

**Enterprise P&T Meeting
Committee
November 4, 2024**

Voting Members Present

| | | | |
|-----------------------|-----------------------|-------------------------|----------------------|
| Michael Baer, MD | Rogers Elebra, PharmD | Michelle Murphy, PharmD | Christy Skibicki, MD |
| David Batluck, DO | Fury Fecondo, PharmD | Eric Peters, PharmD | Wayne Weart, PharmD |
| Robert Clifford, MD | Robert Hockmuth, MD | Andrew Peterson, PharmD | Rani Whitfield, MD |
| Donald Cooper, PharmD | Emily Kryger, PharmD | David Petkash, MD | |
| Tracey Davis, PharmD | Kelly Martin, PharmD | Jena Quinn, PharmD | |

Excused Voting Members

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| Christopher Antypas, PharmD | Lenaye Lawyer, MD | | |
| Donald Beam, MD | Yavar Moghimi, MD | | |
| Floyd (John) Brinley, MD | | | |
| Kirt Caton, MD | | | |
| Loretta Dumontet, MD | | | |

Invited Guests Present

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| Christian Andreaggi, PharmD | Sheireen Huang, PharmD | Sarah Pawlak, PharmD | Lance Vinci, Pharmacy |
| Bethany Baird, CPhT | Amanda Hunter, PharmD | Jeanine Plante, PharmD | Lauren Washington, CPhT |
| Linda Carreras, CPhT | Toks Kassim, PharmD | Alishia Richie, MD | Arlene Wiseman, PharmD |
| Sheena Cherian, PharmD | Jeffrey Kreitman, PharmD | Ally Seitz, PharmD | |
| Kathleen Clement | Geraldine Marks, PharmD | Ruth Smith, PharmD | |
| Rajneel Farley, PharmD | Lauren Megargell, PharmD | Luke Stadler, PharmD | |

| Issue | Discussion | Conclusion/Results | Vote | Action/ Person Responsible |
|--|---|--|------|----------------------------|
| 1. Call to Order | The meeting was called to order at 6:03 PM EST. Welcomed all external and internal participants. | Informational Only | | Jeffrey Kreitman |
| 2. Conflict of Interest Disclosure | No conflicts announced | Informational Only | | Jeffrey Kreitman |
| 3. Charter (p. 5) | | Committee approved as recommended: Motion: Robert Clifford Second: Andrew Peterson | | Jeffrey Kreitman |
| ██████████ | | ██████████ | | ██████████ |
| 5. Review and approval of July P&T Minutes | | Committee approved as recommended: Motion: Don Cooper Second: David Batluck | | Jeffrey Kreitman |
| 6. Old Business | | | | |

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| | <ul style="list-style-type: none"> [REDACTED] | | | |
| [REDACTED] | <ul style="list-style-type: none"> [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] | <ul style="list-style-type: none"> [REDACTED] [REDACTED] | | <ul style="list-style-type: none"> [REDACTED] [REDACTED] [REDACTED] [REDACTED] |
| [REDACTED] | <ul style="list-style-type: none"> [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] | <ul style="list-style-type: none"> [REDACTED] [REDACTED] | | <ul style="list-style-type: none"> [REDACTED] [REDACTED] [REDACTED] [REDACTED] |
| [REDACTED] CHC - Metronidazole and Azelaic Acid | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED] CHC:</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: Robert Hockmuth</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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| | <ul style="list-style-type: none">• Add metronidazole 0.75% and azelaic acid 15% gel to the supplemental formulary (Tier 3) to ensure appropriate coverage for patients. | | | |
| 7. New Business | | | | |
| Agents for Primary Biliary Cholangitis | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED]█ [REDACTED] | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Andrew Peterson</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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| | <ul style="list-style-type: none"> • [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED] CHC:</p> <ul style="list-style-type: none"> • Approve the newly developed Agents for Primary Biliary Cholangitis prior authorization criteria. <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] ■ [REDACTED] [REDACTED] [REDACTED] | | | |
| <p>Chronic Inflammatory Demyelinating Polyneuropathy (CIDP) Agents</p> | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Andrew Peterson</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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[REDACTED] /CHC:

- Approve the Chronic Inflammatory Demyelinating Polyneuropathy (CIDP) Agents prior authorization criteria as new criteria.

