



OFFICE OF THE DIRECTOR

Kate Brown, Governor

Oregon
Health
Authority

500 Summer St NE E20

Salem OR 97301

Voice: 503-947-2340

Fax: 503-947-2341

www.Oregon.Gov/OHA

www.health.oregon.gov

OFFICIAL WEBSITE NOTICE

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RECOMMENDATIONS OF DRUG USE REVIEW / PHARMACY AND THERAPEUTICS COMMITTEE

The Oregon Drug Use Review / Pharmacy and Therapeutics Committee met in Wilsonville, Oregon on Thursday, September 24, 2015. 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 staffⁱ 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:

Initial Pediatric SSRI High Dose Prior Authorization Criteria

The Committee recommended approving the updated prior authorization (PA) criteria as presented.

Codeine PA Criteria

The Committee recommended approving the updated PA criteria as presented.

Asthma and COPD Class Updates

The Committee recommended maintaining tiotropium/olodaterol, fluticasone furoate and fluticasone furoate/vilanterol drug products non-preferred and to create a new PMPDP class for long-acting muscarinic antagonist/long-acting beta-agonist (LAMA/LABA) fixed-dose combination inhaler products. The Committee also recommended reorganizing and modifying the clinical PA criteria to promote step-therapy that is consistent with Oregon Asthma Guidelines and with medical evidence for COPD including:

- Require all non-preferred LABA inhalers go through the LABA PA criteria.
- Require all non-preferred inhaled corticosteroids (ICS) go through the ICS PA criteria.
- Remove existing clinical PA for “asthma controllers” and indacaterol and incorporate the drugs under these PAs into the ICS or LABA PA criteria.
- Remove clinical PA for leukotriene inhibitors and require non-preferred leukotriene inhibitors go through the generic non-preferred PDL PA criteria.
- Approve clerical changes to the roflumilast clinical PA criteria.

The Committee deferred taking action on the proposed new PA criteria for the LABA/ICS combination inhalers and LAMA/LABA products and asked staff to bring back to P&T Committee meeting in November.

Diabetes Class Update

The Committee recommended maintaining Glyxambi® (empagliflozin and linagliptin) as non-preferred on the PMPDP and apply the current clinical PA criteria for SGLT-2 inhibitors. The Committee approved reorganizing the PMPDP for non-insulin antidiabetic agents into the following classes:

- DPP-4 Inhibitors
- GLP-1 Receptor Antagonists
- Miscellaneous Antidiabetic Agents (metformin, pramlintide, meglitinides, others)
- SGLT-2 Inhibitors
- Sulfonylureas
- Thiazolidinediones

The Committee recommended removing the clinical PA for pramlintide and to continue the current clinical PAs for the DPP-4 inhibitors and GLP-1 Receptor Antagonists, but amended the proposal to require all agents be subject to the clinical criteria. The Committee also recommended continuing the SGLT-2 inhibitors PA, but amended the approval duration to 6 months under question #5, so renal function can be re-evaluated and proposed developing renewal criteria to require re-analysis of renal function for re-approval.

Modafinil/Armodafinil Drug Use Evaluation

The Committee recommended implementing the proposed PA criteria for patients initiated on modafinil or armodafinil, who have no history of claims within the previous 102 days, and without previous claims evidence of narcolepsy or obstructive sleep apnea.

The Committee amended the proposed criteria to remove “or other CNS stimulants” from Yes under question #3 and to remove “Pass to RPH” from Yes under question #4. The Committee recommended grandfathering current modafinil/armodafinil users for one year.

Tetracycline Drug Use Evaluation

The Committee recommended restricting use of all tetracycline antibiotics to a 14-day supply every six months and to require PA for additional tetracycline antibiotic therapy to verify the presence of an OHP funded condition.

Low Dose Quetiapine Policy Evaluation

The Committee reviewed the policy evaluation and recommended updating the PA criteria to automatically approve for patients with prior medical claims evidence of schizophrenia or bipolar disorder, or a claim for a second generation antipsychotic in the past six months, as well as prescriptions identified as being written by a mental health provider when the claims system has this capability.

Tesamorelin for injection PA Criteria Review

The Committee recommended that no further research is needed at this time and no changes to the current PA criteria were necessary.

Becaplermin topical gel PA Criteria Review

The Committee recommended that no further research is needed at this time and no changes to the current PA criteria were necessary.

Practitioner-Managed Prescription Drug Plan (PMPDP) Recommendations:

Asthma and COPD Class Updates

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

Diabetes Class Update

After comparative cost consideration in executive session, the Committee recommended making Byetta® (exenatide) preferred on the PMPDP.

DRUG	CHANGE
exenatide	Make preferred on the PMPDP

Oral Multiple Sclerosis Drugs Scan

The Committee recommended that no further research is needed at this time and amended question #2 in clinical PA for No to refer to guideline; “not funded under the OHP”. After comparative cost consideration in executive session, recommended making no changes to the PMPDP.

Growth Hormones Scan

The Committee recommended that no further research is needed at this time and to leave the definition of adult in question #2 in clinical PA as “older than 18 years of age”. After comparative cost consideration in executive session, recommended making no changes to the PMPDP.

Inflammatory Bowel Agents Scan

The Committee recommended that no further research is needed at this time and to include at least one oral corticosteroid formulation as preferred on the PMPDP for adjunctive management of mild Crohn’s disease. The Committee also agreed that budesonide rectal foam should be maintained as a non-preferred agent at this time due to limited short-term evidence. After comparative cost consideration in executive session, recommended making no changes to the PMPDP.

Alzheimer’s Agents Scan

The Committee recommended that no further research is needed at this time After comparative cost consideration in executive session, recommended making no changes to the PMPDP.

Sacubitril/Valsartan NDE

The Committee recommended restricting use of Entresto™ (sacubitril/valsartan) to populations where it has demonstrated efficacy and to adopt the proposed PA criteria with the addition of an initial question to determine if the request is for renewal of a previously approved PA.

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.



Lynne Saxton
Director

10-22-15
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

ⁱhttp://pharmacy.oregonstate.edu/drug_policy/sites/default/files/pages/dur_board/meetings/meetingdocs/2013_07_25/finals/2013_07_25_PnT_Complete.pdf

ⁱⁱhttp://pharmacy.oregonstate.edu/drug_policy/sites/default/files/pages/dur_board/meetings/meetingdocs/2013_07_25/finals/2013_07_25_WrittenTestimony.pdf