

Kentucky Department for Medicaid Services

Drug Review Options

The following chart lists the agenda items scheduled and the options submitted for review at the November 16, 2006 meeting of the Pharmacy and Therapeutics Advisory Committee.

Item	Options for Consideration
Exubera – single agent review	<ol style="list-style-type: none"> 1. The P & T Advisory Committee reviewed the insulin class on March 16, 2006. Injectable agents in the insulin class were considered clinically equivalent in safety and efficacy. The committee recommended that review of Exubera be tabled until future meeting. 2. P & T to review Exubera based upon safety and efficacy of the agent compared to the insulin class. 3. Place PA on Exubera so that clinical criteria may be applied. 4. Implement an age edit to approve use <i>only</i> in patients over 18 years old. 5. DMS to select agent as preferred based on economic evaluation. 6. For any new chemical entity, dosage form or route of delivery in the insulin class, require a PA until reviewed by the P&T Advisory Committee.
ACE Inhibitor/Ca⁺⁺ Channel Blocker Combos Re-review	<ol style="list-style-type: none"> 1. All agents in the ACE inhibitor/Calcium Channel Blocker combination class are equivalent in efficacy and safety. 2. DMS to select agent(s) based on economic evaluation. 3. Agents not selected as preferred based on economic evaluation will require PA. 4. For any new chemical entity or product in the ACE inhibitor/Calcium Channel Blocker combination class, require a PA until reviewed by the P&T Advisory Committee.
Hepatitis C Agents : Pegylated Interferons Re-review	<ol style="list-style-type: none"> 1. Continue 16 week duration of therapy limit and require genotype and qualitative HCV RNA serum assay for continuation treatment. 2. Patients with EVR (2 log decrease in viral load at 12 weeks) will be approved for continuation treatment for an additional 32 weeks for viral genotype 1 or 4 for a total of 48 weeks. 3. An EVR is not required for genotype 2 or 3, but will receive a total of 24 weeks of therapy based on documentation of genotype. 4. DMS to select agent(s) based on economic evaluation. 5. Agents not selected as preferred based on economic evaluation will require PA. 6. For any new chemical entity in the Hepatitis C medication class, require a PA and quantity limit until reviewed by the P & T Advisory Committee.
Bronchodilators - Short Acting Beta Agonists Re-review	<ol style="list-style-type: none"> 1. Short Acting Beta Agonists, with the exception of metaproterenol, are equivalent in efficacy and safety when administered at comparable doses. 2. DMS to select agent(s) based on economic evaluation. 3. Agents not selected as preferred based on economic evaluation will require PA. 4. Inadequate therapeutic response on preferred agents required before approval of nonpreferred agent(s). 5. For any new chemical entity in the Short Acting Beta Agonist Bronchodilator class, require a PA until reviewed by the P&T Advisory Committee.

<p>Long Acting Narcotics - Morphine Sulfates Re-review</p>	<ol style="list-style-type: none"> 1. Long Acting Morphine Sulfates are equivalent in efficacy and safety. 2. DMS to select at least 1 branded agent as preferred based on economic evaluation. 3. Agents not selected as preferred based on economic evaluation will require PA. 4. Inadequate therapeutic response to preferred agents required before approval of nonpreferred agent(s). 5. Continue current quantity limits. 6. For any new chemical entity, dosage form or route of administration require a PA until reviewed by the P&T Advisory Committee.
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The following terms will be utilized within the therapeutic monograph to classify medications during Drug Class Reviews. By using these terms, the reviewer will be able to easily identify any clinical differences between the medications within the class being reviewed.

Superior - Following evidence-based review, it is determined that the drug provides a therapeutic advantage, in terms of safety and/or efficacy, over other available products within the same treatment modality.

Equivalent - Following evidence-based review, it is determined that the drug is therapeutically equivalent in both safety and efficacy to other available products within the same treatment modality.

Not Essential - Following evidence-based review, it is determined that the drug has no therapeutic advantage, due to either reduced safety or efficacy, over other available products within the same treatment modality.