



Drug Use Research & Management Program
OHA Division of Medical Assistance Programs
500 Summer Street NE, E35; Salem, OR 97301-1079
Phone 503-947-5220 | Fax 503-947-1119



Oregon Drug Use Review / Pharmacy & Therapeutics Committee

Thursday, September 27, 2012 1:00-5:00 PM
Clackamas Community Training Center
29353 SW Town Center Loop East
Wilsonville, OR 97070

MEETING MINUTES

Members Present: Andris Antoniskis, MD; Zahia Esber, MD; Tracy Klein, PhD, FNP; Phillip Levine, PhD; William Origer, MD; David Pass, MD; Cathy Zehring, RPh

Members Present by Phone: James Slater, PharmD

Staff Present: Roger Citron, RPh; Megan Herink, PharmD, BCPS; Kathy Ketchum, RPh, MPA:HA; Ted Williams, PharmD; Valerie Smith; Richard Holsapple, RPh; Trevor Douglass, DC, MPH; Israel Harden; Amy Burns, PharmD

Staff Present by Phone: Kathy Sentena, PharmD

Audience: David Barhoum (Genentech); Sean Murphy (Genentech); Brady Blaser (Genentech); Jim Graves (BMS); Kim Laubmeier (Otsuka); Michelle Mattox (Vertex); Gregg Rasmussen (Vertex); Paul Bonham (NovoNordisk); Bobon Guty (Lundbeck); Deron Grothe (Teva); Cary Eastman; Shane Hall (Purdue); Venus Holder (Lilly); Jeana Colabianchi (Sunovion); Linda Craig (AZ); Michel Estuis (Pfizer); Bruce Smith (GSK); Jamie Damm (Vertex); Don Stecher (Novartis); Mary Kemhus (Novartis); Steve Faloon (Otsuka); Todd Landwehr

I. CALL TO ORDER

- a. The meeting was called to order at approximately 1pm.
- b. Conflict of interest declarations were reviewed; no new conflicts were reported.
- c. The minutes from the August 30, 2012 meeting were reviewed.

ACTION: The minutes were approved with the addition of Phillip Levine, PhD in the Members Present section of the minutes.

II. NEW BUSINESS

- a. Dr. Herink presented an abbreviated drug evaluation on hypertonic saline use for cystic fibrosis patients and presented additional requested information on dornase alfa therapy past 2 years. Recommendations were that inhaled hypertonic saline be preferred, and to make dornase alfa preferred with a quantity limit of 30 vials per 30 days.

***ACTION:** The committee approved the recommendations after Executive Session.

- b. Ms. Ketchum presented an abbreviated class update on bone metabolism agents, recommending that tiludronate, alendronate with vitamin D3, zoledronic acid and denosumab be non-preferred and make risedronate preferred. Ms. Ketchum also recommended limiting zoledronic acid to medical claims and a RetroDUR intervention of bisphosphonates to notify clinicians to re-evaluate patient FRAX score after 5 years of therapy.

***ACTION:** The committee approved the recommendations after Executive Session.

- c. Dr. Burns presented an abbreviated class update on colony stimulating factors, recommending that all drugs continue to be listed as preferred and evaluate use of CSFs for hepatitis C and if inappropriate use is noted, bring back recommendation of prior authorization criteria for consideration.

***ACTION:** The committee approved the recommendations after Executive Session.

**Agenda items will be discussed by Committee members for the purpose of making recommendations to the Oregon Health Plan for adoption into Oregon Administrative Rules 410-121-0030 & 410-121-0040 as required by 414.325(9)*

