Enterprise P&T Meeting Committee

February 2, 2026

Voting Members Present

Andrew Peterson, PharmD	Christy Skibicki, MD	David Petkash, MD	Emily Kryger, PharmD
Eric Peters, PharmD	Jena Quinn, PharmD	Kelly Martin, PharmD	Michelle Murphy, PharmD
Rani Whitfield, MD	Robert Clifford, MD	Rogers Elebra, PharmD	Tracey Davis, PharmD
Wayne Weart, PharmD	Alishia Richie, MD	LouAnne Giangreco, MD	

Excused Voting Members

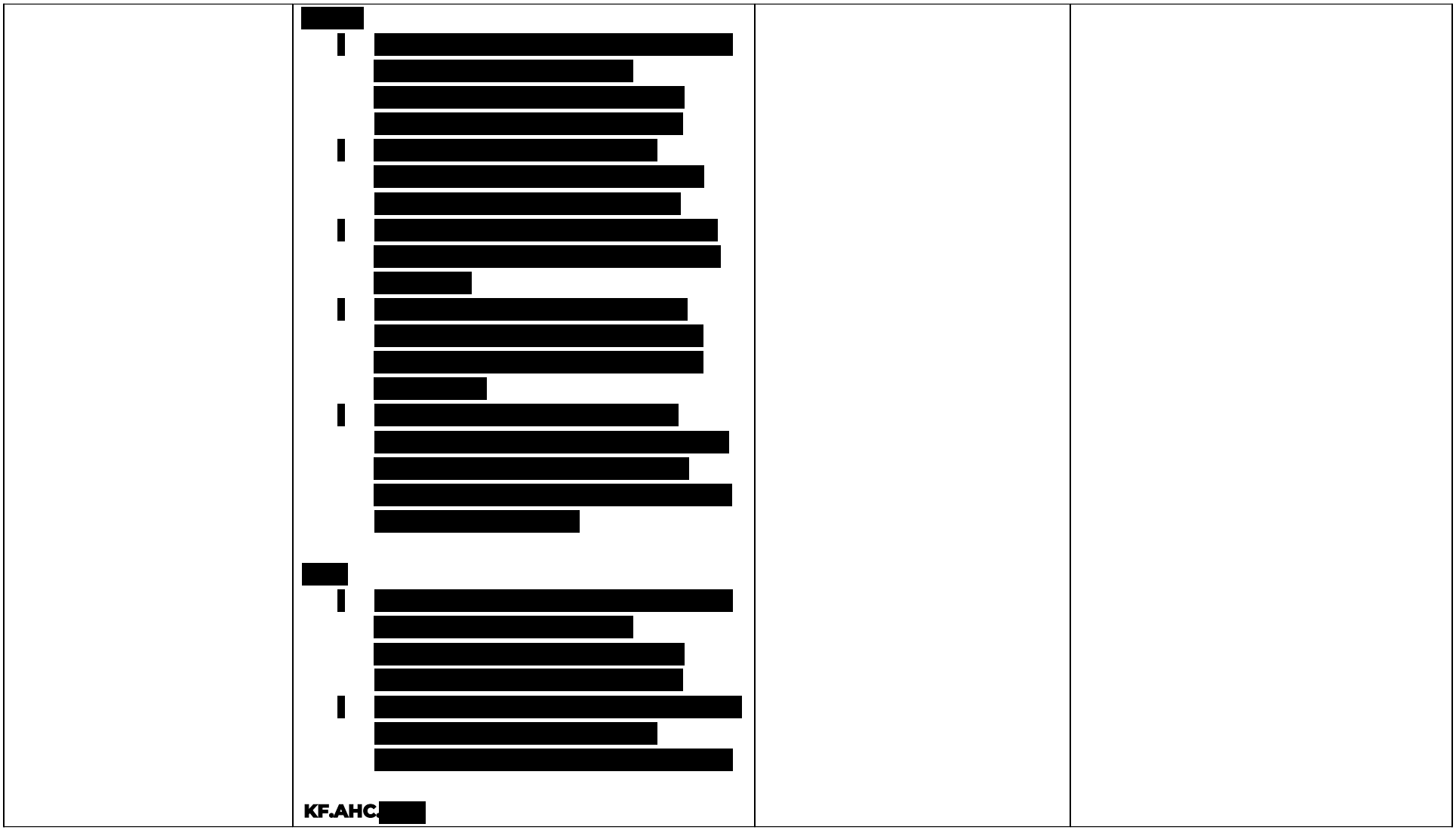
Fury Fecondo, PharmD	Loretta Dumontet, MD	Manni Sethi
Yavar Moghimi, MD	Christopher Antypas, PharmD	

