

EXHIBIT D1c

August 2024 EBD Commission Meeting								
Drug Name	Date Drug Considered by EBD Commission	Use	Current Setup	EBD Recommendation (based on input from EBRx and Navitus)	Impacted Members (last 6 months)	Cost Details	EBD Commission Decision	Board of Finance Decision
MRESVIA INJ	8/13/24	RSV Vaccine	NC	\$0 Copay, QL= 1 dose/lifetime, VAC, Covered for members 60 years or older	0	\$290	Approve Recommendation	Approve Recommendation
AREXVY INJ	8/13/24	RSV Vaccine	\$0 Copay, Covered for members 60 years of age and older	\$0 Copay, Covered for members 50 years of age and older, Adding QL= 1 dose/lifetime, VAC	0	\$314	Approve Recommendation	Approve Recommendation
ABRYVO INJ	8/13/24	RSV Vaccine	\$0 Copay, Covered for members 60 years of age and older. Only covered for women under 60. Not covered for men under 60.	\$0 Copay, Covered for members 60 years of age and older. Only covered for women under 60. Not covered for men under 60. Adding QL= 1 dose/lifetime, VAC	0	\$340	Approve Recommendation	Approve Recommendation
VIJOICE TABLETS (50mg, 125mg, 250mg)	8/13/24	PIK3CA-Related Overgrowth Spectrum (PROS)	Tier S, PA, QL	NC	0	\$32,500/28days	Approve Recommendation	Approve Recommendation
SCEMBLIX TAB	8/13/24	Chronic myeloid leukemia	NC	Tier 4, LD (Onco360 or Biologics), PA, QL= 2 tabs/day	0	\$26,280/30days	Approve Recommendation	Approve Recommendation
SCEMBLIX TAB 100 MG	8/13/24	Chronic myeloid leukemia	NC	Tier 4 LD (Onco360 or Biologics), PA, QL= 4 tabs/day	0	\$26,280/30days	Approve Recommendation	Approve Recommendation
VALTOCO NASAL SPRAY	8/13/24	Seizures	Tier 3, QL= 2 packs/fill; Restricted to Neurology Specialist	Tier 3, QL= 4 doses/fill	0	\$850/10days	Approve Recommendation	Approve Recommendation
DIASTAT RECTAL GEL, DIAZEPAM RECTAL GEL	8/13/24	Seizures	Tier 2, QL= 2 packs/fill	Product Discontinued, move to NC	0	\$768/10days	Approve Recommendation	Approve Recommendation
DIASTAT ACDL GEL	8/13/24	Seizures	NC	Product Discontinued, remain NC	0	\$768/10days	Approve Recommendation	Approve Recommendation
DIAZEPAM GEL	8/13/24	Seizures	Tier 2, QL= 2 packs/fill	Tier 2, QL= 4 doses/fill	0	\$331/10days	Approve Recommendation	Approve Recommendation
diazepam rectal gel	8/13/24	Seizures	Tier 2, QL= 2 packs/fill	Tier 2, QL= 4 doses/fill	0	\$331/10days	Approve Recommendation	Approve Recommendation
NAYZILAM SPRAY	8/13/24	Seizures	Tier 3, QL= 2 packs/fill; Restricted to Neurology Specialist	Tier 3, QL= 4 doses/fill	0	\$863/10days	Approve Recommendation	Approve Recommendation
FREESTYLE LIBRE (2 and 3) SENSORS/RECEIVERS	8/13/24	Continuous Glucose Monitors	Receiver: \$0, QL, ST through Insulin Sensor: Tier 2, QL, ST through Insulin	Receiver: \$0 Copay, QL, ST (adding Xultophy and Soliqua to ST) Sensor: Tier 2, QL, ST (adding Xultophy and Soliqua to ST)	0	Sensor \$134/28day Receiver \$65/28days	Approve Recommendation	Approve Recommendation

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DEXCOM (G6 and G7) TRANSMITTERS/RECEIVERS/SENSORS	8/13/24	Continuous Glucose Monitors	Transmitter/Receiver: \$0, QL, ST through Insulin Sensor: Tier 2, QL, ST through Insulin	Receiver: \$0 Copay, QL, ST (adding Xultophy and Soliqua to ST) Sensor: Tier 2, QL, ST (adding Xultophy and Soliqua to ST)	0	Sensor \$369/30days Receiver \$213/30days Transmitter \$234/90days	Approve Recommendation	Approve Recommendation
ENTYVIO SC INJ	8/13/24	Crohn disease / Ulcerative colitis	NC	Tier 4, MSP, PA, QL= 2 inj/28 days	1	\$6,170/28 days	Approve Recommendation	Approve Recommendation
OPSUMIT	8/13/24	Pulmonary Hypertension	Tier 4 with PA, QL, SP	NC	10 members - will be given 90 days to transition to ambrisentan or bosentan which are much cheaper (\$1,419 and \$570 respectfully)	\$12,316/28 days	Approve Recommendation	Approve Recommendation
PREFEST	8/13/24	Menopausal symptoms	Tier 3	Product Discontinued, move to NC	0		Approve Recommendation	Approve Recommendation