

**NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
**PREFERRED DRUG LIST REVIEW PANEL MEETING**  
**THURSDAY APRIL 10, 2025 1:00PM – 5PM**  
**VIRTUAL ONLINE MEETING PLATFORM**

**I. WELCOME, INTRODUCTIONS, OVERVIEW**

Moderator, Dr. Meena Wanas, the NC Medicaid Outpatient Pharmacy lead pharmacist for the Preferred Drug List (PDL) began the virtual meeting by welcoming all attendees to the second quarterly PDL review meeting for 2025. Dr. Wanas thanked the PDL panel members for their important contribution to the PDL, to the NC Medicaid program and to beneficiary health. He acknowledged their dedication and graciously volunteered time to serve on the PDL Review Panel. A roll call of the PDL Panel members followed. The PDL panel members in attendance and organization represented are listed:

- Dr. John Matta, PharmD, MBA, Interim Director of Pharmacy and Ancillary Services.
- Dr. Karen Breach-Washington, Representative for the Old North State Medical Society
- Dr. Peter Koval, Representative for the North Carolina Association of Pharmacists
- Dr. Aaron Garst, Representative for Community Care of North Carolina
- Dr. Michelle Boose Representative for the Physician Advisory Group, Pharmacy and Therapeutics Committee
- Dr. Gabrielle Herman Representative for Research-Based Pharmaceutical Companies
- Dr. Katherine Jordan, M.D, Representative for the North Carolina Pediatric Society
- Dr. Ying Vang, Representative for the North Carolina Academy of Family Physicians
- Dr. James J. Cappola, III, Representative for the North Carolina Chapter of the American College of Physicians

Guidance for meeting attendees was reviewed.

Within 7 days after the meeting, participants with comments about the PDL or its content can send an email to [Medicaid.PDL@dhhs.nc.gov](mailto:Medicaid.PDL@dhhs.nc.gov).

The procedures for making a motion and voting were stated for the PDL panel review members. Voting is verbal by responding Aye or Nay to the motion. Speaker guidelines were explained. Speakers must state their name, affiliation, if being compensated for the product presentation, and any potential conflicts. Three minutes are allowed to present, and information should focus on recent changes or updates for the drug. Panel members can ask questions after the presentation.

A brief legislative history about the PDL and the PDL Panel Review Committee was shared.

- 2009: PDL was authorized by NC Legislation to ensure access to cost efficient and medically appropriate drug therapies that maximize health outcomes for all NC Medicaid beneficiaries.
- 2010: PDL Review Panel was established by legislation to review the PDL recommendations received from the Department of Health and Human Services, North Carolina Medicaid and the Physician Advisory Group Pharmacy and Therapeutics Committee to classify prescription medications as either Preferred or Non-Preferred on the PDL. An open meeting was mandated to review the PDL recommendations and written public comments received.
- 2023: General Assembly codified the PDL as G.S. 108A-68.1A [Session Law 2023-134, Sections 9E.17(a)-(d)]. The Legislation establishes the composition of the Review Panel, the cadence of PDL Review Panel meetings [once per quarter], a public comment period, and procedure for the Review Panel to make recommendations to the Secretary of DHHS. [The PDL public comment period is 30 days to accommodate the quarterly review cadence.
- Legislation mandates the PDL Review Panel consist of the Director of Pharmacy for North Carolina Medicaid and individuals appointed by the Secretary of the Department of Health and Human Services representing the organizations listed in legislation. Individuals appointed to the PDL Review Panel, except for the Director of Pharmacy for North Carolina Medicaid, shall serve a two-year term.
- Advocating to allow members to serve multiple terms. Currently panel members can only serve one term lasting 2 years.

The recommendations approved by the PDL Review Panel are submitted to the DHHS Secretary for final approval.

The PDL with recommendations from this meeting will become effective on July 1, 2025.

The next PDL panel review meeting will be held on Tuesday July 8, 2025. The PDL Panel meetings occur quarterly in January, April, July and October.

The Drug Utilization Review (DUR) Meeting will be held on Thursday, April 24, 2025 from 1-3 pm.

