



Drug Use Research & Management Program
OHA Division of Medical Assistance Programs
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Oregon Drug Use Review / Pharmacy & Therapeutics Committee

Thursday, November 20, 2014 1:00-5:00 PM
Clackamas Community Training Center
29353 SW Town Center
Wilsonville, OR 97070

MEETING MINUTES

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: Cathy Zehrung, RPh; Phillip Levine, PhD; William Origer, MD; Kathryn Lueken, MD; James Slater, PharmD;

Members Present by Phone: Stacy Ramirez, PharmD; David Pass, MD; Josh Bishop, PharmD

Staff Present: Kathy Ketchum, RPh, MPA:HA; Megan Herink PharmD, BCPS; Richard Holsapple, RPh; Roger Citron, RPh; Ted Williams, PharmD; Shannon Jasper; Linnea Saris; Amanda Meeker, PharmD; Andrew Gibley, PharmD; Keri Crumby, OSU PharmD Candidate

Staff Present by Phone: Kathy Sentena, PharmD; Dr. Walter Shaffer, DMAP Medical Director; Sherri Willard-Argyres, PharmD

Audience: Stephanie Kendall (J&J), Larry Martinez (Janssen)*, Bill Stryk (J&J)*, Venus Holder (Lilly), Leslie Fox (J&J), Dr. McCale (Baxter), Barry Benson (BMS), John Howard (Mylan)*, Keri Crumby (OSU), Damian Frantz (Mylan), Mike Willett (Pfizer), Gary Comstock (Pfizer)*, Dean Haxby (OSU), Jeanna Colabianchi (Sunovion), Desiree Allen (AbbVie), Pat Wiseman (AstraZenica), Monica Kim (Otsuka), Tom Lukovich (Genoa Healthcare)*, Seth M. Adams (WVP Health Authority)

(*) Provided verbal testimony

I. CALL TO ORDER

- a. The meeting was called to order at approximately 1:00 pm. Introductions of Committee members and staff.
- b. Mr. Citron reported there are no new conflicts of interest to declare.
- c. Approval of agenda and minutes presented by Dr. Origer (pages 1 - 9)

ACTION: Approved as is.

- d. Department updates presented by Linnea Saris.
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II. DUR ACTIVITIES

- a. Quarterly Utilization Reports (pages 10 -14)
Presented by Mr. Citron.
 - b. ProDUR Report (pages 15 – 17)
Presented by Mr. Holsapple.
 - c. RetroDUR Report (pages 18 – 20)
Presented by Dr. Williams.
 - d. Oregon State Drug Reviews
Presented by Dr. Sentena.
 1. Update on New Therapies for Treating Major Depressive Disorder (MDD) (pages 21 – 22)
 2. New Hepatitis C Antiviral Therapies: How should they be used in clinical practice? (pages 23 – 24)
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III. DUR OLD BUSINESS

- a. Updated OHP Nutritional Supplement PA Criteria (pages 25 -29)
Dr. Herink presented the following updates:

Approve changes to PA criteria to align with OAR; requiring patients:

- Must have a nutritional deficiency **OR**
- A prolonged history of malnutrition and cachexia or reside in a LTC facility or chronic home care facility **AND**
- Have an increased metabolic need from severe trauma, malabsorption difficulties, or a diagnosis that requires additional calories and/or protein intake

Public Comment:

ACTION: Motion, 2nd, All in Favor. Approved.

IV. DUR NEW BUSINESS

- a. Pediatric SSRI High Dose Drug Use Evaluation (DUE) (pages 30 – 43)
Ms. Ketchum presented the following review:
 1. Initiate a maximum dose prior authorization for patients less than 25 years old starting SSRIs.
 2. Exclude child psychiatrists from the PA requirement.
 3. Consider age edit to restrict use of paroxetine and fluvoxamine to adults per expert opinion.
 4. Prior to implementation, educate prescribers via Oregon State Drug Review.

ACTION: Motion, 2nd, All in favor. Approved.

- b. ICS/LABA Policy Evaluation (pages 44 – 70)
Ms. Ketchum and Keri Crumby presented the following evaluation:

Implement a weekly review of patients encountering the combination inhaler PA and that meet certain criteria (a denied combination inhaler claim within 17 – 24 days). Send prescribers the Patient Safety Notice to ensure patients receive a controller, if indicated.