[REDACTED]

- [REDACTED]
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| | <ul style="list-style-type: none">○ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> | | | |
| Oxervate | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Andrew Peterson</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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| | <p>[REDACTED] CHC:</p> <ul style="list-style-type: none">• Approve the newly developed Oxervate criteria. <p>[REDACTED]</p> <p>[REDACTED]</p> | | | |
| <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> |
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| Peanut Allergy Immunotherapy | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED][REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED][REDACTED] | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Andrew Peterson</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |
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- [REDACTED]
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[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]

CHC:

- Update the age restriction section as Palforzia is now approved down to age 1.
- In reauthorization criteria, streamline language as the new age ranges follow a different dose titration schedule.

[REDACTED]

- [REDACTED]
[REDACTED]
[REDACTED]
- [REDACTED]
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| | <p>[REDACTED]</p> | | | |
| Zoryve | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">[REDACTED][REDACTED][REDACTED][REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED][REDACTED][REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED][REDACTED][REDACTED] | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Andrew Peterson</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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| B. Single Products | | | | |
| █ | <ul style="list-style-type: none">██████ | <ul style="list-style-type: none">████ | | <ul style="list-style-type: none">████ |

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| | <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] ■ [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] ■ [REDACTED] [REDACTED] [REDACTED] | | | |
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Tecelra

PerformRx makes the following recommendation:

- [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
- [REDACTED]
- [REDACTED]
 - [REDACTED]
- [REDACTED]

Committee approved as recommended:

Motion: David Batluck
Second: Don Cooper

PerformRx will update the criteria and formulary/PDL with any changes

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| | <ul style="list-style-type: none"> ■ [REDACTED] ■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] <p>[REDACTED]</p> <p>[REDACTED]/CHC:</p> <ul style="list-style-type: none"> • Add Tecelra to Tier 4 with a prior authorization requirement. • Approve the newly developed Tecelra prior authorization criteria. <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] ■ [REDACTED] | | | |
| Piasky | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Don Cooper</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

■ [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

■ [REDACTED] /CHC:

- Add PiaSky to Tier 4 with a prior authorization requirement.
- Approve the newly developed Complement Inhibitors prior authorization criteria with the following changes:
 4. Update the drug list section to include PiaSky.
 5. Update the coverage duration section to include PiaSky.
 6. Include body weight in the other criteria dosing section due to PiaSky's 40 kg body weight requirement per the package insert.

■ [REDACTED]

■ [REDACTED]
[REDACTED]

■ [REDACTED]
[REDACTED]
[REDACTED]
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■ [REDACTED]
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| | [REDACTED] [REDACTED] [REDACTED] | | | |
| Kisulna | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none"> [REDACTED] <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] ■ [REDACTED] <ul style="list-style-type: none"> [REDACTED] <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] ■ [REDACTED] <ul style="list-style-type: none"> [REDACTED] <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] ■ [REDACTED] <ul style="list-style-type: none"> [REDACTED] <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] ■ [REDACTED] | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Don Cooper</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |
| | [REDACTED] CHC: | | | |

