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OFFICIAL WEBSITE NOTICE
Posting Date: June 22, 2018

RECOMMENDATIONS OF DRUG USE REVIEW / PHARMACY AND THERAPEUTICS COMMITTEE

The Oregon Drug Use Review / Pharmacy and Therapeutics Committee met in Salem, Oregon on Thursday, May 24, 2018. 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 [i]and all public comment offered,[ii] while considering the impact on special populations, the Committee makes the following recommendations for the Oregon Practitioner-Managed Prescription Drug Plan (PMPDP) or for any other preferred drug list established by the Oregon Health Authority:

Drug Use Review Recommendations:

Exclusion List

The Committee recommended removing the exclusion list from the prior authorization (PA) guide.

Methadone Drug Use Evaluation

The Committee agreed with the recommendation to maintain the status of methadone as non-preferred on PMPDP.

Gabapentin Drug Use Evaluation

The Committee agreed with the recommendation that no changes are currently needed based on the evaluation of current utilization.

Short Acting Opioid PA criteria

The Committee approved the recommendation to update the PA criteria to include language regarding taper plans for patients on chronic therapy.

Practitioner-Managed Prescription Drug Plan (PMPDP) Recommendations:

Topical Antibiotics Class Update with Xepi™ (ozenoxacin) New Drug Evaluation

The Committee agreed that no changes to the PMPDP are recommended based on efficacy or safety data. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

Glaucoma Class Update with Rhopressa™ (netarsudil) and Vyzulta™ (latanoprostene) New Drug Evaluations

The Committee agreed that no changes to the PMPDP are recommended based on efficacy or safety data. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

Benlysta ® (belimumab) New Drug Evaluation

The Committee recommended designating belimumab as a non-preferred agent on the PMPDP and amended the proposed PA criteria to require documentation of baseline disease severity and objective documentation of improvement in disease activity to the renewal criteria; to require treatment with current standard of care medications for systemic lupus erythematosus prior to approval of belimumab; and to require prescription by or in consultation with a specialist. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

DRUG	CHANGE
belimumab	Make non-preferred on the PMPDP

Fluoroquinolone Class Update

The Committee recommended continuing to maintain at least one fluoroquinolone with broad coverage of gram-negative bacteria and at least one 'respiratory' fluoroquinolone as preferred options on the PMPDP. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

Clostridium Difficile Drugs Class Update

The Committee recommended designating bezlotoxumab as non-preferred on the PMPDP and to implement the proposed PA criteria after amending to remove metronidazole as a prerequisite. The Committee also recommended modifying the fidaxomicin PA criteria to remove metronidazole as a prerequisite and to remove the question which asks if the provider will switch to a preferred agent.

After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

DRUG	CHANGE
bezlotoxumab	Make non-preferred on the PMPDP

Botulinum Toxins Class Update

The Committee recommended updating the clinical prior authorization criteria to reflect current coverage and guidelines in the OHA Prioritized List of Health Services.

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. Recommendations with respect to the inclusion of a drug on the Practitioner-Managed Prescription Drug Plan will be put into place no earlier than 60 days from the date this notice is posted on the web site.

_____ June 22, 2018_

Patrick Allen — Approval date
Director

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

[i] http://www.orpdl.org/durm/meetings/meetingdocs/2018_05_24/finals/2018_05_24_PnT_Complete.pdf
[ii] http://pharmacy.oregonstate.edu/drug-policy/oregon-pharmacy-therapeutics-committee/meetings-agenda