

## Oregon Prescription Drug Affordability Board

350 Winter Street NE, Salem, OR 97309-0405 | 971-374-3724 | pdab@dcbs.oregon.gov | dfr.oregon.gov/pdab

# Agenda

## This is a regular meeting. *Date*: June 18, 2025 | *Time*: 9 a.m. This is a draft agenda and subject to change.

	Meeting name Meeting location Zoom link	Prescription Drug         Affordability Board         Virtual         Register for meeting	Board Members: Chai Chair Amy Burns; Dani Judge; Christopher Lar Dan Kennedy; Lauri Ho Staff: Ralph Magrish, e Cortnee Whitlock, sen Stephen Kooyman, pro Heather Doyle, data a Choo, research analys administrative special counsel	iel Hartung; Robert man; John Murray; bagland. executive director; ior policy analyst; bject manager, nalyst; Pei-Chen t; Melissa Stiles,
Purpose		Subject	Presenter	Estimated Time Allotted
Informational and vote	Call to order an	d roll call	Chair Shelley Bailey	2 minutes
Informational		ons of conflict of interest vith entities or individuals d activities	Chair Shelley Bailey	2 minutes
Discussion and vote	Board approva	l of 5/21/2025 minutes	Chair Shelley Bailey	2 minutes
Informational	Executive direc	tor's program update	Ralph Magrish	5 minutes
Informational	Legislative upda	ate	Jesse O'Brien	10 minutes
Informational	General public minutes	comment: limited to 3	Chair Shelley Bailey	10 minutes
Discussion and vote	updated data s	nd possible vote for ubset list of prescription lin products pursuant to 010	PDAB Staff	120 minutes
Break	The board will t a.m.	ake a break around 10:30	Chair Shelley Bailey	5 minutes
Informational	Announcement	S	Chair Shelley Bailey	2 minutes
Vote	Adjournment		Chair Shelley Bailey	2 minutes

#### Next meeting

July 16, 2025, at 9 a.m.

#### Accessibility

Anyone needing assistance due to a disability or language barrier can contact Melissa Stiles at least 48 hours ahead of the meeting at pdab@dcbs.oregon.gov or 971-374-3724. American sign language a will be available during the June 18 board meeting.

#### How to provide testimony to the board

The Prescription Drug Affordability Board invites people to provide testimony. **Oral:** To speak to the board during the public comment portion of the agenda, please submit the <u>PDAB public comment form</u> no later than 24 hours before the PDAB meeting. **Written:** to provide written comments to the board, please submit the <u>PDAB public comment form</u> with attachments no later than 48 hours before the PDAB meeting. The board reviews all written comments. All written comments are posted on the website.

#### **Open and closed sessions**

All board meetings except executive sessions are open to the public. Pursuant to ORS 192.660, executive sessions are closed to everyone but news media and staff. No action will be taken in the executive session.



#### Oregon Prescription Drug Affordability Board (PDAB) Regular Meeting Wednesday, May 21, 2025 Draft Minutes

Web link to the meeting video: <u>https://youtu.be/Nt6vmEmieZY</u> Web link to the meeting materials: <u>https://dfr.oregon.gov/pdab/Documents/20250521-PDAB-</u> <u>document-package.pdf</u>

**Call to order and roll call:** Chair Shelley Bailey called the meeting to order at 9:03 a.m. and roll was called.

**Board members present:** Chair Shelley Bailey, Vice Chair Amy Burns, Dan Hartung, Lauri Hoagland, Dan Kennedy, John Murray **Absent:** Robert Judge

The board provided Spanish interpretation and American Sign Language during the meeting.

**Declaration of conflict of interest and meetings with entities or individuals related to board activities:** John Murray provided a statement. View at video minute <u>00:01:18</u>.

**Approval of board minutes:** Chair Bailey asked for a motion and second to approve the board minutes as shown on <u>Pages 5-7</u> of the agenda materials. John Murray made a motion to approve the minutes and Dan Kennedy provided a second. View at video minute <u>00:04:15</u>.

