



Contra Costa Health Plan
P&T Formulary Update
June 11, 2021

Volume 18

Changes effective: 7/15/2021

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

On June 11, 2021 the CCHP P&T Committee reviewed the following Therapeutic Classes, Drug Monographs and PA criteria for efficacy, safety, utilization, cost and safety:

Formulary Changes

Formulary Additions

- **Cabenuva 400mg/600mg Kit**-Commerical members are Tier 1
- **Cabenuva 600mg/900mg Kit**-Commerical members are Tier 1

Formulary Additions that require Prior Authorization

- **Qelbree ER 100mg, 150mg, 200mg capsules**
- **Verquvo (vericiguat) 2.5mg, 5mg, 10mg**
- **Orilissa 150mg, 200mg**
- **Androderm 2mg/24hr patch, 4mg/24hr patch**
- **Androgel 1% packet 25mg/2.5g, 50mg/5g**
- **Breztri Aerosphere (budesonide 160mcg/glycopyrrolate 9mcg/formoterol fumarate 4.8mcg). 5.9g and 10.7g**
- **Deutetrabenazine (Austedo) 6mg, 9mg, 12mg**

Removed from Formulary

- **pentobarbital sodium (Nembutal®) 50 mg/mL injection solution**
- **phenobarbital sodium 130 mg/mL injection solution**
- **phenobarbital sodium 65 mg/mL injection solution**
- **fosphenytoin 100 mg PE/2 mL injection solution**
- **fosphenytoin 500 mg PE/10 mL injection solution**
- **levetiracetam 500 mg/5 mL intravenous solution**
- **valproate sodium 500 mg/5 mL (100 mg/mL) intravenous solution**
- **diazepam 5 mg/mL injection syringe/solution**

Prior Authorization Criteria Updates

New criteria:

- **Testosterone products: Androderm 2mg/24hr patch, 4mg/24hr patch, Androgel 1% packet 25mg/2.5g, 50mg/5g, Vogelxo 1% topical gel in pump**
- **Orilissa (Elagolix) 150mg and 200mg oral tablets**

Updates were made to the criteria for the following agents:

- **Freestyle Libre Readers and Sensors**
- **Adalimumab (Humira)**
- **Anti-Obesity Medications: Orlistat (Xenical), Phentermine/topiramate (Qsymia)**
- **Epidiolex (cannabidiol)**
- **CGRP Antagonists: Aimovig, Emgality, Vyepti**
- **Etanercept (Enbrel)**
- **Golimumab (Simponi)**
- **Infliximab (Remicade, Inflectra, Renflexis, Avsola)**
- **ICS/LABA: Breztri Aerosphere**
- **Tofacitinib (Xeljanz XR)**
- **Ustekinumab (Stelara)**
- **VMAT2 Inhibitors for Tardive dyskinesia: Valbenazine, Austedo**
- **Vedolizumab (Entyvio)**

Guest Speaker(s)

- None

CCHP P&T Committee approved the following modifications to the formulary:

Medication Name & Dosage Strength	Approved Formulary Changes
CABENUVA 400-mg/600-mg Kit	Change to T1 Formulary Status in commercial members
CABENUVA 600-mg/900-mg Kit	
pentobarbital sodium (Nembutal®) 50 mg/mL injection solution	Remove from Formulary
phenobarbital sodium 130 mg/mL injection solution	
phenobarbital sodium 65 mg/mL injection solution	
fosphenytoin 100 mg PE/2 mL injection solution	
fosphenytoin 500 mg PE/10 mL injection solution	
levetiracetam 500 mg/5 mL intravenous solution	
valproate sodium 500 mg/5 mL (100 mg/mL) intravenous solution	
diazepam 5 mg/mL injection syringe/solution	
QELBREE ER 100 MG, 150MG, 200MG CAPSULE	Add to Tier 3-PA required status
Verquvo (vericiguat) 2.5mg, 5mg, 10mg	
Orilissa 150mg, 200mg	
Androderm 2mg/24hr patch, 4mg/24hr patch	
Androgel 1% packet 25mg/2.5g, 50mg/5g	
Breztri Aerosphere	
Deutetrabenazine (Austedo) 6mg, 9mg, 12mg	
New Product Reviews (including new indications)	
Lupkynis (voclosporin) 7.9mg capsule	- Fotivda (tivozanib) HCl 0.89mg - Ponvory (ponesimod) 14-Day Starter Pack 2-3-4-5-6-7-8-9-10 mg tablets

• Cabenuva (cabotegravir/rilpivirine) 200 mg/mL-300 mg/mL (400 mg/600 mg kit, 600 mg/900 mg kit) IM suspension, extended release • Verquvo (vericiguat) 2.5 mg, 5 mg, 10 mg tablet • Tepmetko (tepotinib) 225mg tablet • Vocabria (cabotegravir) 30mg tablet • Ukoniq (umbralisib tosylate) 200mg tablet • Evkeeza (evinacumab-dgnb) 345 mg/2.3 mL, 1200 mg/8 mL (150 mg/mL) intravenous solution • Gamifant (emapalumab-lzsg) 5 mg/mL intravenous solution • Amondys-45. casimersen 50 mg/mL intravenous solution • Nulibry (fosdenopterin) hydrobromide 9.5mg IV	• fluorescein-benoxinate (benoxinate HCl/fluorescein0 sod 0.3%-0.4 % eye drop • Abecma (idecabtagene vicleucel) 300×10^6 to 460×10^6 cell intravenous suspension • Zegalogue dasiglucagon HCl 0.6 mg/0.6 mL subcutaneous syringe, auto-injector • Qelbree viloxazine HCl 100 mg, 150 mg, 200 mg capsule, extended release • Artesunate 110 mg intravenous solution
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