Drug Use Research & Management Program
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Oregon Drug Use Review / Pharmacy & Therapeutics Committee
Thursday, November 30, 2017, 1:00-5:00 PM
Human Services Building
Salem, OR 97301

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: Tracy Klein, PhD, FNP; Caryn Mickelson, PharmD; Cathy Zehrung, RPh; Stacy Ramirez, PharmD; Kelley Burnett, DO; Phil Levin, PhD; William Origer, MD; James Slater, PharmD; Rich Clark, MD, MPH; Walter Hardin, DO, MBA

Members Present by Phone:

Staff Present: Richard Holsapple, RPh; Roger Citron, RPh; Dee Weston; Sarah Servid, PharmD; Lindsay Newton; Dave Engen, PharmD, CGP; Kathy Sentena, PharmD; Kim Wentz, MD; Julia Verhulst, PharmD; Deanna Moretz, PharmD

Staff Present by Phone: Dean Haxby, PharmD

Audience: *Margaret Olmon, AbbVie; Jeana Colabianchi, Sunovion; *Mary Kemhus, Novartis; Jennifer Shidler, Genzyme; Lisa Boyle, WVP Health; Bobbi Jo Drum, BMS; Karen Jackson, Trividia; Russ Rahmidah, PTC Therapeutics; Tera Gardol, PTC Therapeutics; Jeremy Guard, Alexion; Bill McDougall; Braden Purke; Chris Johnson, Spark; Diann Matthews, Merz; Nicolas Nguyen, Sunovion; Bill Francis; Rick Frees, Vertex; Joe Schreck, Allergan; Mike Donabedia, Sarepta; *Niren Shah, PTC Therapeutics; *Stan Cohan, Providence Hospital; *Lynda Finch, BioGen; Todd Hudson, PTC Therapeutics; *Kelley Maynard, Little Hercules; *Paul Cosgrove; Maiceya Gonzalez, Salud Pharmacy; Gregg Gittus, Alkermes; Tim McFerron, Alkermes; *Christine Curry, Genetech; David Barhoum, Genetech; Darren Coffman, HERC; Holly Bourgeois, OSU; *Meganne Leach, OHSU; Patrick Moty, Horizon Pharma; Joe Glassmire, Portola; *Andrea Dumont, Portola; Amy Burns, AllCare Health;

(*) Provided verbal testimony

Written testimony provided: Kyle Pinion, MSAA; PTC Therapeutics

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 July minutes presented by Mr. Citron. (pages 5-9)

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

II. DUR ACTIVITIES

A. Quarterly Utilization Reports – Mr. Citron presented the Quarterly Utilization report.
B. ProDUR Report – Mr. Holsapple presented the ProDUR report.
C. RetroDUR Report – Dr. Engen presented the RetroDUR report
D. RetroDUR Project Proposals - Dr. Engen presented the proposals.
E. Oregon State Drug Reviews
    1. Recently published reviews
        i. Tramadol and Codeine Use in Pediatrics
        ii. Oral Anticoagulation Update
    2. Future Topic Recommendations

Dr. Sentena presented two recently published newsletters, thanked the Committee for reviewing the draft versions and solicited ideas for future newsletters.

F. Provider Education Opportunities
    1. Proton Pump Inhibitors

Dr. Sentena presented a draft of the Proton Pump Inhibitor provider education proposal.

III. P&T Operating Procedures Update

A. Operating Procedures Update-Presented by Mr. Citron and Dr. Servid
    1. Consent Agenda
    2. New Drug Policy
    3. Biosimilar Policy
    4. Public Comment
    5. Discussion of Recommendations to OHA

The Committee approved the specific items regarding consent agenda, biosimilar policy and the new drug policy after amending the proposed PA criteria to a $5,000 per claim or per month threshold instead of $10,000 and to require FDA approved dosing.

ACTION: Motion to approve, 2nd. Majority in favor, one opposed. Approved.

The proposed changes to the operating procedures and evidence grading methods was deferred for future study and a P&T subcommittee was requested to be convened to meet and bring edits back to January meeting.

IV. DUR OLD BUSINESS

A. Drugs for Duchenne Muscular Dystrophy (pages 45 - 46)
Dr. Servid presented the proposal of updating the PA criteria to:

1. Require that the requested treatment is funded by the OHP for that condition.

ACTION: Amend PA criteria to include link to the HERC prioritized list. Motion to approve, 2nd. All in favor. Approved.

B. Antiemetics (pages 47-49)
Dr. Sentena presented the proposal to update the PA criteria to:

1. Eliminate quantity limits for all drugs in the class except for dronabinol.

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

C. Low-Dose Quetiapine (pages 50-54)
Dr. Servid presented the proposal to modify the safety edit to:

1. Apply to only patients with a daily dose of 50 mg or less.

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

V. DUR NEW BUSINESS

A. Pediatric Antipsychotic Drug Use Evaluation (pages 55 - 85)
Dr. Servid presented the drug use evaluation and recommendation to:

1. Develop a RetroDUR program that provides new start patients access to care coordination and referral for expert consultation.

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

VI. PREFERRED DRUG LIST NEW BUSINESS

A. Bevyxxa (betrixaban) New Drug Evaluation (pages 86-93)
Dr. Sentena presented the new drug evaluation, with the recommendation to:

1. Maintain betrixaban as a non-preferred drug in the anticoagulant PDL class
2. Subject betrixaban to the non-preferred drug prior authorization (PA) criteria.

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

B. Multiple Sclerosis Class Update (pages 94-129)
Dr. Moretz presented the class update, with the recommendation to:

1. Apply clinical prior authorization (PA) criteria to ocrelizumab for both physician administered and point of sale pharmacy claims and limit use to:
   - Funded MS conditions
   - History of inadequate response to at least 2 disease modifying agents (DMA) approved for MS; and
   - Prescribed by a neurologist.
2. Create clinical PA criteria for natalizumab separate from the biologic PA criteria.
3. Amend PA criteria for oral multiple sclerosis drugs to remove requirement of failure of a trial of interferon beta 1a or interferon 1b, and glatiramer.
4. Consider referring ocrelizumab for PPMS to the Health Evidence Review Commission (HERC) for prioritization consideration.

ACTION: Amend PA criteria for ocrelizumab to add a question verifying Hepatitis B status. Amend PA criteria for oral multiple sclerosis drugs to change the approval duration to 6 months. Amend PA criteria for natalizumab to require screening for tuberculosis only for Crohn's disease and not for multiple sclerosis. Refer ocrelizumab, when prescribed for primary progressive MS, to the Health Evidence Review Commission (HERC) for prioritization consideration Motion to approve, 2nd. All in favor. Approved.

C. Antidepressant DERP Summary Review (pages 130-155)
Dr. Verhulst presented the summary review and recommendation:

1. Due to clinical concerns with the Initial Pediatric SSRI Antidepressant-Daily Dose Limit PA that has not yet been implemented, evaluate for potential intervention (possibly education, retro-DUR, or case management focused) to be brought back to the committee and implemented instead of a PA.

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

VII. EXECUTIVE SESSION

VIII. RECONVENE FOR PUBLIC RECOMMENDATIONS * After executive session

A. Multiple Sclerosis Class Update (pages 94 - 129)
*__ACTION:__ No changes to the PMPDP
Motion, 2nd, All in Favor. Approved.

B. Antidepressant DERP Summary Review (pages 130 - 155)
*__ACTION:__ No changes to the PMPDP.
Motion, 2nd, All in Favor. Approved.

VIIII. ADJOURN