

# ADAP Medical Advisory Committee

## January 20, 2021 Meeting Notes

### 1) Welcome and Rollcall

#### I. Welcome

Meeting opened by Sandra Robinson, ADAP Branch Chief

#### II. Rollcall

##### MAC Members in Attendance

Stephen O'Brien, Michelle Sherman,  
David Lewis, Danny Toub, Lucas Hill,  
David Grelotti, Laveeza Bhatti

##### MAC Members not in Attendance

Jennefer Yoon, Craig Ballard, Wilbert  
Jordan

##### Magellan Representatives in Attendance

Kristen Haloski, Jason Eugenio, Nicole  
Quackenbush

##### Magellan Representatives not in Attendance

N/A

##### CDPH/Office of AIDS staff in Attendance

Philip Peters, Sandra Robinson, Marisa  
Ramos, Becca Parks

##### CDPH/Office of AIDS staff not in Attendance

N/A

### 2) ADAP / MAC Updates

#### I. Medications Added to the ADAP Formulary

Dr. Peters announced:

- COVID-19 Monoclonal antibody and COVID-19 vaccines
  - Two COVID-19 vaccines approved by FDA EUA. One from Pfizer and the other from Moderna, both are messenger- RNA vaccines. Both are two dose vaccines separated by several weeks. 3 additional vaccines using other types of technologies are in phase 3 clinical trials. Both Pfizer and Moderna vaccines showed to be 94%-95% effective in preventing symptomatic infections in large clinical trials. Both enrolled people with HIV in trails although the numbers were low. HIV has been determined not to be a contraindication to receiving either of the vaccines. People living with HIV are currently in phase 1C of tier 1 which is part of the vaccine prior authorization for people with high risk medical conditions. Currently CA is vaccinating all people in phase 1A in tier 1. Guidance release on January 13 to vaccinate people 65 years or older. Vaccines are provided by the federal government free of charge. CDPH is drafting a DAR to add COVID-19 vaccines that's been FDA approved. No charge to ADAP program at this time.
  - There are two COVID investigational monoclonal antibodies products, bamlanivimab and a combination of two monoclonal antibodies, casirivimab and imdevimab. They received EUA in November of 2020 for the treatment of mild to moderate COVID-19. May reduce hospitalization to those who are

treated early. NIH indicates that there are insufficient data to recommend either as standard of care for treatment of mild to moderate COVID-19. Both products are being supplied by the federal government with no charge for the medication. Cost of infusion not paid for directly by the federal government. There are no plans to add medication to the formulary.

- Public Comment:
  - Question, Stephen O'Brien: Will there be a code specific to ADAP members that will be billed by pharmacies for vaccine administration?
    - Kristen response: The pharmacy will bill for the vaccine with the admin fee but the cost of the vaccine will be zero so the claim will pay for the admin fee that goes with the vaccine. That has yet to be determined, working on adding to the formulary.
    - O'Brien response: As a reference, this is the Medicare approved prices for COVID-19 vaccine administration  
One dose vaccine: \$28.39 upon administration  
Two doses vaccine:  
    \$16.94 upon administration of the first dose  
    \$28.39 upon administration of the second dose
  - Question, Michelle Sherman: Once the vaccines are available at the pharmacies, will the pharmacist be able to administer the vaccines to the ADAP members out of prescription or if they have ADAP just bill ADAP for the administration fee or will it require a prescription from the patient provided?
    - Kristen response: No prescription required, just like the flu vaccine.

Dr. Peters announced there was no medications added to the formulary since the October MAC meeting.

## II. Medications Removed from the Formulary

Dr. Peters announced there was no medications removed from the formulary since the October MAC meeting.

## III. Update on the Medications Discussed During the October 2020 MAC Meeting

Sandra Robinson provided the following updates:

- Long-acting injectable cabotegravir and rilpivirine (Cabenuva) waiting for approval from the FDA, working with Magellan on administration of Cabenuva, January 11 received fact sheet from NASTAD regarding possible approval may come in early part of 2021.
- MAC voted on Cabenuva to add Cabenuva to formulary back in July 2020 MAC meeting.

Dr. Peters provided the following updates:

- Submitted 4 packages to include medications to the formulary
  - Amoxicillin-clavulanate

- Substance use disorder medications
- Gender affirming medications
- Depressive and anxiety disorders, mental health disorder (Klonopin®)(Cymbalta®)(Lexapro®)(Vistaril®)
- Not much burden regarding cost to add to the ADAP formulary
  - Question, Michelle Sherman: Symfi® generic is available. Will this be added to the formulary?
  - Dr. Peters response: streamline process to add generics for co-pay only to the formulary if the brand name already exists on formulary.

### **3) Medication Discussion**

There were no new FDA approved antiretroviral medications listed for discussion during this meeting.

### **4) Opportunistic Infection Treatments**

There were no opportunistic infection medications listed for discussed during this meeting.

### **5) Magellan Rx Presentation**

- I. Presentation/Discussion
  - COPD
    - MAC Member made a comment regarding PDE inhibitors to be considered adding to formulary and give ADAP members the option.
  - Anticoagulant Therapy
    - MAC Member made a comment regarding consideration between Eliquis® or Xarelto® that Eliquis® would be a better option.

### **6) Close of Meeting**

- I. Announcement of April Meeting Date and Time

Sandra Robinson announced the next ADAP MAC meeting is scheduled for April 21, 2021 from 7:30 am to 9:00 am. Sandra will be retiring at the end February 2021 and active recruitment of the ADAP branch chief is currently in process.

Dr. Peters announced Cynthia Reed-Aguayo retired as of December 2020. James Vo is taking over Cynthia's responsibility for the MAC meeting moving forward.