



Contra Costa Health Plan
P&T Formulary Update
 April 20, 2018

Volume 5

Changes effective:

Contra Costa Health Plan Pharmacy & Therapeutics (P&T) Committee Decisions

On April 20, 2018 the CCHP P&T Committee reviewed the following Therapeutic Classes, Drug Monographs and PA criteria for efficacy, safety, utilization, cost and safety:

Therapeutic Class Reviews	
<ul style="list-style-type: none"> Gaucher's Disease Oral contraceptives Phosphate binders Anti-convulsants Opiate agonists Selected prenatal vitamins 	<ul style="list-style-type: none"> Anti-depressants Anti-psychotics Anti-platelet agents SGLT2 Inhibitors Selected immunotherapy agents
Drug Monographs	
<ul style="list-style-type: none"> None 	
Prior Authorization Criteria Updates	
<p><u>New criteria was created for the following agents:</u></p> <ul style="list-style-type: none"> Ingrezza (valbenazine) Trintellix (vortioxetine) Viibryd (vilazodone) Rexulti (brexipiprazole) Lysteda (tranexamic acid) Vimpat (lacosamide) <p><u>Updates were made to the criteria for the following agents:</u></p> <ul style="list-style-type: none"> Zetia (ezetimibe) Brilinta (ticagrelor) Naloxone nasal spray Jardiance (empagliflozin) Synjardy (empagliflozin/metformin) Renvela (sevelamer) <p><u>Criteria reviewed and unchanged:</u></p> <ul style="list-style-type: none"> Kymriah (tisagenlecleucel) 	

<ul style="list-style-type: none"> • Provenge (sipuleucel-T) • Ridaura (auranofin) 	
Guest Speaker(s)	
<ul style="list-style-type: none"> • CCRMC Cardiology Team (via email): Dr. Bryan Ristow, Dr. Denis Mahar, Dr. Stephen Arnold • Susan Kalaei, PharmD (Contra Costa Behavioral Health Pharmacist) 	
<u>CCHP P&T Committee approved the following modifications to the formulary:</u>	
Medication Name & Dosage Strength	Approved Formulary Changes
Zetia (ezetimibe) 10mg	Remove PA requirements and add to the formulary as a tier 2 agent. Will require statin step therapy (defined as at least a 30 day fill of any statin within the past 120 days). Members currently taking Zetia will be grandfathered.
Brilinta (ticagrelor) 90mg	Remove PA requirements and add to the formulary as a tier 2 agent. Quantity and duration limits will apply (limited to #60 tablets per month, and a total duration of 12 months of therapy). Brilinta 60mg tablets remain non-formulary.
Nasal naloxone (Adapt Pharma 4mg/0.1mL)	Remove PA requirements and add to the formulary as a tier 2 agent. Will be limited to 2 doses per 180 days for commercial plan members only. Note: this product remains a Medi-Cal carve-out drug.
Jardiance (empagliflozin)	Remove PA requirements and add to the formulary as a tier 2 agent. Will require metformin step therapy (defined as at least a 30 day fill within the past 120 days). Members currently taking Jardiance will be grandfathered.
Synjardy (empagliflozin/metformin)	Remove PA requirements and add to the formulary as a tier 2 agent. Will require metformin step therapy (defined as at least a 30 day fill within the past 120 days). Members currently taking Synjardy will be grandfathered.
Renvela (sevelamer)	Remove PA requirements and add to the formulary as a tier 2 agent. Will require calcium acetate step therapy (defined as at least a 30 day fill within the past 120 days).
New Product Reviews	

- Zenpep (lipase/protease/amylase)
- Cinvanti (aprepitant)
- Vyzulta (latanoprosene)
- Juluca (dolutegravir/rilpivirine)
- Prevymis (letermovir)
- Mepsevii (vestronidase alfa)
- Ozempic (semaglutide)
- Bosulif (bosutinib)
- Trisenox (arsenic trioxide)
- Heplisav-B (HepB vaccine)
- Odactra (dust mite allergen extract)
- Clinimix (AA/electrolytes)
- Sublocade (buprenorphine)
- DicloPR (diclofenac)
- Lutathera (lutetium LU 177)
- Nipride RTU (nipride)
- Clenpiq (Na picosulfate, Mag ox)
- Fibryga (fibrinogen)
- Opdivo (nivolumab)
- Solosec (secnidazole)
- Prolastin-C (alpha-1 proteinase inhibitor)
- Alumbrig (brigatinib)
- Steglatro (ertugliflozin)
- Luxturna (voretigene)
- Xigduo XR (dapagliflozin/metformin)
- Adzenys ER (amphetamine)
- Impoyz (clobetasol)
- Steglujan (ertugliflozin/sitagliptin)
- Noctiva (desmopressin nasal)
- Giapreza (angiotensin II acetate solution)
- Sinuva (mometasone implant)
- Segluromet (ertugliflozin/metformin)