An overview of the PDL was provided prior to starting the category reviews:

- Trial and failure of two Preferred drugs is required unless only one Preferred option is listed, or a trial and failure exemption is otherwise indicated on the document.
- Clinical criteria requirements are indicated in red writing.
- Color coding on the PDL posted for public comment is informational and serves to identify the type of change.
- On-file additions are recommendations when the NDC for the drug was already on the PDL file with the status indicated in the recommendation, but the drug name did not appear on the external PDL document.
- Brand-Generic Switch: the brand product and equivalent generic product switch PDL status.
- Off-Cycle Update: Product status change made outside of the scheduled PDL review cycle. Off-cycle changes are allowed when there is 1) a significant financial impact for the State, 2) a product shortage or other access issue, 3) patient safety is at risk.
- Every PDL category is reviewed at least once annually, even if there are no recommended changes from the State. The categories are open for discussion and a PDL panel member can introduce a motion for change.

## **II. CATEGORY REVIEWS**

### **ANALGESICS**

#### **ORALLY DISINTEGRATING/ORAL SPRAY SCHEDULE II OPIOIDS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

#### **SHORT ACTING SCHEDULE II OPIOIDS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

#### **SHORT ACTING SCHEDULE III – IV OPIOIDS/ANALGESIC COMBINATIONS**

- Recommendation: Add Tramadol (75mg) tablet as non-preferred and remove Qdolo™ Solution
- Public Comments:
  - Pete Koval: Add 50mg as preferred?
  - Meena Wanas: Tramadol 50 mg is preferred.
- Speakers: None
- Discussion: None

### **NSAIDS**

- Recommendation: Remove Ketorolac tromethamine nasal spray (generic for Sprix®)
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTICONVULSANTS**

## **SECOND GENERATION**

- Recommendation: Move Banzel® Tablet from preferred to non-preferred, move rufinamide tablet from non-preferred to preferred, remove Diastat® Acudial®/Pedi system
- Public Comments: None
- Speakers: None
- Discussion: None

## **JOHN CAPPOLA MOTION WITH SECOND FROM YING VANG: APPROVE PROPOSED RECOMMENDATIONS FOR ORALLY DISINTEGRATING/ORAL SPRAY SCHEDULE II OPIOIDS, SHORT ACTING SCHEDULE II OPIOIDS, SHORT ACTING SCHEDULE III – IV OPIOIDS/ANALGESIC COMBINATIONS, NSAIDS, CARBAMAZEPINE DERIVATIVES, AND SECOND-GENERATION ANTICONVULSANTS.**

**VOTE: ALL IN FAVOR. NONE OPPOSED.**

## **ANTI-INFECTIVES – SYSTEMIC ANTIBIOTICS**

### **MAROLIDES AND KETOLIDES**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments:
  - Pete Koval: Ketolide class can be removed from the drug class title (the drug is off the market)
  - Kelly Switzer will look into this issue
- Speakers: None
- Discussion: None

### **QUINOLONES**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **TETRACYCLINE DERIVATIVES**

- Recommendation: Remove Vibramycin® Capsule
- Public Comments: None
- Speakers: None
- Discussion: None

## **ANTI-INFECTIVES – SYSTEMIC ANTIVIRALS**

### **HEPATITIS C AGENTS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **INFLUENZA**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

**PETE KOVAL MOTION WITH SECOND FROM JAMES CAPPOLA: APPROVE PROPOSED RECOMMENDATIONS FOR MAROLIDES AND KETOLIDES, QUINOLONES, TETRACYCLINE DERIVATIVES, HEPATITIS C AGENTS, INFLUENZA.**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

**BEHAVIORAL HEALTH-**

**INJECTABLE ANTIPSYCHOTIC LONG ACTING**

- Recommendation: Add Erzofri extended-release injectable suspension as preferred
- Public Comments: None
- Speakers:
  - Barbara Silvernail (Erzofri)
- Discussion Points:
  - Kenya Windley: Do you have to have second loading dose?
  - Barbara Silvernail (Erzofri): No, one 351mg dose then 28 days later patient begins maintenance therapy.

