NOTE: Any agenda items discussed by the DUR/P&T Committee may result in changes to utilization control recommendations to the OHA. Timing, sequence and inclusion of agenda items presented to the Committee may change at the discretion of the OHA, P&T Committee and staff. The DUR/P&T Committee functions as the Rules Advisory Committee to the Oregon Health Plan for adoption into Oregon Administrative Rules 410-121-0030 & 410-121-0040 as required by 414.325(9).

Members Present: Kelley Burnett, DO; Rich Clark, MD, MPH; Walter Hardin, D.O., MBA; Tracy Klein, PhD, FNP; Phil Levine, PhD; Caryn Mickelson, PharmD; James Slater, PharmD; Cathy Zehrung, RPh

Members Present by Phone: Stacy Ramirez, PharmD;

Staff Present: Richard Holsapple, RPh; Roger Citron, RPh; Dee Weston; Sarah Servid, PharmD; Deanna Moretz, PharmD, BCPS; Lindsay Newton; Megan Herink, PharmD, BCPS; Melissa Smith, PharmD; Kim Vo, PharmD;

Staff Present by Phone: Kathy Sentena, PharmD; Dean Haxby, PharmD

Audience: Rick Frees, Vertex; Melissa Snider, BioMarin; Jeana Colabianchi, Sunovion; David Baheim, Genertech; Kim Laubmeier, Sunovion; Ron Abraham, Sunovion; Lyle Laird, Sunovion; Bobbi Jo Duim, Bily; Mary Kembus, Novartis; Matt Ueda, Purdue; *Stuart O’Brochta, Gilead; Lisa Boyle, WVP Health Authority; Robin Traver, Umpqua Health; *Lynda Finch, Biogen; *Lisa Borland, Sarepta; Mike Donabedian, Sarepta; *Erika Finanger, OHSU; Dana Koehn, Biomeratin; Matt Seibt, Biogen

(*) Provided verbal testimony

Written testimony provided: *Erika Finanger, MD, OHSU; Barry Russman, MD, OHSU; Michael Sussman, MD, Shriners Hospital

I. CALL TO ORDER

A. The meeting was called to order at approximately 1:05 pm. Introductions were made by Committee members and staff.
B. Mr. Citron reported there were no new conflicts of interest to declare.
C. Approval of agenda and January minutes presented by Mr. Citron. (pages 5 - 9)

**ACTION:** Motion to approve, 2nd, All in Favor.

D. OHA update presented by Dr. Jim Rickards regarding Hep C PA criteria and the MOU. Committee will be sent a copy of the MOU once all of the documents are finalized.

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**II. HEALTH EVIDENCE REVIEW COMMISSION (HERC) UPDATE**

HERC update presented by Darren Coffman. In the future, when a drug is reviewed that the Committee should be considered by HERC for one of the new lines on the Prioritized List, they should make that recommendation to the OHA so it can be called out in the minutes (Statement of intent).

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**III. DUR ACTIVITIES**

A. Quarterly Utilization Reports  
B. ProDUR Report  
C. RetroDUR Report  
D. Oregon State Drug Reviews  
   2. Treatment of Gout.

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**IV. PREFERRED DRUG LIST NEW BUSINESS**

A. Hepatitis B Class Update (pages 26 - 38)  
Dr. Smith presented the class update and following recommendation:

1. Maintain tenofovir or entecavir, as preferred agents on the PMPDP and tenofovir alafenamide as non-preferred.
2. Approve updated PA criteria as presented

**ACTION:** Motion to approve, 2nd. All in favor. Approved.

B. Non-analgesics for Pain Review (pages 39 - 84)  
Dr. Moretz presented the class update and the following recommendation:

1. Approve proposed PA criteria to restrict use to funded pain conditions and include separate PA criteria with the following restrictions: approve for 90 days, renew for document response and if there is a response, approve for a year for the following medications. Bring back in November to review and address quantity limits:
   a. Pregabalin  
   b. Milnacipran
c. Lidocaine Patch
d. Topiramate Extended Release (non-preferred products)

2. Add quantity limit of 3 patches/24 hours for topical lidocaine patches which is the maximum approved daily dose to insure safe use.
3. Retire “Drug used for non-funded Pain” criteria

**ACTION:** Amended proposed PA criteria to remove lifetime approval and added if documented response to approve 1 year. Asked staff to bring back in November to evaluate need for quantity limits. Motion to approve, 2nd. All in favor. Approved.

C. Skeletal Muscle Relaxants Class Update (pages 85 - 99)

Dr. Vo presented the scan and following recommendation:

1. Approve revised PA criteria to limit approval to 3 months.
2. Evaluate comparative costs in executive session.

**ACTION:** Amended proposed PA criteria to change length of authorization from 3 to 6 months, added question after carisoprodol to deny if member on opioids and to change length of approval for carisoprodol to 3 months. Motion to approve, 2nd. All in favor. Approved.

D. Tramadol Classification and Review (pages 100 – 115)

Dr. Herink presented to drug review and recommendation:

1. Maintain tramadol in current opioid prior authorization policy.

E. Sedatives Class Review (pages 116-138)

Dr. Servid presented the following class update and recommendations:

1. Make benzodiazepine sedatives non-preferred due to limited efficacy data.
2. Approve amended proposed changes to PA criteria to restrict use of sedatives to OHP-funded conditions, to prevent therapeutic duplication, and to apply quantity limits of 30 tablets/60 days for all agents in the class.
3. Apply quantity limits to zolpidem to reduce use above the maximum daily FDA recommended dose.
   a. Zolpidem IR: 10 mg for males and 5 mg for females
   b. Zolpidem ER: 12.5 mg for males and 6.25 mg for females

**ACTION:** Amended to include requiring a PA for zolpidem and include opioid and all benzodiazepine use to question #6. Motion to approve, 2nd. All in favor. Approved.

F. Abbreviated Drug Reviews (pages 172-176)

Dr. Servid and Dr. Moretz presented the class update along with the following recommendations:

1. Cholbam® (cholic acid).
   a. Refer PA requests to the Medical Director.
2. Exondys 51™ (etiplirsen).
   a. Refer PA requests to the Medical Director.

3. Spinraza™ (nusinersen).
   a. Approve proposed PA criteria and apply to both pharmacy and physician administered claims.

 ACTION: Amended wording in PA for Spinraza™ to re-phrase wording for neurologist to specialist and to refer requests for PA renewal at 12 months to Medical Director. Motion to approve as amended, 2nd. All in favor. Approved.

V. EXECUTIVE SESSION

VI. RECONVENE FOR PUBLIC RECOMMENDATIONS * After executive session

A. Hepatitis B Class Update (pages 26 - 38)
   *ACTION: No changes to the PDL.
   Motion, 2nd, All in Favor. Approved.

B. Non-analgesics for Pain Review (pages 39 - 84)
   *ACTION: Make gabapentin tablets preferred. Recommend step therapy to require trial of gabapentin before Pregabalin approval.
   Motion, 2nd, Majority in Favor. One opposed. Approved.

C. Skeletal Muscle Relaxants Class Review (pages 85 - 99)
   *ACTION: No changes to the PDL.
   Motion, 2nd, All in Favor. Approved.

D. Sedatives Class Update (pages 116 - 138)
   *ACTION: No changes to the PDL.
   Motion, 2nd, All in Favor. Approved

VII. ADJOURN