Report Breport

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An Official Accompaniment to the Alberta Drug Benefit List (ADBL) produced by Alberta Blue Cross

The Expert Committee on Drug Evaluation and Therapeutics (ECDET)

EXPERT COMMITTEE MEMBERS:

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ADMINISTRATIVE AND SCIENTIFIC SUPPORT:

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Brief Summary of Drug Review Activities

The Expert Committee on Drug Evaluation and Therapeutics met on May 17, 2021. The Committee reviewed Manufacturer submissions for twenty-five (25) Drug Products for potential listing, or change in listing, on the *ADBL*.

In addition to Drug Products reviewed by the Expert Committee, thirty-three (33) Drug Products underwent Expedited Review for listing on the *ADBL* effective June 1, 2021, and twenty-one (21) Drug Products underwent Expedited Review for listing on the *ADBL* effective July 1, 2021.

The following are <u>highlights</u> of recent changes to the *ADBL* and other topics of general interest. A complete list of changes, as well as the full *ADBL* may be accessed at

https://www.ab.bluecross.ca/dbl/publications.php

Highlights of Products Originally Reviewed via the Common Drug Review (CDR)

The following Drug Product was reviewed by CDR and the Expert Committee and added to the *ADBL* effective July 1, 2021:

• **OLUMIANT* 2 mg tablet** (baricitinib) (LIL) via Special Authorization (SA)

Highlights of Interchangeable (IC) Drug Products Added

Addition of the following Entry IC Drug Product to the *ADBL* has resulted in the creation of New IC Groupings, effective July 1, 2021:

• METHOTREXATE (PRESERVED) 25 mg/mL injection BP (methotrexate sodium) (AHI)

A complete list of changes, as well as the full ADBL may be accessed at <u>https://www.ab.bluecross.ca/dbl/publications.php</u>. *Please refer to the current ADBL for explanations of coverage, including a listing of coverage criteria (where applicable).* ABC 81171 (07/2021)

Highlights of Biosimilar Drug Products Added

The following Biosimilar Drug Products were added to the *ADBL* effective July 1, 2021:

- INCLUNOX 40 mg/0.4 mL, 60 mg/0.6 mL, 80 mg/0.8 mL & 100 mg/1 mL injection syringes, & INCLUNOX HP 120 mg/0.8 mL & 150 mg/mL injection syringes (enoxaparin sodium) (SDZ)
- REDESCA 30 mg/0.3 mL, 40 mg/0.4 mL, 60 mg/0.6 mL, 80 mg/0.8 mL & 100 mg/mL injection syringes, 300 mg/3 mL injection vial, & REDESCA HP 120 mg/0.8 mL & 150 mg/mL injection syringes (enoxaparin sodium) (VLP)

Change of Listing Status

The benefit listing status of the following Drug Products have been changed from Regular Benefits to Restricted Benefits effective July 1, 2021:

 LOVENOX* 30 mg/0.3 mL, 40 mg/0.4 mL, 60 mg/0.6 mL, 80 mg/0.8 mL, 100 mg/mL & 120 mg/0.8 mL injection syringes & 100 mg/mL vial & LOVENOX HP 150 mg/mL injection syringe (enoxaparin sodium) (SAV) via Restricted Benefit