**ATYPICAL ANTIPSYCHOTICS: ORAL / TRANSDERMAL**

- Recommendation: Remove Symbyax® Capsule, add Opipza (Aripiprazole) oral film to non-preferred
- Public Comments:
  - Opipza is not ODT, it is an oral film so has been updated on the PDL.
- Speakers: None
- Discussion Points:

**CARDIOVASCULAR**

**ACE INHIBITORS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

**ACE INHIBITORS/CALCIUM CHANNEL BLOCKER COMBINATIONS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

**JAMES COPPOLA MOTION WITH SECOND FROM MICHELLE BOOSE APPROVE PROPOSED ATYPICAL ANTIPSYCHOTICS: ORAL / TRANSDERMALPOSED RECOMMENDATIONS FOR INJECTABLE ANTIPSYCHOTIC LONG ACTING, ACE INHIBITORS, ACE INHIBITORS/CALCIUM CHANNEL BLOCKER COMBINATIONS**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

**ANGIOTENSIN II RECEPTOR / NEPRILYSIN BLOCKER COMBINATIONS**

- Recommendation: Add sacubitril and valsartan (generic for Entresto) tablet to non-preferred
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTI-ARRHYTHMICS**

- Recommendation: Remove Rythmol SR® Capsule
- Public Comments: None
- Speakers: None
- Discussion: None

### **BETA BLOCKERS**

- Recommendation: Remove Corgard® Tablet
- Public Comments: None
- Speakers: None
- Discussion: None

### **NON-DIHYDROPYRIDINE CALCIUM CHANNEL BLOCKERS**

- Recommendation: Add Verapamil Capsule SR (generic for Verelan®) as non-preferred, remove Calan SR® Caplet
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTIANGINAL AND ANTI-ISCHEMIC**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

**KAREN BREACH-WASHINGTON MOTION WITH SECOND FROM GABRIELLE HERMAN:  
APPROVE PROPOSED RECOMMENDATIONS FOR ANGIOTENSIN II RECEPTOR / NEPRILYSIN  
BLOCKER COMBINATIONS, ANTI-ARRHYTHMICS, BETA BLOCKERS, NON-DIHYDROPYRIDINE  
CALCIUM CHANNEL BLOCKERS, ANTIANGINAL AND ANTI-ISCHEMIC**

**VOTE: ALL IN FAVOR. NONE OPPOSED.**

## **CENTRAL NERVOUS SYSTEM**

### **ANTIMIGRAINE AGENTS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTIMIGRAINE AGENTS- CGRP BLOCKER/MODULATORS PREVENTATIVE**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers:
  - Olaide Akingbade Qulipta® Abbvie
- Discussion: None

### **ANTIPARKINSON AND RESTLESS LEG SYNDROME**

- Recommendation: Remove Comtan® Tablet and Mirapex® ER Tablet
- Public Comments: None
- Speakers: None
- Discussion: None

## **MULTIPLE SCLEROSIS-ORAL**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

## **AMYOTROPHIC LATERAL SCLEROSIS (ALS) AGENTS**

- Recommendation: Add edaravone vial (generic for Radicava®) to non-preferred, remove Exservan™ Oral Film
- Public Comments: None
- Speakers:
  - Ni Daphne (Qalsody) Biogen Remove trial/failure requirement.
- Discussion:
  - Meena Wanas: The prescriber can note the mutation on the PA form to bypass the trial and failure.
  - Krista Kness: Prescriber can note that mutation on the form and how you know the trial and failure is not warranted and could bypass
  - Amy Williams-Phelps: Does the patient have to be on Rilutek and Qalsody at the same time?
  - Ni Daphne: No they do not.
  - Kenya Windley: Is the PDL notated for T/F on Qalsody

**James Cappola Motion with second from Kenya Windley to add the T/F red writing for Qalsody on the PDL.**

## **KATIE JORDAN MOTION WITH SECOND FROM PETE KOVAL: APPROVE PROPOSED RECOMMENDATIONS FOR ANTIMIGRAINE AGENTS, ANTIMIGRAINE AGENTS- CGRP BLOCKER/MODULATORS PREVENTATIVE, ANTIPARKINSON AND RESTLESS LEG SYNDROME AGENTS, MULTIPLE SCLEROSIS-ORAL, AMYOTROPHIC LATERAL SCLEROSIS (ALS) AGENTS**