It was also recommended the policy be re-reviewed in one year to consider the utility of continuing.

ACTION: Motion, 2nd, All in favor. Approved.

V. PREFERRED DRUG LIST NEW BUSINESS

- a. Insomnia Class Update & New Drug Evaluations (pages 71 – 88)
Ms. Ketchum presented the following updates and evaluations:

1. Make tasimelteon non-preferred in the newer insomnia drug class because there is insufficient evidence for insomnia treatment outside the narrow FDA approved indication and require a PA for a funded OHP diagnosis.
2. Evaluate in executive session.
3. Make suvorexant non-preferred when available.

***ACTION:** After executive session. All in favor.

- b. Hormone Replacement Abbreviated Class Update (pages 89 – 164)
Dr. Willard-Argyres presented the following class update:

1. Make conjugated estrogens / bazedoxifene non-preferred and limit use to women who are:
 - a. Postmenopausal and are within 10 years of menopause
 - b. Are <60 years of age
 - c. Have an intact uterus
 - d. Failed or contraindicated to
 - I. Conventional hormone therapy (for prevention of vasomotor symptoms) OR
 - II. Bisphosphonates (for prevention of osteoporosis)
2. Review in executive session.
3. Add estrogen and methylestosterone product to class and make non-preferred.

Public Testimony: Gary Comstock from Pfizer.

***ACTION:** After executive session. All in favor.

- c. Anaphylaxis Rescue Abbreviated Class Review (pages 165 – 172)
Dr. Liang presented the following class review:

1. Add “anaphylaxis rescue” as a drug class to the PDL under the Allergy/ Cold
2. Review in executive session.
3. Include epinephrine auto-injector as preferred

4. Make all auto injector products preferred .

Public Testimony: John Howard from Mylan Inc.

***ACTION:** After executive session. All in favor.

- d. Long Acting Antipsychotic Injectables Abbreviated Class Review (pages 173 -178)
Dr. Meeker presented the following class review:
 1. Include agents on the voluntary PDL.
 2. Review in executive session.
 3. Make injectable risperidone preferred on the voluntary mental health PDL

Public Comment: Larry Martinez from Janssen Pharmaceuticals.
Tom Lukovich from Genoa Health Care.

***ACTION:** After executive session. All in favor.

- e. Prenatal Vitamins Abbreviated Review (pages 179 – 184)
Dr. Herink presented the following review:
 1. Include class on the PDL .
 2. Review in executive session.
 3. Make all legend formulations preferred

***ACTION:** After executive session. All in favor.

- f. Drug Class Scans
 1. Newer Antiemetics (pages 185 – 226)
Dr. Herink presented the following scan:
 - a. No further research or review needed at this time.
 - b. Review in executive session.
 - c. No changes to the PDL.

***ACTION:** After executive session. All in favor.

2. Skeletal Muscle Relaxants (pages 227 – 239)
Dr. Herink presented the following scan:
 - a. No further research or review needed at this time.
 - b. Review in executive session.
 - c. No changes to the PDL.

***ACTION:** After executive session. All in favor.

3. NSAIDS (pages 240 – 259)
Dr. Herink presented the following scan:
 - a. No further research or review needed at this time.
 - b. Review in executive session.

- c. Make Diclofenac sodium / Misoprostol and naproxen/ esomeprazole non-preferred.

***ACTION:** After executive session. All in favor.

- 4. Anti-anginal Drugs (pages 260 – 264)
Dr. Gibler presented the following scan:
 - a. No further research or review needed at this time.
 - b. Review in executive session.
 - c. No changes to the PDL.

***ACTION:** After executive session. All in favor.

- 5. Diuretics (pages 265 – 272)
Dr. Gibler presented the following scan:
 - a. No further research or review needed at this time.
 - b. Remove bendroflumethiazide from the PDL due to market unavailability and limited data versus other thiazide diuretics.
 - c. Review in executive session.
 - d. No other changes to the PDL.

***ACTION:** After executive session. All in favor.

VI. EXECUTIVE SESSION

VII. RECONVENE for PUBLIC RECOMMENDATIONS

VII. ADJOURN