- d. Dr. Sentena presented an abbreviated class review on intravenous/sub-Q Pulmonary Arterial Hypertension (PAH) agents, recommending that all IV/SQ products be made non-preferred and require prior authorization to include: diagnosis of PAH with NYHA functional class III or IV and prescribed in consultation with a specialist (pulmonologist or cardiologist), and make tadalafil non-preferred when sildenafil generics warrant a change.
- *ACTION:** The committee approved the recommendations after Executive Session.
- e. Dr. Herink presented drug class scans:
1. Growth hormone, recommending Omnitrope be preferred, Nutropin and Genotropin be non-preferred and stop grandfathering non-preferred products as of January 1, 2013. Sean Murphy with Genentech provided public comment.
- *ACTION:** The committee approved the recommendations after Executive Session.
2. Ulcerative colitis, recommending Canasa suppository and generic balsalazide be made preferred and mesalamine rectal enemas and kits be non-preferred.
- *ACTION:** The committee approved the recommendations after Executive Session.
3. Ophthalmic antibiotics, recommending Ciloxan ointment be preferred, levofloxacin drops be non-preferred, and maintain Moxeza as non-preferred.
- *ACTION:** The committee approved the recommendations after Executive Session.
4. Phosphate binders, recommending Renagel and Calphron be preferred.
- *ACTION:** The committee deferred the recommendation until the November meeting.
- f. Ms. Ketchum presented the annual PDL review:
1. Recommended changes to the Antipsychotics- 2nd Generation class include making olanzapine preferred on the voluntary mental health PDL, removing risperidone rapid dissolving tabs from the voluntary mental health PDL, and consider restricting IM products to medical claims only.
- *ACTION:** The committee approved the recommendations for PDL updates, and deferred restricting IM products until an evaluation of current billing practices can be done.
2. Recommended changes to the ADHD class include making Focalin XR preferred, making Concerta and Ritalin LA and their generic equivalents non-preferred, and perform DUE of appropriate use of the class, appoint an ad-hoc expert and bring back to November meeting.
- *ACTION:** The committee approved the recommendations after Executive Session.
3. Recommended changes to the Hepatitis C (peginterferons) class include making Pegasys non-preferred and grandfather current patients and perform a RetroDUR outreach to high volume prescribers. Recommended that no change be made to the current PDL status or clinical PA edits for protease inhibitors.
- *ACTION:** The committee approved the recommendations after Executive Session.
4. The Hematopoietic Agents class was reviewed and recommendations were made at the August 30, 2012 meeting so there are no new actions.
 5. Recommended changes to the Asthma Controllers class include making Asmanex non-preferred, make Alvesco preferred as an ICS alternative, and adding Advair, Dulera and Symbicort as preferred ICS/LABA combination agents with step edit and pending SSDC negotiations.
- *ACTION:** The committee approved the recommendations after Executive Session.
6. Recommended changes to the Insulins class include making insulin detemir (Levemir) preferred.
- *ACTION:** The committee approved the recommendations after Executive Session.
7. Recommended changes to the Other Lipotropics class include making Antara, Tricor and gemfibrozil preferred and make all other fibrates non-preferred. No changes to the other drugs in the class
- *ACTION:** The committee approved the recommendations after Executive Session.
8. Recommended changes to the DPP-4 Inhibitors class include listing no drugs as preferred and continue with current clinical PA criteria.

**Agenda items will be discussed by Committee members for the purpose of making recommendations to the Oregon Health Plan for adoption into Oregon Administrative Rules 410-121-0030 & 410-121-0040 as required by 414.325(9)*

- *ACTION:** The committee deferred the recommendation until the November meeting.
9. Recommended no changes to the DRIs, ACE-Is and ARBs class at this time and revisit when multiple generic ARBs become available.
- *ACTION:** The committee approved the recommendations after Executive Session.
10. Recommended no changes to the DRIs, ACE-Is and ARBs + HCT class at this time and revisit when multiple generic ARBs become available.
- *ACTION:** The committee approved the recommendations after Executive Session.
11. Recommended changes to the Otic Antibiotics class include making Ciprodex non-preferred.
- *ACTION:** The committee approved the recommendations after Executive Session.
12. Recommended changes to the Topical Antiparasitics include making Natroba preferred with step therapy use of OTC permethrin first.
- *ACTION:** The committee approved the recommendations after Executive Session.

III. The meeting adjourned at approximately 3:45pm.

**Agenda items will be discussed by Committee members for the purpose of making recommendations to the Oregon Health Plan for adoption into Oregon Administrative Rules 410-121-0030 & 410-121-0040 as required by 414.325(9)*