#### MOTION to approve the April 16, 2025, minutes

Board Vote: Yes: Dan Hartung, Lauri Hoagland, Dan Kennedy, John Murray, Vice Chair Amy Burns, Chair Shelley Bailey No: None Absent: Robert Judge Abstain: Chris Laman Motion passed 6-0

**Executive director's program update:** Ralph Magrish, executive director, Oregon Prescription Drug Affordability Board & Drug Price Transparency Program, provided a program update. View the video at minute <u>00:05:13</u>.

**Legislative update**: Jesse O'Brien, Division of Financial Regulation (DFR) policy manager, provided an update on prescription drug-related bills proposed in the Oregon Legislative session as shown on <u>Pages 8-9</u> of the agenda materials. View the video at minute <u>00:10:18</u>.

**General Public comment:** Chair Bailey called on the people who signed up in advance to speak to the board: Tiffany Westrich-Robertson, AiArthritis & EACH & PIC Coalition; Brian Mayo,



Oregon State Pharmacy Association; Bil Schmidtknecht, Patient Protector; Derek Flowers, Value of Care Coalition; and Dharia McGrew, PhRMA. The board received seven written comments, which are posted on the <u>PDAB website</u>. View the speakers at video minute <u>00:15:00</u>.

**Board discussion on timeline, process, and voting methodology for affordability review determinations:** The board reviewed the roadmap, methodology and time frame for affordability reviews, which are included in the agenda materials on <u>Pages 10-16</u>. View the discussion at video minute <u>00:32:37</u>.

**Board review and vote on final generic drug report:** Cortnee Whitlock, senior policy analyst, led the board in a discussion about the generic drug final report. The board voted to approve the report. View the final report on Pages 17-40 of the agenda materials. View at video minute 01:06:24.

MOTION to approve the final generic drug report to send to the Oregon Legislature as discussed by the board today.

Motion made by John Murray with a second by Amy Burns.

#### **Board vote:**

Yes: Dan Hartung, Lauri Hoagland, Dan Kennedy, Chris Laman, John Murray, Vice Chair Amy Burns, Chair Shelley Bailey No: None Absent for the vote: Robert Judge

Motion passed 7-0

### Public comment period for the list of prescription drugs and insulin products

selected for affordability review per ORS 646A.694: View the public comment at video minute 01:15:56.

Name of speaker	Association to drug under review	Drug
Lindsay Silva	Mother/primary care giver to someone living with Cystic Fibrosis	Creon
Zach Lynkiewicz,	HIV+Hepatitis Policy Institute	Odefsey
Lucy Thornehaven	National Psoriasis Foundation	Humira
Mary Jo Strobel	American Partnership for Eosinophilic Disorders	Dupixent
Ranier Simons	Community Access National Network	Odefsey
Silas Martin	Johnson and Johnson Medicines	Tremfya and Xarelto

Chair Shelley Bailey called on people who signed up in advance to speak:



The chair read the list of 25 submitted letters the board received. The letters are posted to the **PDAB website**.