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| | <ul style="list-style-type: none">• Add Kisunla to Tier 4 with a prior authorization requirement.• Approve the newly developed Kinsula prior authorization criteria. <p>[Redacted]</p> <ul style="list-style-type: none">• [Redacted]• [Redacted]• [Redacted] | | | |
| Rytelo | <p>PerformRx makes the following recommendation:</p> <p>[Redacted]</p> <ul style="list-style-type: none">• [Redacted]• [Redacted] <p>[Redacted]</p> <ul style="list-style-type: none">• [Redacted] <p>[Redacted]</p> <ul style="list-style-type: none">• [Redacted]• [Redacted] <p>[Redacted]</p> | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Don Cooper</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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| | <ul style="list-style-type: none"> ■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] <ul style="list-style-type: none"> ■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] <p>[REDACTED]</p> <p>[REDACTED]/CHC:</p> <ul style="list-style-type: none"> • Add Rytelo to Tier 4 with a prior authorization requirement. • Approve the newly developed Rytelo prior authorization criteria. <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] <ul style="list-style-type: none"> ■ [REDACTED] | | | |
| Vafseo | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: David Batluck Second: Don Cooper</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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| | <ul style="list-style-type: none">■ [REDACTED]■ [REDACTED] <p>[REDACTED] CHC:</p> <ul style="list-style-type: none">• Add Vafseo to Tier 4 with a prior authorization requirement.• Approve the updated HIF-PH Inhibitors for CKD Anemia prior authorization criteria.<ul style="list-style-type: none">○ Update title from <i>Jesduvroq</i> to <i>HIF-PH Inhibitors for CKD Anemia</i> to encompass newly approved Vafseo.○ Remove exclusion criteria regarding concomitant use of strong CYP2C8 inhibitors since this does not apply to Vafseo and these medications will be prescribed by a specialist.○ Update language for length of dialysis as Jesduvroq is indicated for adults on dialysis for at least 4 months while Vafseo is for at least 3 months.○ Update hemoglobin level to align with inclusion criteria in clinical trials. | | | |
| 9. New Products | | | | |

PerformRx makes the following recommendation:

Add to Specialty Tier 4 with drug specific PA for [REDACTED] CHC:

- Acthar Gel
- Elfabrio
- Livdelzi
- Livmarli
- Rystiggo

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]

[REDACTED]

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- [REDACTED]

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[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
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Committee approved as recommended:

Motion: David Batluck

Second: Don Cooper

PerformRx will update the criteria and formulary/PDL with any changes

[Redacted]

[Redacted]

Remain non-formulary/non-preferred for
[Redacted]/CHC, [Redacted]

- Cyclophosphamide
- Miplyffa
- MydCombi
- Nemluvio
- Sofdra
- Tecentriq Hybreza
- Tevimbra
- Tryvio
- Yorvipath

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| | <p>[REDACTED]</p> <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED][REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED]</p> <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] | | | |
| 10. Prior Authorization Criteria Review | | | | |
| A. Prior Authorization Annual Criteria | | | | |

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| | <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] | | | |
| Immune Globulins | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED] CHC:</p> <ul style="list-style-type: none">• Add newly approved Alyglo to the drug list. <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

Medications for the Management of Obesity

PerformRx makes the following recommendation:

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- [Redacted]
- [Redacted]

- **CHC:**
- Add clarification that POMC, PCSK1, or LEPR variants classified as benign or likely benign will not be approved.
 - Add reauthorization criteria that an objective improvement is seen if a weight-related comorbidity was previously noted.
 - Require FDA approved dose in reauthorization section for consistency.

Committee approved as recommended:

Motion: Wayne Weart
Second: David Batluck

PerformRx will update the criteria and formulary/PDL with any changes

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| | <ul style="list-style-type: none">█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted] | | | |
| <p>Medications without Drug or Class Specific Criteria</p> | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted]█ [Redacted] | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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| | <ul style="list-style-type: none"> █ [REDACTED] █ [REDACTED] <p>[REDACTED]/CHC:</p> <ul style="list-style-type: none"> • Specify that two preferred medications should be trialed. <p>[REDACTED]</p> <ul style="list-style-type: none"> █ [REDACTED] █ [REDACTED] | | | |
| <p>Neuromyelitis Optica Spectrum Disorder (NMOSD) Agents</p> | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none"> █ [REDACTED] █ [REDACTED] █ [REDACTED] █ [REDACTED] <p>[REDACTED]/CHC:</p> <ul style="list-style-type: none"> • Add Ultomiris to the drug list and criteria section with Soliris. <p>[REDACTED]</p> <ul style="list-style-type: none"> █ [REDACTED] █ [REDACTED] | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | <p>PerformRx will update the criteria and formulary/PDL with any changes</p> |

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| | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>CHC:</p> <ul style="list-style-type: none">• Update the prescriber restrictions section to align language with similar Enterprise prior authorization criteria policies. <p>[REDACTED]</p> <p>[REDACTED]</p> | | | |
| <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> |
| <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> |