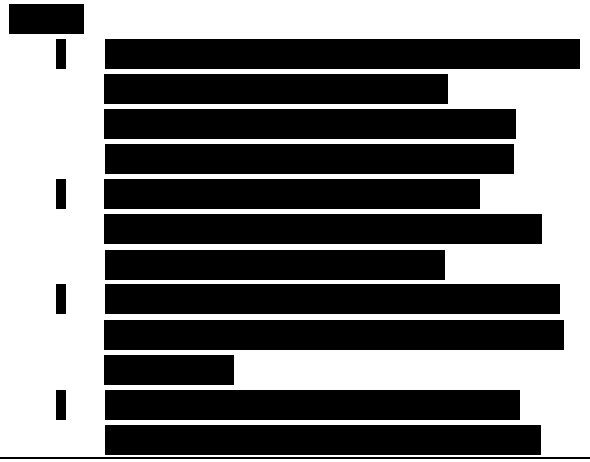
Invited Guests Present

Stephanie Dauer	Amanda Hunter, PharmD	Christian Andreaggi, PharmD	Geraldine Marks, PharmD
Jeanine Plante, PharmD	Jeffrey Kreitman, PharmD	John Mease, MD	Katherine Harris, PharmD
Lance Vinci, PharmD	Lauren Megargell, PharmD	Linda Carreras, CPhT	Seema Gupta, MD
Luke Stadler, PharmD	Mali Thomas, CPhT	Michael Pelyhes, PharmD	Patrick DeHoratius, PharmD
Patty Oaster	Rajneel Farley, PharmD	Sarah Pawlak, PharmD	

Issue	Discussion	Conclusion/Results	Action/ Person Responsible
• Call to order	The meeting was called to order at 6:08 PM EST	Informational Only	John Maese
• Conflict of Interest Disclosures	No conflicts announced	Informational Only	Jeffrey Kreitman
[redacted]		[redacted]	[redacted]
• Review and approval of October & December P&T Minutes		Committee approved as recommended: Motion: Rani Whitfield Second: Wayne Weart	Jeffrey Kreitman
Old Business			

	[redacted]		
Isturisa Expanded Indication	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Wayne Weart**	**PerformRx will update the criteria and formulary/PDL with any changes**



	• **Retire the Adrenal Enzyme Inhibitors for Cushing's Disease prior authorization criteria due to the expanded indication for Isturisa** • **Update the drug list section to now include Isturisa due to its expanded indication** • **Update the baseline urinary free cortisol (UFC) test to ≥ 1.3 times to reflect what was used in Isturisa's clinical trial** • **Update the initial authorization section with the Isturisa criteria that was used in the Adrenal Enzyme Inhibitors for Cushing's Disease prior authorization criteria** 		

• **Drug Review**			
A. Therapeutic Class:			
[redacted]	[redacted]	[redacted]	[redacted]

	[redacted]		
Cystic Fibrosis	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterso**	**PerformRx will update the criteria and formulary/PDL with any changes**

	[redacted] **KF.AHC[redacted]** • **adding Symdeko® (tezacaftor/ivacaftor) 50-75 mg tablets to formulary T4 with a prior authorization requirement and quantity limit - 60/30**		

	• **Approve the Cystic Fibrosis transmembrane conductance regulator (CFTR) Modulators prior authorization criteria with no clinical changes**		

First Generation Antihistamines	**PerformRx makes the following recommendation:** [redacted] [redacted] [redacted] **KF.AHC.**[redacted] • **Make no formulary changes** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**
Fluoride Dental Preparations	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	KF.AHC. [redacted] • **Make no formulary changes** [redacted]		
[redacted]	[redacted]	[redacted]	[redacted]

	[redacted]		
B. Single Products			
	PerformRx makes the following recommendation: [redacted]	**Committee approved as recommended:** **Motion: Robert Clifford** **Second: Wayne Weart**	**PerformRx will update the criteria and formulary/PDL with any changes**

Papzimeos	[redacted] **KF.AHC.[redacted]** • **AddPapzimeos as T4 with a prior authorization requirement**		

	• **Approve the newly developed Papzimeos prior authorization criteria**		

	[redacted]		
Forzinity	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Robert Clifford** **Second: Wayne Weart**	**PerformRx will update the criteria and formulary/PDL with any changes**

	[redacted] • [redacted] • [redacted] [redacted] • [redacted] • [redacted] **KF.AHC[redacted]:** • **AddForzinity as T4 formulary with a prior authorization requirement** • **Approve the newly developed Forzinity prior authorization criteria** [redacted] • [redacted] • [redacted]		
	PerformRx makes the following recommendation: [redacted]	**Committee approved as recommended:** **Motion: Robert Clifford**	**PerformRx will update the criteria and formulary/PDL with any changes**

Rhapsido	[redacted] **KF.AHC** [redacted] • **adding Rhapsido to T4 with a prior authorization requirement**	**Second: Wayne Weart** **Kelly Martin** [redacted]	[redacted]

