

New Drug Policy

Goal:

- Restrict coverage of selected new drugs until the Oregon Pharmacy & Therapeutics Committee can review the drug for appropriate coverage.

Length of Authorization:

- Up to 6 months

Requires PA:

- A new drug, identified by the reviewing pharmacist during the weekly claim processing drug file load, in a class where existing prior authorization policies exist or that is used for a non-funded condition on the Oregon Health Plan (OHP) List of prioritized services.

Approval Criteria

1. What diagnosis is being treated?	Record ICD10 code	
2. Is the drug being used to treat an OHP-funded condition?	Yes: Go to #3	No: Pass to RPh. Deny; not funded by the OHP.
3. Pass to RPh. The prescriber must provide documentation of therapeutic failure, adverse event, or contraindication alternative drugs approved by FDA for the funded condition. Otherwise, the prescriber must provide medical literature supporting use for the funded condition. RPh may use clinical judgement to approve drug for up to 6 months or deny request based on documentation provided by prescriber.		

P&T / DUR Review: 11/15 (AG); 12/09

Implementation: 1/1/16; 1/1/10