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| | <ul style="list-style-type: none">[REDACTED] | | | |
| [REDACTED] | [REDACTED] | [REDACTED] | | [REDACTED] |
| B. Prior Authorization Criteria Annual Review without Clinical Changes: | | | | |
| [REDACTED] | [REDACTED] | [REDACTED] | | [REDACTED] |

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| | <p>[REDACTED]</p> <ul style="list-style-type: none"> [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> [REDACTED] <p>[REDACTED] CHC:</p> <ul style="list-style-type: none"> • Approve the Danazol prior authorization criteria with no clinical changes. <p>[REDACTED]</p> <ul style="list-style-type: none"> [REDACTED] | <p>Motion: Wayne Weart Second: David Batluck</p> | | |
| <p>Daraprim</p> | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <ul style="list-style-type: none"> [REDACTED] <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | <p>No Changes</p> |

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| | <ul style="list-style-type: none">█ [REDACTED] <p>█ [REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED] <p>█ CHC:</p> <ul style="list-style-type: none">• Approve the Daraprim prior authorization criteria with no clinical changes. <p>█ [REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED] | | | |
| Desmopressin | <p>PerformRx makes the following recommendation:</p> <p>█ [REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED] <p>█ [REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED] <p>█ CHC:</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <ul style="list-style-type: none">• Approve the Desmopressin nasal spray prior authorization criteria with no clinical changes. <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | | |
| <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | <p>[REDACTED]</p> |
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| | <ul style="list-style-type: none">█ [REDACTED]█ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED]█ [REDACTED] | | | |
| [REDACTED] | <p>[REDACTED]</p> <p>[REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED]█ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED]█ [REDACTED] | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | [REDACTED] |
| Erythropoiesis Stimulating Agents | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">█ [REDACTED]█ [REDACTED]█ [REDACTED] <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <ul style="list-style-type: none"> █ [REDACTED] █ [REDACTED] █ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> █ [REDACTED] █ [REDACTED] █ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> █ [REDACTED] █ [REDACTED] █ [REDACTED] <p>[REDACTED] CHC:</p> <ul style="list-style-type: none"> • Approve the Erythropoiesis-Stimulating Agents (ESAs) prior authorization criteria with no clinical changes. | | | |
| Galafold | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none"> █ [REDACTED] █ [REDACTED] █ [REDACTED] <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <p>█ [REDACTED] [REDACTED] [REDACTED]</p> <p>█ [REDACTED]</p> <p>█ [REDACTED] [REDACTED] [REDACTED]</p> <p>█ CHC:</p> <ul style="list-style-type: none">• Approve the Galafold prior authorization criteria with no clinical changes. <p>█ [REDACTED]</p> <p>█ [REDACTED] [REDACTED] [REDACTED]</p> | | | |
| <p>█ [REDACTED] [REDACTED]</p> | <p>█ [REDACTED] [REDACTED]</p> <p>█ [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]</p> <p>█ [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED]</p> | <p>█ [REDACTED] [REDACTED]</p> <p>█ [REDACTED] [REDACTED]</p> | | <p>█ [REDACTED]</p> |

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| | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | | |
| Mucopolysaccharidosis VI (Maroteaux-Lamy Syndrome) Agents (Naglazyme) | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED] CHC:</p> <ul style="list-style-type: none"> • Approve the Mucopolysaccharidosis VI (Maroteaux-Lamy Syndrome) Agents prior authorization criteria with no clinical changes. <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] [REDACTED] | | | |
| Oncology Drugs | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] <p>[REDACTED] CHC:</p> <ul style="list-style-type: none">• Approve the Oncology Drugs/Therapies criteria with no clinical changes <p>[REDACTED]</p> <ul style="list-style-type: none">[REDACTED] | | | |
| <p>[REDACTED]</p> | <p>[REDACTED]</p> | <p>[REDACTED]</p> | | <p>[REDACTED]</p> |

