



OFFICIAL WEBSITE NOTICE

Posting Date: June 7, 2023

RECOMMENDATIONS OF DRUG USE REVIEW / PHARMACY AND THERAPEUTICS COMMITTEE

The Oregon Drug Use Review / Pharmacy and Therapeutics Committee met virtually on Thursday, June 1, 2023. 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 substantial differences in costs of drugs within the same therapeutic class. Based upon the clinical information presented by staffⁱ and all public comment offered,ⁱⁱ while considering the impact on people, populations and communities who have been most impacted by historic and contemporary injustices and health inequities including but not limited to Oregon Tribal Nations, American Indian or Alaska Native persons, Hispanic, Latino, Latina, or Latinx persons, Black or African American persons, Asian or Asian American persons, Pacific Islander or Native Hawaiian persons, people with disabilities, people with limited English proficiency, and immigrants and refugees, the Committee makes the following recommendations for Drug Use Review, the Oregon Practitioner-Managed Prescription Drug Plan (PMPDP), or for any other preferred drug list established by the Oregon Health Authority:

Drug Use Review (DUR) Recommendations:

Oncology Policy Updates

The Committee recommended adding the following new FDA-approved antineoplastic agents to Table 1 in the Oncology Agents prior authorization (PA) criteria: Omisirge[®] (omidubicel-onlv); and Zynyz[™] (retifanlimab-dlwr).

Orphan Drug Policy Updates

The Committee recommended updating Table 1 in the Orphan Drugs PA criteria to support medically appropriate use of Joenja[®] (leniolisib) and Lamzede[®] (velmanase alfa-tycv).

Low-Dose Quetiapine Drug Use Evaluation (DUE)

The Committee approved updating the Low Dose Quetiapine PA criteria to incorporate coverage of generalized anxiety disorder and to automatically approve PA requests for extended-release (ER) quetiapine for members with recent claims for an SSRI or SNRI. The Committee recommended making quetiapine ER preferred on the PMPDP and to remove the auto-pa for mental health specialists.

DRUG	CHANGE
quetiapine ER	Make preferred on the PMPDP

Severe Inflammatory Skin Disease PA Update

The Committee recommended revising the PA criteria for “Targeted Immune Modulators for Severe Asthma and Atopic Dermatitis” and “Targeted Immune Modulators for Autoimmune Conditions” to require a 4-week trial and failure (or contraindication) of either moderate to high potency topical steroids in combination with a topical calcineurin inhibitor (e.g., tacrolimus), or an oral immunomodulator (e.g., cyclosporine, methotrexate, or oral corticosteroid) before approval of dupilumab or upadacitinib treatment for atopic dermatitis.

Practitioner-Managed Prescription Drug Plan (PMPDP) Recommendations:

Skyclarys™ (omaveloxolone) New Drug Evaluation (NDE)

The Committee recommended maintaining omaveloxolone as non-preferred on the PMPDP and to implement the proposed PA criteria to ensure medically appropriate use.

Calcitonin Gene-Related Peptide (CGRP) Inhibitors Drug Effectiveness Review Project (DERP) Report

The Committee recommended making no changes to the PMPDP based on review of recently published clinical evidence and to update the PA criteria as proposed. After comparative cost consideration in the executive session, the Committee recommended making no changes to the PMPDP.

Botulinum Toxins Class Update

The Committee recommended making no changes to the PMPDP based on review of recently published clinical evidence and to revise the PA criteria to support individualized review for members younger than 21 years of age under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program. After comparative

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

Clostridioides difficile Drug Class Update & NDE

The Committee recommended designating fecal microbiota non-preferred on the PMPDP and implement the proposed “Prevention of Recurrent *Clostridioides difficile*-Associated Infection” PA criteria. The Committee approved retiring the current bezlotoxumab PA criteria and applying the new criteria to bezlotoxumab infusion and fecal microbiota enema. After comparative cost consideration in the executive session, the Committee recommended making metronidazole capsules non-preferred on the PMPDP.


DRUG	CHANGE
metronidazole capsules	Make non-preferred on the PMPDP

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 recommendation to remove the auto-PA for low-dose quetiapine when prescribed by a mental health specialist is under further consideration until staff can evaluate potential impacts to access and barriers to care.

All other recommendations of the Drug Use Review / Pharmacy and Therapeutics Committee are approved. Recommendations with respect to the inclusion of a drug on the PMPDP will be put into place no earlier than 7 days from the date this notice is posted on the website.



David Baden
Interim Director

6/7/2023

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 7 calendar days from the date of this notice. ORS 414.361(6)(b).

ⁱ https://www.orpdl.org/durm/meetings/meetingdocs/2023_06_01/finals/2023_06_01_PnT_Complete.pdf

ⁱⁱ [no written testimony was submitted](#)