



OFFICIAL WEBSITE NOTICE

**Posting Date: August 21, 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, July 26, 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<sup>i</sup> and all public comment offered,<sup>ii</sup> 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:**

**Oral Cystic Fibrosis Modulators Class Update**

The Committee recommended making no changes to the PMPDP based on the evidence and to continue to require prior authorization (PA) for approval in appropriate patients. The Committee also recommended amending the criteria to remove the requirement that the CF gene mutation test be FDA-approved, to remove the FEV1 restriction and to include the FDA-approved mutations for tezacaftor/ivacaftor. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

**Newer Diabetes Treatments Class Update**

The Committee recommended no changes to the PMPDP based on efficacy and safety data and to add the new formulations to existing PA criteria. The Committee also recommended amending the SGLT-2 PA criteria to remove the amylin analogs from question #6. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

## Asthma Biologics Drug Effectiveness Review Project (DERP) Summary

The Committee recommended no changes to the PMPDP based on the clinical information; to add benralizumab to the PA criteria for monoclonal antibodies for asthma; and to revise the criteria to include the expanded indication for mepolizumab in patients experiencing eosinophilic granulomatosis with polyangiitis. The Committee also recommended adding a new question to the PA criteria to ensure auto-injectable epinephrine is co-prescribed; modifying the criteria to require at least 1 hospitalization or 2 ED visits in the past 12 months while receiving a maximally dosed inhaled corticosteroid AND 2 additional controller drugs; amending question #4 in the PA criteria to go to #10 if answered “yes”; and to change the wording in question #4 from “another” monoclonal antibody to “newly approved”. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

## Radicava® (edaravone) New Drug Evaluation

The Committee recommended implementing the proposed PA criteria for edaravone after amending to remove the age requirement in question #2; removing question #5; moving the question regarding continuation of therapy to the top of the criteria; modifying the renewal criteria to say “prescriber” instead of “prescribing physician”; and to add questions identical to #8 and #9 in the approval criteria to the renewal criteria. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

## Neuropathic Pain DERP Summary

The Committee recommended no further review or research is needed at this time. The Committee also recommended maintaining pregabalin extended-release tablets as non-preferred on the PMPDP and to apply clinical PA criteria. After comparative cost consideration in executive session, the Committee recommended making no changes to the PMPDP.

## **Drug Use Review Recommendations:**

### Sedatives Prior Authorization (PA) Criteria

The Committee recommended updating the sedative PA criteria to clarify FDA-recommended initial and maximum daily dose recommendations. The Committee also approved the proposed changes for use in the palliative care setting and modified the approval duration to lifetime.

## New Drug Policy PA Criteria

The Committee approved the proposed changes to the New Drug Policy PA criteria to correlate with how new drugs are currently being managed.

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.



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Patrick Allen  
Director

August 21, 2018  
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

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<sup>i</sup> [http://www.orpd.org/durm/meetings/meetingdocs/2018\\_07\\_26/finals/2018\\_07\\_26\\_PnT\\_Complete.pdf](http://www.orpd.org/durm/meetings/meetingdocs/2018_07_26/finals/2018_07_26_PnT_Complete.pdf)

<sup>ii</sup> [http://www.orpd.org/durm/meetings/meetingdocs/2018\\_07\\_26/finals/2018\\_07\\_26\\_WrittenTestimony.pdf](http://www.orpd.org/durm/meetings/meetingdocs/2018_07_26/finals/2018_07_26_WrittenTestimony.pdf)