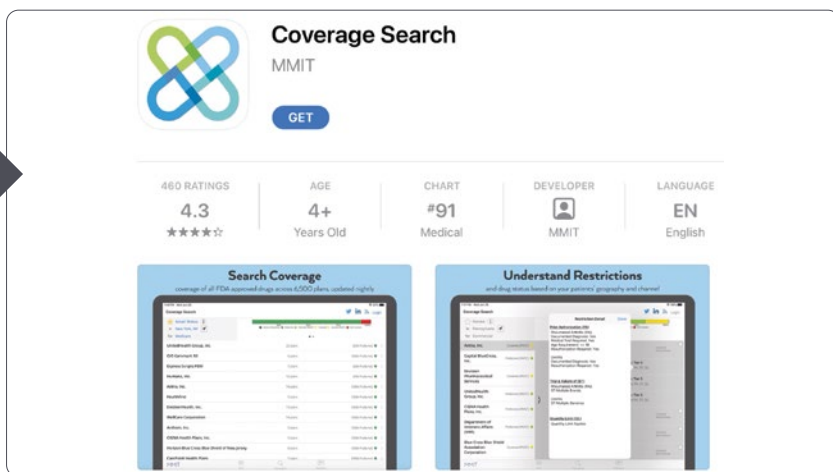
Current and past issues of the Pharmacy & Therapeutics (P&T) Committee Provider Updates are available online at www.phs.org/providers/formularies.

The Universal Practitioner and Provider Manual and the Centennial Care Practitioner and Provider Manual are also available online at www.phs.org/providermanual and include information about pharmacy benefits, the prior authorization process, generic substitution and requesting non-formulary medications based on medical necessity. Providers may receive a printed copy of the Centennial Care Practitioner and Provider Manual at no cost from Presbyterian by contacting their Provider Network Operations relationship executive. Providers may find their relationship executive's contact information at www.phs.org/ContactGuide.

Coverage Search App

As a reminder, Presbyterian formularies are also accessible through the Managed Markets Insights & Technology, LLC (MMIT) Formulary Search App. No registration, username or passwords are required.

Search from your desktop at www.FormularyLookup.com or download the free Coverage Search app today.



Requests for Formulary Additions, Deletions or Modifications

Use the Formulary Addition Request form to request medication additions, deletions or other changes to the Presbyterian formularies. Complete and submit the form to askphppt@phs.org. The form can be accessed at http://docs.phs.org/idc/groups/public/documents/communication/pel_00251399.pdf.

Presbyterian Formularies

Presbyterian strives to give our providers access to the information and support they need. One way we do this is by providing information on medications that are covered by the plan. Presbyterian formularies may be accessed in the following ways:

- Searchable formularies are available on the Formularies page of the provider website at the following link: www.phs.org/providers/formularies. Providers may search for a drug using this tool by viewing an alphabetical list of drugs, searching by drug name, or searching by therapeutic class. Providers may also learn if a covered drug has any restrictions by clicking on the link for the drug.
- Providers can access PDF versions of Presbyterian formularies and updates, including preferences and restrictions (e.g., quantity limits, step therapy and prior authorization criteria), which are available on the Formularies page of the provider website at the link previously provided.
- Presbyterian formularies may also be accessed using Managed Markets Insights & Technology, LLC (MMIT) Formulary Search App. No registration, username or passwords are required. Search from your desktop at www.FormularyLookup.com, or download the free app from the App Store or Google Play.

For questions about the formulary coverage of medications, please call Presbyterian's Pharmacy Services Help Desk at (505) 923-5500 or toll-free at 1-888-923-5757. Help Desk business hours are Monday through Friday, from 8 a.m. to 5 p.m. You may also email ASKRX@phs.org. The email box is monitored during regular business hours, Monday through Friday, from 8 a.m. to 5 p.m., and one of our clinical pharmacists will respond within one business day.



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Contact Us



Changes to our formularies are based on requests from our practitioners and the recommendations of the P&T Committee. We value your input. If you have any questions or concerns, please email askphppt@phs.org.