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| | <ul style="list-style-type: none">[REDACTED] | [REDACTED] | | |
| Prior Authorization Exception | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">[REDACTED][REDACTED][REDACTED][REDACTED][REDACTED][REDACTED][REDACTED][REDACTED][REDACTED] <p>[REDACTED] CHC:</p> <ul style="list-style-type: none">• Approve the Prior Authorization Exception Criteria with no clinical changes. | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <ul style="list-style-type: none">[REDACTED] | | | |
| Quantity Limit Exception | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">[REDACTED][REDACTED][REDACTED][REDACTED][REDACTED][REDACTED][REDACTED][REDACTED] <p>CHC:</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <ul style="list-style-type: none">Approve the Quantity Limit Exception Criteria with no changes. <p>[Redacted]</p> | | | |
| [Redacted] | <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> | <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> | <p>[Redacted]</p> | |

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| | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | | |
| Roctavian | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>CHC:</p> <ul style="list-style-type: none">• Approve the Roctavian prior authorization criteria with no changes. <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | <p>No Changes</p> |

Safety Edit Exception

PerformRx makes the following recommendation:

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

[REDACTED] /CHC:

- Approve the Safety Edit Exception Criteria prior authorization criteria with no changes.

Committee approved as recommended:

Motion: Wayne Weart
Second: David Batluck

No Changes

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| | <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> | <p>[REDACTED]</p> | | <p>[REDACTED]</p> |
| <p>Step Therapy Exception</p> | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | <p>No Changes</p> |

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| | <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> ■ [REDACTED] [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED] /CHC:</p> <ul style="list-style-type: none"> • Approve the Step Therapy Exception Criteria prior authorization criteria with no clinical changes. | | | |
| Sublingual Allergenic Extracts | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none"> [REDACTED] ■ [REDACTED] [REDACTED] [REDACTED] <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <ul style="list-style-type: none">█ [REDACTED] <p>█ [REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED] <p>█ [REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED] <p>█ CHC:</p> <ul style="list-style-type: none">• Approve the Sublingual Allergenic Extracts prior authorization criteria with no clinical changes. <p>█ [REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED] | | | |
| █ [REDACTED] | <p>█ [REDACTED]</p> <p>█ [REDACTED]</p> <p>█ [REDACTED]</p> <ul style="list-style-type: none">█ [REDACTED] <p>█ [REDACTED]</p> | █ [REDACTED] | | █ [REDACTED] |

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| <p>[REDACTED]</p> | <p>[REDACTED]</p> | <p>[REDACTED]</p> | | <p>[REDACTED]</p> |
| <p>Type I Interferon (IFN) Receptor Antagonist (Saphnelo)</p> | <p>PerformRx makes the following recommendation:</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | <p>No Changes</p> |

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| | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>CHC:</p> <ul style="list-style-type: none">• Approve the Type I Interferon (IFN) Receptor Antagonist prior authorization criteria with no clinical changes. <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | | |
| <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> | | <p>[REDACTED]</p> |

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| | <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] | | | |
| Zolgensma | <p>PerformRx makes the following recommendation:</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none">■ [REDACTED] <p>[REDACTED]</p> <p>[REDACTED] CHC:</p> | <p>Committee approved as recommended:</p> <p>Motion: Wayne Weart Second: David Batluck</p> | | No Changes |

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| | <ul style="list-style-type: none">• Approve the Zolgensma (onasemnogene abeparvovec-xioi) prior authorization criteria with no clinical changes. | | | |
| [REDACTED] | [REDACTED] | [REDACTED] | | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | | [REDACTED] |

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| | [REDACTED] | | | |
| [REDACTED] | [REDACTED] | [REDACTED] | | [REDACTED] |
| [REDACTED] | [REDACTED] | [REDACTED] | | [REDACTED] |
| 10. Recalls | <p align="center">7/18/2024 – 10/28/2024</p> <p align="center">There were no Class 1 or 2 recalls impacting all lots for medications listed within Medispan</p> | Informational | | PerformRx |
| 11. Adjournment | The meeting adjourned at 7:08 PM EST | Motion: Michael Bauer Second: David Petkash | | Jeffrey Kreitman |
| | The next meeting February 3rd, 2025 6:00 PM- 8:00 | | | |

Jeffrey Kreitman Ph.D.

2/12/2025
Date