



Office of the Director

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OFFICIAL WEBSITE NOTICE

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RECOMMENDATIONS OF DRUG USE REVIEW / PHARMACY AND THERAPY COMMITTEE

The Oregon Drug Use Review / Pharmacy and Therapeutics Committee met in Wilsonville, Oregon on Thursday, January 26, 2012. The committee considered in order of priority: the safety and efficacy of the drugs being considered, the ability of Oregonians, to access effective prescription drugs that are appropriate for their clinical conditions and finally, substantial differences in costs of drugs within the same therapeutic class. Based upon the clinical information presented by staff and all public comment offered, while considering the impact on special populations, the Committee makes the following recommendations for the Oregon Prescriber-Managed Prescription Drug Plan or for any other preferred drug list established by the Oregon Health Authority:

Methadone New Starts @ doses > 20mg

The Committee reviewed the proposed New Start Criteria for Methadone and agreed that there is a need for better control, particularly for patients initiating therapy with methadone.

Based on the clinical evidence presented supporting the proposed PA, the committee agreed with the staff recommendations and recommended the additional requirement for a urine drug screen (UDS) prior to approval for all three of the criteria listed

Long Acting Opioid (LAO)- High Dose Limit

The Committee reviewed the proposed High Dose PA criteria for long acting opioids. The Committee found there was a need for better control of the use of high dose LAOs .

Based on the clinical evidence presented on the proposed PA, the committee agreed to the staff recommendations and added the requirement of a urine drug screen (UDS) and recommended strengthening the language for both functional improvement and co-administration with benzodiazepines.

Long Acting Opioids

The Committee reviewed the proposed new PA criteria. The Committee found there was a need for better control of the use of LAOs to avoid duplicate therapy, to ensure they are prescribed for an OHP covered diagnoses and are clinically warranted.

Based on the clinical evidence presented on the proposed PA, the committee agreed to the staff recommendations and added the requirement of a urine drug screen (UDS) and recommended strengthening the language for both functional improvement and co-administration with benzodiazepines.

New Drug Approval Pathway

The Committee reviewed the Department's proposed approval pathway for new medications in non-reviewed classes (other than oral oncology agents, AIDs and HIV drugs, and family planning drugs) to enable the safe effective and appropriate approval of these medications until a full drug class and/or new drug evaluation can be completed and presented by staff. The committee agreed that the Department should coordinate with the Medical Director to approve coverage for FDA approved indications for funded diagnosis in appropriate patients for up to six months.

Oral Anticoagulants

The committee reviewed the Oral Anticoagulant drug class and recommended the addition of warfarin as a preferred agent to the PMPDP. Warfarin is standard therapy to which new therapies are compared and as such the committee recommended it should be explicitly listed on the PDL.

Oral Direct Thrombin Inhibitors

The Committee reviewed the Oral Direct Thrombin Inhibitors and proposed new PA criteria.

Based on the clinical evidence presented and the proposed PA criteria the Committee agreed to the staff recommendations with the addition of GFR to step #1 and unstable INR to step #6.

Oral Direct Factor Xa Inhibitors

The Committee reviewed the Oral Direct Factor Xa Inhibitors and proposed PA criteria.

Based on the clinical evidence presented and the proposed PA criteria, the committee agreed to the staff recommendations and added the recommendations that rivaroxaban should be 3rd line therapy behind dabigatran when prescribed for atrial fibrillation.

Hepatitis C Oral Protease Inhibitors/ Triple Therapy

The Committee reviewed the Hepatitis C Oral Protease Inhibitors class and Triple Therapy criteria. The Committee agreed that these new therapies should be require PA criteria so that the medications are utilized in appropriate patients.

Based on the clinical evidence presented and the proposed PA criteria, the committee agreed to the staff recommendations and added the requirement of blood count exclusion criteria (Hg, ANC, Platelets) used to obtain FDA approval. They requested staff survey other plans for policies addressing the class as well as a more detailed comparative cost analysis. The recommended usage be rechecked within 3 months of PA implementation.

HSV Antivirals

The Committee reviewed the scan of the HSV Antiviral class of drugs. The Committee found there was no new compelling clinical evidence or information that necessitated a review of the class.

Based on this, the Committee made no change to the HSV Antivirals class.

Influenza Antivirals

The Committee reviewed the scan of the Influenza Antiviral class of drugs. The Committee found there was no new compelling clinical evidence or information that necessitated a review of the class.

Based on this, the Committee recommended no change to the Influenza Antivirals class.

Beta Blockers

The Committee reviewed the scan of the Beta Blockers class of drugs. The Committee found there was no new compelling clinical evidence or information that necessitated a review of the class.

Based on this, the Committee recommended no change to the Beta Blockers class.

Calcium Channel Blockers

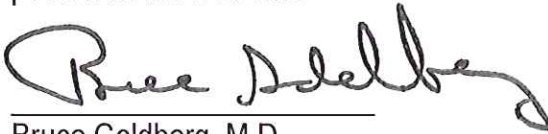
The Committee reviewed the scan of the Calcium Channel Blocker class of drugs. The Committee found there was no new compelling clinical evidence or information that necessitated a review of the class.

Based on this, the Committee recommended no changes to the Calcium Channel Blockers class.

The Committee has made these recommendations to the Oregon Health Authority for approval by the Director of the Oregon Health Authority.

APPROVAL BY THE DIRECTOR OF THE OREGON HEALTH AUTHORITY

The recommendations of the Drug Use Review / Pharmacy and Therapeutics Committee are approved and will be put into place no earlier than 60 days from the date this notice is posted on the web site.



Bruce Goldberg, M.D.
Director

2-7-12

Approval date

A request for reconsideration of this decision to adopt the recommendations of the Drug Use Review / Pharmacy and Therapeutics Committee must be filed with and received by the Director no later than 30 calendar days from the date of this notice. 2011 OR law, CH 730 (HB2100) Section 4