Beneficiary Advisory Panel Handout Uniform formulary Decisions 20 March 2014

Purpose: The purpose of this handout is to provide the BAP members with a reference document for the clinical effective presentation for each Uniform Formulary (UF) decision.

Long Acting Beta Agonist (LABA)/Inhaled Corticosteroid Inhalers

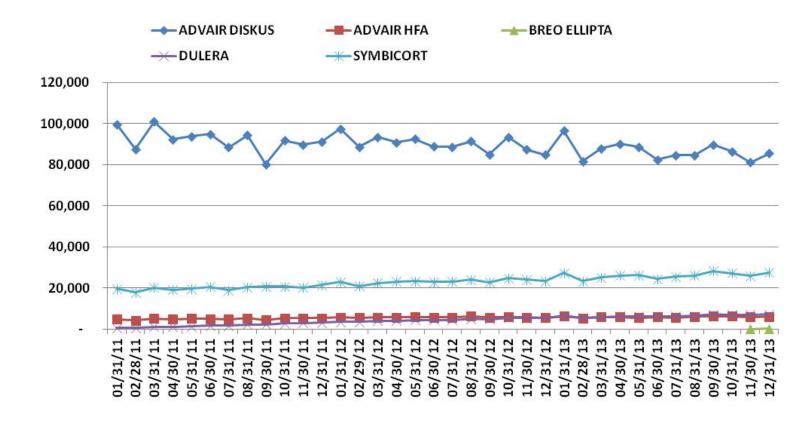
Formulary: Advair Diskus, Advair HFA

Non-Formulary: Dulera, Symbicort, Breo Ellipta

• Number of affected beneficiaries: 43,435

Recommended Implementation Period: 60 days

Figure 1: LABA/steroid Combo Utilization in 30 day Equivalents at All Point of Service



Pancreatic Enzyme Products (PEPs)

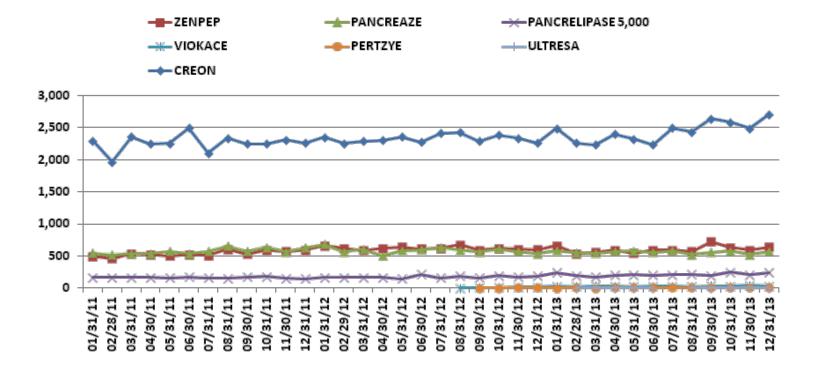
Formulary: Creon, Zenpep, Pancreaze;

Non-Formulary: Viokace, Ultresa, Pertzye

Number of affected beneficiaries: 65

Recommended Implementation Period: 90 days

Figure 2: PEP Utilization in 30 day Equivalents at All Point of Service



GI-1 Class – Aminosalicylate Subclass

Formulary: Apriso, Delzicol, Lialda; and Sulfasalazine, Olsalazine, Balsalazide generic;

Non-Formulary: Asacol HD, Pentasa, and Giazo

Number of affected beneficiaries: 5603

Recommended Implementation Period: 90 days

Figure 3: GI-1 Class – Aminosalicylate Subclass Utilization in 30 day Equivalents at All Point of Service

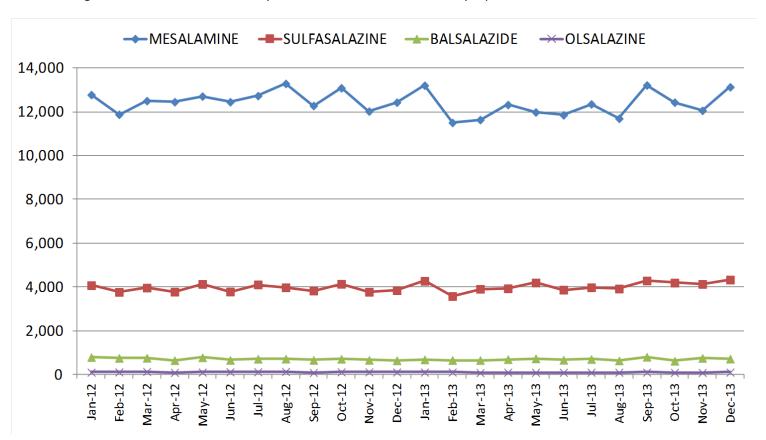


Figure 4: GI-1 Class – Mesalamine Utilization in 30 day Equivalents at All Point of Service

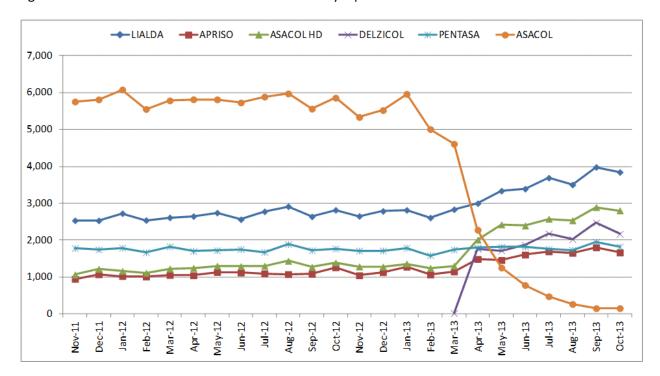


Table 1: Feb Meeting Statistics

		Total		aries by Po	oint of	Implementation Plan: 1st	
Drug Class	Non Formulary Medication	Beneficiaries Affected	MTF	Retail	Mail Order	Wed X days after decision date	Step Therapy
Long Acting Beta Agonist (LABA)/Inhaled Corticosteroid Inhalers	Dulera, Symbicort, Breo Ellipta	43,435	11,377	19,201	12,857	90	Must try Advair
Pancreatic Enzyme Products (PEPs)	Viokace, Ultresa, Pertzye	65	2	47	14	90	None
GI-1 Class – Aminosalicylate Subclass	Asacol HD, Pentasa, and Giazo	5,603	1,722	3,035	849	90	None
Antidepressant 1	ForFiv0 Khedezla Fetzima Brintellix	32 30 8 13	0 0 0	23 28 8 11	9 2 0 2	90	Generic bupropion Generic venlafaxine Group B Antidepressant Drug* Group B Antidepressant Drug*
PDE-5	None - Stendra step therapy	80	0	69	11	30	Must try sildenifil (Viagra)

^{*}Group B drugs (depression) – Duloxetine, SSRIs, SNRIs (except milnacipran), TCAs, mirtazapine, bupropion, SARIs, MAOIs