## DEPARTMENT OF DEFENSE PHARMACY AND THERAPEUTICS COMMITTEE

## MINUTES AND RECOMMENDATIONS

Addendum August 9, 2017

I. NATIONAL DEFENSE AUTHORIZATION ACT (NDAA) 2017 PILOT PROGRAM: INCORPORATION OF VALUE-BASED HEALTH CARE IN PURCHASED CARE COMPONENT OF TRICARE AND MEDICATION ADHERENCE

A pilot program outlined in the NDAA 2017 requires identification of high-value medications where copayments or cost shares would be reduced for targeted populations of covered beneficiaries. The DoD Pharmacy and Therapeutics (P&T) Committee identified rosuvastatin (Crestor generics) and insulin glargine pens (Lantus) as candidates for inclusion in the pilot, which is intended to assess the effects of copayment reduction or elimination on medication adherence rates. Implementation was recommended for January 1, 2018, to align with currently recommended regulatory language.

- A. COMMITTEE ACTION: MEDICATION ADHERENCE PILOT RECOMMENDATION—The P&T Committee recommended (14 for, 0 against, 1 abstained, 0 absent) the following:
  - Rosuvastatin (Crestor generics): Eliminating the cost share for rosuvastatin at the Mail Order and Retail points of service; the resulting cost share will be \$0.
  - Insulin glargine pens (Lantus): Lowering the normal brand formulary cost share of \$20 at the Mail Order and \$24 at the Retail Network to the Tier 1 (generic) formulary cost share that is currently \$0 and \$10, respectively.

SUBMITTED BY

MPH

John P. Kugler, M.D., MPH DoD P&T Committee Chair

**DECISION ON RECOMMENDATIONS** 

Mr. Guy Kiyokawa

Deputy Director, DHA

for R.C. Bono,

VADM, MC, USN