**VOTE: ALL IN FAVOR. NONE OPPOSED.**

## **ENDOCRINOLOGY**

### **GROWTH HORMONE**

- Recommendation: Remove Saizen® Vial
- Public Comments: None
- Speakers:
  - Gustavo Rodriguez (Ngenla)
  - Domenic Mantella (Skytrofa)
- Discussion:
  - Katie Jordan: Are either of the preferred options weekly?
  - Gustavo Rodriguez: No, they are daily short acting growth hormones.
  - Karen Breach-Washington: Would it be more efficacious for weekly vs daily and have better outcomes?
  - Kelley Switzer: Will take that back and model out to see what is the best scenario for July PDL.

### **INTERMEDIATE ACTING INSULIN**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **PREMIXED RAPID COMBINATIONS**

- Recommendation: Move Brand Humalog® 75/25 mix KwikPen® from preferred to non-preferred, move generic insulin lispro protamine 75/25 Kwikpen® from non-preferred to preferred.
- Public Comments: None
- Speakers: None
- Discussion: None

### **GLP-1 RECEPTOR AGONISTS AND COMBINATIONS INDICATED FOR THE TREATMENT OF DIABETES**

- Recommendation: Add exenatide Pen (generic for Byetta®) to non-preferred
- Public Comments: None
- Speakers: None
- Discussion: None

### **MICHELLE BOOSE MOTION WITH SECOND FROM JAMES CAPPOLA: APPROVE PROPOSED RECOMMENDATIONS FOR GROWTH HORMONE, INTERMEDIATE ACTING INSULIN, PREMIXED RAPID COMBINATIONS, GLP-1 RECEPTOR AGONISTS AND COMBINATIONS INDICATED FOR THE TREATMENT OF DIABETES**

**VOTE: ALL IN FAVOR. NONE OPPOSED.**

### **GASTROINTESTINAL**

#### **ANTIVERTIGO AGENTS**

- Recommendation: Off-Cycle change: move scopolamine patch (generic for Transderm-Scop®) from non-preferred to preferred, add Posfrea™ Ψ vial to non-preferred
- Public Comments: None
- Speakers: None
- Discussion Point: None

#### **BILE ACID SALTS**

- Recommendation: Remove Urso® Tablet/Urso® Forte Tablet
- Public Comments: None
- Speakers: None
- Discussion Point: None

### **GENITOURINARY/RENAL**

#### **ELECTROLYTE DEPLETERS (KIDNEY DISEASE)**

- Recommendation: Remove Phoslyra® (calcium acetate) Solution
- Public Comments: None
- Speakers: None
- Discussion Point: None

#### **URINARY ANTISPASMODICS**

- Recommendation: Remove Gelnique® Gel Sachets
- Public Comments: None
- Speakers: None
- Discussion Point: None

**JAMES CAPPOLA MOTION WITH SECOND FROM GABRIELLE HERMAN: APPROVE PROPOSED RECOMMENDATIONS FOR ANTIVERTIGO AGENTS, BILE ACID SALTS, ELECTROLYTE DEPLETERS (KIDNEY DISEASE, URINARY ANTISPASMODICS**

**VOTE: ALL IN FAVOR. NONE OPPOSED.**

**GOUT**

**GOUT**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion Point: None

**HEMATOLOGIC**

**ANTICOAGULANTS ORAL**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion Point: None

**OPHTHALMIC**

**ALLERGIC CONJUNCTIVITIS**

- Recommendation: Off-Cycle change added Olopatadine drops (generic for Pataday®, Patanol®) (OTC) as preferred, remove Alocril® Drops
- Public Comments:
  - Will Pataday be added to policy 9a?
- Speakers: None
- Discussion:
  - Amy Phelps-Williams: Yes it will be added to Policy 9a if it is going to be a permanent change.