	• **Approve the newly developed Rhapsido prior authorization criteria**		
Voyxact	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Robert Clifford** **Second: Wayne Weart**	**PerformRx will update the criteria and formulary/PDL with any changes**

	[redacted] **KF.AHC.[redacted]** • **Add Voyxact as T4 with a prior authorization requirement** • **Approve the Update Immunoglobulin A (IgA) Nephropathy Agents prior authorization criteria** [redacted]		
[redacted]	[redacted]	[redacted]	[redacted]

Methergine	**PerformRx makes the following recommendation:** [redacted] [redacted] [redacted] **KF.AHC[redacted]:** • **Make no formulary changes** [redacted]	**Committee approved as recommended:** **Motion: Robert Clifford** **Second: Wayne Weart**	**No Changes**
8. New Products			
	PerformRx makes the following recommendation:	**Committee approved as recommended:**	**PerformRx will update the criteria and formulary/PDL with any changes**

	Remain non-formulary/non-preferred for KF/AHC/[redacted] • **Itvisma** **Remain non-formulary/non-preferred for KF/AHC[redacted]:** • **Anticholium** • **Auranofin** • **Beizray** • **Blenrep** • **Enbumyst** • **Epioxa HD/ Epioxa** • **Famotidine** • **Heparin** • **Inlexzo** • **Keytruda Qlex** • **Lymphir** • **Lynkuet** • **Midazolam** • **Midazolam-Sodium Chloride** • **Palsonify** • **Piperacillin-Tazobactam-NaCl** • **Pokonza** • **Potassium Chloride** • **Ranitidine#** • **Rybrevant Faspro** • **Tyzavan**		

	Remain non-formulary/non-preferred for KF/AHC/[redacted]: • **MiloPhene** [redacted]		

	[redacted]		
9. Prior Authorization Criteria Review			
A. Prior Authorization Criteria Annual Review with Clinical Changes			
[redacted]	[redacted]	[redacted]	[redacted]
Corlanor	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**PerformRx will update the criteria and formulary/PDL with any changes**

	[redacted] [redacted] **KF.AHC[redacted]:** • **Update the title and drug list section of the criteria to reflect the generic availability of Corlanor** [redacted]		
Dose Rounding Limit Exception Criteria	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**PerformRx will update the criteria and formulary/PDL with any changes**

	[redacted] [redacted] **KF.AHC[redacted]:** • **Update the drug list section for additional bevacizumab products Avzivi and Jobvene**		
[redacted]	[redacted] [redacted] [redacted] [redacted]	[redacted] [redacted]	[redacted]

	[redacted]		
[redacted]	[redacted]	[redacted]	[redacted]
Presbyopia Agents	**PerformRx makes the following recommendation:** [redacted] [redacted] **KF.AHC[redacted]:** • **Add new product, Vizz, to the policy** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**PerformRx will update the criteria and formulary/PDL with any changes**

Primary Hyperoxaluria Agents	**PerformRx makes the following recommendation:** [redacted] **KF.AHC.**[redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**PerformRx will update the criteria and formulary/PDL with any changes**

	• **Update the list of examples showing clinical benefit in the reauthorization section**		

	[redacted]		
Skysona	**PerformRx makes the following recommendation:** [redacted] [redacted] **KF.AHC[redacted]:** • **Update the clinical criteria point on HLA-matched donors for HSCT to match the Skysona package insert** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson :**	**PerformRx will update the criteria and formulary/PDL with any changes**

	[redacted] **KF.AHC[redacted]:** • **Provide additional examples of baseline motor function or motor milestone achievements** [redacted]		
[redacted]	[redacted]	[redacted]	[redacted]
	PerformRx makes the following recommendation: [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin**	**PerformRx will update the criteria and formulary/PDL with any changes**

Sohonos	[redacted] [redacted] [redacted] **KF.AHC[redacted]:** • **Update the duration of coverage to 12 months based on the length of the trial** [redacted] [redacted]	**Second: Andrew Peterson**	
Tavneos	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**PerformRx will update the criteria and formulary/PDL with any changes**

	[redacted] [redacted] [redacted] **KF.AHC.[redacted]:** • **Update the combination therapy requirement based on the 2024 KDIGO guideline**		
B. Prior Authorization Criteria Annual Review without Clinical Changes			
Adrenergic, alpha-receptor-blocking agent (Phenoxybenzamine)	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	[redacted] **KF.AHC.[redacted]:** • **Approve the Adrenergic, alpha-receptor-blocking agent prior authorization criteria with no clinical changes**		
[redacted]	[redacted]	[redacted]	[redacted]