Name	Association to drug under review	Drug
Andrea Todd-Harlin	Sanofi	Dupixent
Gaby Gardiner	Basic Rights Oregon	Odefsey
Anne Murray	Bristol Myers Squibb	Eliquis
Kathleen Costello	Multiple Sclerosis Coalition	Ocrevus
Jane Leo	American Cancer Society, Cancer Action Network	Ibrance, Verzenio, and Perjeta
Kristie Banks	Gilead	Odefsey
Michael Valenta	Johnson & Johnson	Tremfya and Xarelto
Tim Layton	Genentech	Perjeta
Tim Layton	Genentech	Ocrevus
Seth Greiner	National Multiple Sclerosis Society	Ocrevus
Christian Omar Cruz	GSK	Trelegy
Stacie Phan	Boehringer Ingelhim	Jardiance
Cynthia Ransom	Eli Lilly	Emgality, Mounjaro, Taltz, Trulicity, Verzenio, Basaglar
Courtney Piron	Novartis	Cosentyx and Entresto
Albert Faro et al	Cystic Fibrosis Foundation	Creon
Dr. David Bernard Page	Providence Cancer Institute	Perjeta
Isabel Sheridan	Patient	Ibrance
Suzanna Masartis	Community Liver Alliance	Ozempic, Mounjaro, Rybelsus, Trulicity, Humira, Rinvoq
Linda Nelson	Oregon Coalition for Affordability Prescriptions	Trelegy
Mary Wachter	Genentech	Ocrevus, Perjeta
Ranier Simons	Community Access National Network	Odefsey
Scott Bertani	HealthHIV	Odefsey
Mary Jo Strobel,	American Partnership for Eosinophilic Disorders	Dupixent
Molly Guthrie	Susan G. Komen	Ibrance, Verzenio, Perjeta
Sarah Hoffman	Partnership to Advance Cardiovascular Health	Eliquis, Xarelto, Entresto

Announcements: Chair Bailey announced the next meeting will be June 18, 2025, at 9 a.m.

**Adjournment**: Chair Bailey adjourned the meeting at 11:30 a.m. with all board members in agreement. View at minute <u>02:04:17</u>.

Bill Number	Relating To	Bill Summary	Status
<u>HB 2057</u>	Relating to prescription drugs; prescribing an effective date.	Prohibits insurers offering policies or certificates of health insurance and pharmacy benefit managers from requiring that a claim for reimbursement of a prescription drug include a modifier or other indicator that the drug is a 340B drug.	Passed committee April 1, still not scheduled for floor vote
<u>HB 2149</u>	Relating to pharmacy services administrative organization licensing.	Requires pharmacy services administrative organizations operating in this state to be licensed by the Department of Consumer and Business Services and creates rules for licensing requirements.	Referred to House Rules
<u>HB 2385</u>	Relating to restrictions on 340B covered entities; prescribing an effective date.	Makes it an unlawful practice for drug manufacturers to interfere directly or indirectly with a pharmacy or drug outlet acquiring 340B drugs, delivering 340B drugs to certain health care providers or dispensing 340B drugs.	Passed; signed by Governor June 11
<u>HB 3212</u>	Relating to pharmacy benefits.	Creates additional rules and requirements for pharmacy benefit managers and a policy or certificate of health insurance or other contract providing for the reimbursement of the cost of a prescription drug.	Referred to House Rules
<u>HB 3226</u>	Relating to organizations that provide services related to obtaining prescription drugs; prescribing an effective date.	Includes pharmacy services administrative organizations within the definition of pharmacies for the purpose of ensuring that pharmacy benefit managers are subject to laws regulating their activities even if their contracts are with pharmacy services administrative organizations.	Passed; signed by Governor June 11

<u>SB 289</u>	Relating to prescription drugs.	Introduced bill: Requires the State Board of Pharmacy to study prescription drugs.	Passed; Governor signed May 27
		-1 amendment: Technical adjustments to laws governing PDAB including selection of drugs for affordability reviews and generic drug reporting.	
<u>SB 533</u>	Relating to restrictions on 340B covered entities.	Creates a civil penalty for drug manufacturers that interfere directly or indirectly with certain entities acquiring 340B drugs, delivering 340B drugs to certain health care providers or dispensing 340B drugs.	Passed committee April 3, still not scheduled for floor vote



# Drugs to be removed from subset list due to FDA orphan designation

Therapy class	Propriety name(s)	Non-proprietary name	Has orphan designation	Orphan date designation
Neuromuscular agent	<u>Botox</u>	Onabotulinumtoxina/ Botulinum Toxin	Yes	03/22/1984 08/20/1986 12/06/1991
Dermatologicals	<u>Dupixent</u>	Dupilumab	Yes	09/05/2017 08/21/2019
Analgesics– Anti- inflammatory	<u>Humira</u>	Humira/Humira Pen/ Humira (CF) Pen/Adalimumab	Yes	03/21/2005 10/19/2006 05/11/2011 05/13/2014 05/13/2015
Analgesics– Anti- inflammatory	<u>Rinvoq</u>	Upadacitinib	Yes	09/18/2015 09/20/2024



