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## OFFICIAL WEBSITE NOTICE

**Posting Date: June 21, 2016**

### **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 26, 2016. 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:

#### **Drug Use Review Recommendations:**

##### Dalfampridine Prior Authorization (PA) Policy Evaluation

The Committee agreed that no further research is needed at this time and recommended maintaining the current PA policy as presented.

##### Mipomersen & Lomitapide PA Policy Evaluation

The Committee agreed that no further research is needed at this time and recommended maintaining the current PA policy as presented.

##### Sapropterin PA Policy Evaluation

The Committee agreed that no further research is needed at this time and recommended maintaining the current PA policy and to update the criteria to reflect target phenylalanine levels per guideline.

## **Practitioner-Managed Prescription Drug Plan (PMPDP) Recommendations:**

### Indacaterol/Glycopyrrolate & Glycopyrrolate inhalation powder New Drug Evaluation (NDE)

The Committee recommended designating glycopyrrolate as non-preferred due to insufficient evidence and to designate indacaterol/glycopyrrolate as non-preferred and subject to the LAMA/LABA PA criteria. After comparative cost consideration in executive session, the Committee recommended no other changes to the PMPDP.

DRUG	CHANGE
glycopyrrolate	Make non-preferred on the PMPDP
indacaterol/glycopyrrolate	Make non-preferred on the PMPDP

### Antipsychotics Drug Class Update and NDEs

The Committee recommended making no changes to the PMPDP based on the clinical evidence and supported the plan for staff to perform and present a Drug Use Evaluation at a future meeting. After comparative cost consideration in executive session the Committee recommended the making lurasidone, asenapine and aripiprazole IM preferred contingent upon successful supplemental rebate contracting and to monitor the market shift; to maintain brexpiprazole and cariprazine as non-preferred on the Voluntary Mental Health PMPDP; and to make chlorpromazine non-preferred on the Voluntary Mental Health PMPDP and to perform a change form request

DRUG	CHANGE
lurasidone	Make preferred on the Voluntary Mental Health PMPDP
asenapine	Make preferred on the Voluntary Mental Health PMPDP
aripiprazole IM	Make preferred on the Voluntary Mental Health PMPDP
chlorpromazine	Make non-preferred on the Voluntary Mental Health PMPDP

### Long-acting Opioids Drug Class Update

The Committee recommended no changes to the PMPDP based on the clinical evidence presented. The Committee also recommended adopting the proposed opioid analgesics PA criteria after amending to: ask if the opioid prescription is being prescribed for pain diagnoses associated with back or spine conditions as defined by the OHP List of Prioritized Services, or for migraine headache; and add examples of validated tools that assess function as outlined in Guideline Note 60 of the OHP List of Prioritized Services.

The Committee recommended discontinuing the PA criteria for methadone, opioid/non-opioid fixed-dose combination products, and short-acting fentanyl products as these no longer require dedicated criteria.

Finally, the Committee asked staff to develop and present a plan at a future P&T meeting detailing plans to reach the ultimate coverage goal, including monitoring impact and performing provider education. After comparative cost consideration in executive session, the Committee recommended no changes to the PMPDP.

### Lisdexamfetamine New Indication Evaluation

The Committee deferred taking action on the proposed changes to the ADHD PA criteria until July when the ADHD Drug Use Evaluation (DUE) will be presented. The committee asked that options be considered for restricting the use of lisdexamfetamine for Binge Eating Disorder (BED) to second line therapy in the PA criteria.

### Patiromer NDE

The Committee deferred making PMPDP recommendations until a review of sodium polystyrene sulfonate and zirconium cyclosilicate can be presented at a future P&T meeting. The Committee also recommended approval of the proposed PA criteria to prevent use in the emergent setting or in scenarios not supported by the medical literature.

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

6/21/2016  
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>1</sup>[http://www.orpd.org/durm/meetings/meetingdocs/2016\\_05\\_26/finals/2016\\_05\\_26\\_Pnt\\_Complete.pdf](http://www.orpd.org/durm/meetings/meetingdocs/2016_05_26/finals/2016_05_26_Pnt_Complete.pdf)

<sup>2</sup>No written testimony was submitted for this meeting