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OFFICIAL WEBSITE NOTICE **Posting Date: February 13, 2020**

RECOMMENDATIONS OF DRUG USE REVIEW / PHARMACY AND THERAPEUTICS COMMITTEE

The Oregon Drug Use Review / Pharmacy and Therapeutics Committee met in Salem, Oregon on Thursday, February 6, 2020. 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 ⁱand 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:

Practitioner-Managed Prescription Drug Plan (PMPDP) Recommendations:

Immunosuppressants Literature Scan

The Committee recommended making no changes to the PMPDP based on clinical evidence. After comparative cost consideration in executive session, the Committee recommended making all treatments preferred on the PMPDP.

DRUG	CHANGE
azathioprine	Make preferred on the PMPDP
tacrolimus	Make preferred on the PMPDP

Diabetes, Insulins Literature Scan

The Committee recommended making no changes to the PMPDP based on clinical evidence. After comparative cost consideration in executive session, the Committee recommended making all forms of insulin lispro - except Admelog® - preferred on the PMPDP and to remove prior authorization (PA) for insulin detemir pen.

DRUG	CHANGE
insulin lispro	Make preferred on the PMPDP
Admelog@(insulin lispro)	Maintain as non-preferred on PMPDP

Jeuveau™ (prabotulinumtoxinA-xvfs) Abbreviated Drug Review

The Committee recommended designating prabotulinumtoxinA-xvfs as not covered.

Vyleesi™ (bremelanotide) Abbreviated Drug Review

The Committee recommended designating bremelanotide as not covered.

Diabetes, Glucagon Class Review

The Committee recommended creating a PMPDP class for the glucagon products and to evaluate the costs in executive session. After comparative cost consideration in executive session, the Committee recommended making GlucaGen®, glucagon emergency kit, and BaqsimiTM preferred and GvokeTM non-preferred on the PMPDP.

DRUG	CHANGE
GlucaGen®	Make preferred on the PMPDP
glucagon emergency kit	Make preferred on the PMPDP
Baqsimi™	Make preferred on the PMPDP
Gvoke™	Make non-preferred on the PMPDP

Xenleta™ (lefamulin) New Drug Evaluation

The Committee recommended making oral lefamulin non-preferred in the miscellaneous antibiotic PDL class.

DRUG	CHANGE
Xenleta™ (lefamulin)	Make non-preferred on the PMPDP

Biologics for Autoimmune Conditions Class Update with New Drug Evaluations

The Committee recommended updating the PA criteria to reflect the funding of treatment of moderate-to-severe hidradenitis suppurativa (HS) per Guideline Note 198 on the Prioritized List of Health Services and to reflect updated indications and age ranges for specific biologic response modifiers as presented. No changes to the PMPDP were

recommended based on the clinical evidence. After comparative cost consideration in executive session, the Committee recommended making secukinumab preferred and to maintain upadacitinib and risankizumab-rzaa as non-preferred on the PMPDP.

DRUG	CHANGE
Cosentyx® (secukinumab)	Make preferred on the PMPDP

Narcolepsy Agents Class Update with New Drug Evaluation

The Committee recommended making no changes to the PMPDP based on clinical evidence. The Committee recommended updating the safety edits for narcolepsy drugs to incorporate modafinil, armodafinil, solriamfetol and pitolisant into a unified criterion. After comparative cost consideration in executive session, the Committee recommended making modafinil and armodafinil preferred.

DRUG	CHANGE
armodafinil	Make preferred on the PMPDP
modafinil	Make preferred on the PMPDP

Drug Use Review (DUR) Recommendations:

Orphan Drug Policy Proposal

The Committee recommended implementing the proposed PA criteria - after adding a question to the initial approval criteria to require they be prescribed by or in consultation with an appropriate specialist for the condition - to support medically appropriate use of orphan drugs based on FDA labeling.

Opioid Literature Scan and Prior Authorization Update

The Committee recommended updating the PA criteria for short-acting and long-acting opioids to prevent harm from abrupt discontinuation and reinforce a shared patient and provider decision for appropriate dosage reduction.

Febuxostat Prior Authorization Update

The majority of the Committee rejected (7:1 vote) the recommendation to add a PA requirement that the patient be assessed for CV risk and for the prescriber to attest that the benefits outweigh the risks.

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 7 days from the date this notice is posted on the web site.

(All	2/13/2020
Patrick M. 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 7 calendar days from the date of this notice. 2019 OR law, HB 2692

i https://www.orpdl.org/durm/meetings/meetingdocs/2019_11_21/finals/2019_11_21_WrittenTestimony.pdf

ii https://pharmacy.oregonstate.edu/drug-policy/oregon-pharmacy-therapeutics-committee/meetings-agenda