**ANTIBIOTICS-STEROID COMBINATIONS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

**PETE KOVAL MOTION WITH SECOND FROM KAREN BREACH-WASHINGTON: APPROVE PROPOSED RECOMMENDATIONS FOR PROGESTINS USED FOR GOUT, ANTICOAGULANTS ORAL, ALLERGIC CONJUNCTIVITIS, ANTIBIOTICS-STEROID COMBINATIONS**

**VOTE: ALL IN FAVOR. NONE OPPOSED.**

**ALPHA 2 ADRENERGIC AGENTS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None



### **BETA BLOCKER AGENTS/COMBINATIONS**

- Recommendation: Add timolol hemihydrate (generic for Betimol® drops) to non-preferred
- Public Comments:
  - Clarify that timolol was hemihydrate?
  - Response: Hemihydrate was added to timolol provide clarity one the PDL.
- Speakers: None
- Discussion: None

### **CARBONIC ANHYDRASE INHIBITORS/COMBINATIONS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **RHO KINSASE MODIFIERS/COMBINATIONS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **JAMES CAPPOLA MOTION WITH SECOND FROM KAREN BREACH-WASHINGTON: APPROVE PROPOSED RECOMMENDATIONS FOR ALPHA 2 ADRENERGIC AGENTS, ALPHA 2 ADRENERGIC AGENTS, ANTI-INFLAMMATORY, CARBONIC ANHYDRASE INHIBITORS/COMBINATIONS, RHO KINSASE MODIFIERS/COMBINATIONS**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

## **OTIC**

### **ANTIBIOTICS**

- Recommendation: Remove Ciprodex® Suspension
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTI-INFECTIVES AND ANESTHETICS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTI-INFLAMMATORY**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

## **RESPIRATORY**

### **BETA-ADRENERGIC HANDHELD**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS

- Public Comments: None
- Speakers: None
- Discussion: None

#### **BETA-ADRENERGIC NEBULIZERS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

**KATIE JORDAN WITH MOTION WITH SECOND FROM KAREN BREACH-WASHINGTON: APPROVE-PROPOSED RECOMMENDATIONS FOR ANTIBIOTICS, ANTI-INFECTIVES AND ANESTHETICS, ANTI-INFLAMMATORY, BETA-ADRENERGIC HANDHELD, BETA-ADRENERGIC NEBULIZERS.**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

#### **BETA-ADRENERGIC ORAL**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

#### **ORALLY INHALED ANTICHOLINERGIC/COPD AGENTS**

- Recommendation: Add Ohtuvayre™ Inhalation suspension to non-preferred
- Public Comments: None
- Speakers: None
- Discussion: None

#### **INTRANASAL RHINITIS AGENTS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

#### **LEUKOTRIENE MODIFIERS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

#### **LOW SEDATING ANTIHISTAMINE COMBINATIONS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

**JAMES COPPOLA MOTION WITH SECOND FROM GABRIELLE HERMAN: APPROVE-PROPOSED RECOMMENDATIONS FOR BETA-ADRENERGIC ORAL, ORALLY INHALED ANTICHOLINERGIC/COPD AGENTS, INTRANASAL RHINITIS AGENTS, LEUKOTRIENE MODIFIERS, LOW SEDATING ANTIHISTAMINE COMBINATIONS**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

## **FIRST GENERATION ANTIHISTAMINES**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

## **TOPICALS**

### **ACNE AGENTS**

- Recommendation: Add Akliief® and Twyneo® Cream to non-preferred
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTIBIOTICS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTIPARASITICS**

- Recommendation: Add Elimite™ Cream to non-preferred
- Public Comments: None
- Speakers: None
- Discussion: None

### **ANTIVIRAL**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

## **PETE KOVAL MOTION WITH SECOND FROM MICHELLE BOOSE: APPROVE PROPOSED RECOMMENDATIONS FOR FIRST GENERATION ANTIHISTAMINES, ACNE AGENTS, ANTIBIOTICS, ANTIPARASITICS, ANTIVIRAL**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

## **MISCELLANEOUS**

### **IMMUNOMODULATORS ATOPIC DERMATITIS**

- Recommendation: Add Ebglyss Syringe (lebrikizumab-lbkz) and Nemluvio® to non-preferred
- Public Comments: None
- Speakers:
  - Carla Mcspadden (Nemluvio)
  - Dr. Suzan Tsang (Adbry)
  - Elizabeth Lubelczyk (Ebglyss™)
  - Brett Stephenson (Zorvye)
- Discussion:
  - Kenya Windley: What percent was improved?
  - Carla McSpadden: 48% improvement after 56 weeks.