	[redacted]		
Alpha 1 Proteinase Inhibitors (Human)	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	[redacted] [redacted] **KF.AHC.[redacted]:** • **Approve the Alpha-1 Proteinase Inhibitors (Human) prior authorization criteria with no clinical changes** [redacted]		
Amifampridine	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	[redacted] [redacted] [redacted] [redacted] **KF.AHC.[redacted]:** • **Approve the Amifampridine prior authorization criteria with no clinical changes** [redacted] [redacted]		
[redacted]	[redacted] [redacted] [redacted]	[redacted] [redacted]	[redacted]

Benlysta	**PerformRx makes the following recommendation:** [redacted] **KF.AHC[redacted]:**	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	• **Approve the Benlysta (belimumab) prior authorization criteria with no clinical changes**		

	[redacted]	**Second: Andrew Peterson**	
Compound Products	**PerformRx makes the following recommendation:** **KF.AHC.[redacted]:** • **Approve the Compound Products prior authorization criteria with no clinical changes**	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**
[redacted]	[redacted]	[redacted]	[redacted]

	[redacted]		
Dojolvi	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	KF.AHC.[redacted]: • **Approve the Dojolvi prior authorization criteria with no clinical changes** [redacted]		
[redacted]	[redacted]	[redacted]	[redacted]
	[redacted]	[redacted]	[redacted]

[redacted]	[redacted]		
	PerformRx makes the following recommendation: [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin**	**No Changes**

Enzyme replacement therapy for ASMD (Xenpozyme)	[redacted]	**Second: Andrew Peterson**	

	[redacted] **KF.AHC[redacted]:** • **Approve the Enzyme Replacement Therapy for Acid Sphingomyelinase Deficiency (ASMD) prior authorization criteria with no clinical changes** [redacted]		
[redacted]	[redacted]	[redacted]	[redacted]

	[redacted]		
Glycopyrrolate	**PerformRx makes the following recommendation:** [redacted] **KF.AHC[redacted]:** • **Approve the Glycopyrrolate (oral) prior authorization criteria with no clinical changes**	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	[redacted]		
HIF-PH Inhibitors for CKD Anemia	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	KF.AHC.[redacted]: • **Approve the HIF-PH Inhibitors for CKD Anemia prior authorization criteria with no clinical changes**		
[redacted]	[redacted]	[redacted]	[redacted]

	[redacted]		
Inpen	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	KF.AHC[redacted]: • **Approve the InPen prior authorization criteria with no clinical changes**		
IV[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
Lodoco	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	[redacted] [redacted] [redacted] **KF.AHC[redacted]:** • **Approve the Lodoco prior authorization criteria with no clinical changes** [redacted]		
	PerformRx makes the following recommendation: [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

Nemluvio for Prurigo Nodularis	[redacted] [redacted] [redacted] [redacted] [redacted] [redacted] **KF.AHC.[redacted]:** • **Approve the Nemluvio for Prurigo Nodularis prior authorization criteria with no clinical changes**		
Niemann-Pick Disease Type C	**PerformRx makes the following recommendation:** [redacted] [redacted] [redacted] [redacted] [redacted] [redacted] [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	• [redacted] [redacted] • [redacted] **KF.AHC.[redacted]:** • **Approve the Niemann-Pick Disease Type C prior authorization criteria with no clinical changes** [redacted] • [redacted]		
[redacted]	[redacted] [redacted] • [redacted]	[redacted] [redacted]	[redacted]

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[redacted]	[redacted]	[redacted]	[redacted]
Pompe Disease Agents	**PerformRx makes the following recommendation:** [redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	KF.AHC. [redacted] • **Approve the Pompe Disease Agents prior authorization criteria with no clinical changes** [redacted]		
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]

Tzield	**PerformRx makes the following recommendation:** [redacted] **KF.AHC.**[redacted]	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	• **Approve the Tzield prior authorization criteria with no clinical changes** [redacted] •		
Yorvipath	**PerformRx makes the following recommendation:** [redacted] **KF.AHC.[redacted]** • **Approve the Yorvipath prior authorization criteria with no clinical changes**	**Committee approved as recommended:** **Motion: Kelly Martin** **Second: Andrew Peterson**	**No Changes**

	[redacted]		
10. Recalls	**Date: 1/14/2026** **Manufacturer:** Medinatura New Mexico, inc **Product Name:** • **ReBoost Breathe Easy, Homeopathic, 0.68 fl. oz. (20 m** • **ClearLife Allergy Nasal Spray, Extra Strength, Homeopathic, 0.68 fl. oz. (20 mL)** **Reason:** Microbial Contamination of Non-Sterile Products		
11. Adjourn	***The meeting adjourned at 6:55 PM EST***		
	Next P&T Meeting **April 27th, 2026** **6:00pm- 8:00pm EST**		

Signed: John Maese, MD, MACP. Date: 05/15/26

John Maese, MD, MACP, FACEP, FHISS, CHCQM
VP of Medical Affairs, Committee Chair