## **PSORIASIS**

- Recommendation: Add Vectical ointment to non-preferred
- Public Comments: None
- Speakers: None
- Discussion Points: None

## **ROSACEA AGENTS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

## **STEROIDS-LOW POTENCY**

- Recommendation: Move DermaSmoothe® FS Scalp and Body oil from preferred to non-preferred, moved fluocinolone body/scalp oil (generic for DermaSmoothe® FS Scalp / Body Oil) from non-preferred to preferred, add hydrocortisone solution to non-preferred.
- Public Comments: None
- Speakers: None
- Discussion: None

## **KAREN BREACH-WASHINGTON MOTION WITH SECOND FROM KENYA WINDLEY: APPROVE PROPOSED RECOMMENDATIONS FOR IMMUNOMODULATORS ATOPIC DERMATITIS, PSORIASIS, ROSACEA AGENTS, STEROIDS-LOW POTENCY**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

## **STEROIDS-VERY HIGH POTENCY**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

## **EPINEPHRINE-SELF ADMINISTERED**

- Recommendations: Add Neffy® nasal spray to non-preferred, move AUVI-Q® Auto Injector from non-preferred to preferred
- Public Comments: None
- Speakers:
  - Donna Lee (Neffy)
- Discussion:
  - Katie Jordan: Would like for Neffy to be considered (accidental injection of the parent and removing fear of injection from children)
  - Meena Wanas: This category is being considered for the next PDL
  - Krista Kness: Neffy can be noted on the PA form if parents have dexterity issues or needle phobias.

## **ESTROGEN AGENTS-VAGINAL PREPERATIONS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **CYTOKINE AND CAM ANTAGONISTS**

- Recommendations: Add Simlandi® kit to non-preferred
- Public Comments: None
- Speakers:
  - Olaide Akingbade (Rinvoq)
- Uche Ndefo (Bimzelx)
- Discussion: None

**KATIE JORDAN MOTION WITH SECOND FROM GABRIELLE HERMAN: APPROVE PROPOSED RECOMMENDATION FOR STEROIDS-VERY HIGH POTENCY, EPINEPHRINE-SELF ADMINISTERED, ESTROGEN AGENTS-VAGINAL PREPERATIONS, ESTROGEN AGENTS-VAGINAL PREPERATIONS, CYTOKINE AND CAM ANTAGONISTS**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

### **HERIDITARY ANGIOEDEMA-PROPHYLAXIS AGENTS**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

### **DIABETIC CONTINUOUS GLUCOSE MONITOR SUPPLIES - SENSORS**

- Recommendation: Add Freestyle Libre™ 2 plus sensor
- Public Comments: None
- Speakers: None
- Discussion Point: None

### **DIABETIC SUPPLIES**

- Recommendation: OPEN CLASS – NO RECOMMENDATIONS
- Public Comments: None
- Speakers: None
- Discussion: None

**KATIE JORDAN MOTION WITH SECOND FROM KAREN BREACH-WASHINGTON: APPROVE PROPOSED RECOMMENDATION FOR HERIDITARY ANGIOEDEMA-PROPHYLAXIS AGENTS, DIABETIC CONTINUOUS GLUCOSE MONITOR SUPPLIES – SENSORS, DIABETIC SUPPLIES**

**VOTE: ALL IN FAVOR. NONE OPPOSED**

### **ADJOURNMENT**

- Katie Jordan Motion with second from James Cappola to adjourn meeting.
- Vote: All in favor. None opposed.
- Recommendation: PDL Review is completed. Adjourn meeting 3:10 PM.