## Botox

Gene	eric Name:	Botulinum toxin type A
Trade	e Name:	Botox
Date	Designated:	03/22/1984
Orph	an Designation:	Treatment of strabismus and blepharospasms
Orph	an Designation Status:	Designated/Approved
		Allergan, Inc.
		2525 Dupont Drive P.O. Box 19534
Spor	isor:	Irvine, California 92713
		United States
		The sponsor address listed is the last reported by the sponsor to OOPD.
Marl	keting approved:	
1	Generic Name:	Botulinum toxin type A
	Trade Name:	Botox
	Marketing Approval Date:	12/29/1989
	Approved Labeled Indication	on: Treatment of strabismus associated with dystonia in adults (patients 12 years of age and above)
	Exclusivity End Date:	12/29/1996
	Exclusivity Protected Indic	ation* :
2	Generic Name:	Botulinum toxin type A
	Trade Name:	Botox
	Marketing Approval Date:	12/30/1989
	Approved Labeled Indication	on: Treatment of blepharospasm associated with dystonia in adults (patients 12 years of age and above)
	Exclusivity End Date:	12/30/1996
	Exclusivity Protected Indic	
Gene	eric Name:	botulinum toxin type A
	e Name:	Botox
	Designated:	12/06/1991
	an Designation:	Treatment of dynamic muscle contracture in pediatric cerebral palsy patients
-	an Designation Status:	Designated/Approved
orpi	an Designation Status.	Allergan, Inc.
		2525 Dupont Drive
Spor	isor:	T1-2A Irvine, California 92623
		United States
		The sponsor address listed is the last reported by the sponsor to OOPD.
Marl	keting approved:	
1	Generic Name:	botulinum toxin type A
	Trade Name:	Botox
	Marketing Approval Date:	06/20/2019
	Approved Labeled Indication	
	Exclusivity End Date:	06/20/2026
	Exclusivity Protected Indic	



## **Botox continued**

Generic Name:	Botulinum toxin type A
Trade Name:	Botox
Date Designated:	03/22/1984
Orphan Designation:	Treatment of strabismus and blepharospasms
Orphan Designation Status:	Designated/Approved
	Allergan, Inc.
	2525 Dupont Drive P.O. Box 19534
Sponsor:	Irvine, California 92713
	United States
	The sponsor address listed is the last reported by the sponsor to OOPD.
Marketing approved:	
1 Generic Name:	Botulinum toxin type A
Trade Name:	Botox
Marketing Approval Date	: 12/29/1989
Approved Labeled Indica	ation: Treatment of strabismus associated with dystonia in adults (patients 12 years of age and above)
Exclusivity End Date:	12/29/1996
Exclusivity Protected Ind	lication* :
2 Generic Name:	Botulinum toxin type A
Trade Name:	Botox
Marketing Approval Date	: 12/30/1989
Approved Labeled Indica	
Exclusivity End Date:	12/30/1996
Exclusivity Protected Ind	lication* :
Generic Name:	botulinum toxin type A
Trade Name:	Botox
Date Designated:	12/06/1991
Orphan Designation:	Treatment of dynamic muscle contracture in pediatric cerebral palsy patients
Orphan Designation Status:	Designated/Approved
	Allergan, Inc.
	2525 Dupont Drive
Sponsor:	T1-2A Irvine, California 92623
	United States
Marketing approved:	United States The sponsor address listed is the last reported by the sponsor to OOPD.
Marketing approved: 1 Generic Name:	
	The sponsor address listed is the last reported by the sponsor to OOPD.
1 Generic Name:	The sponsor address listed is the last reported by the sponsor to OOPD. botulinum toxin type A Botox
1 Generic Name: Trade Name:	The sponsor address listed is the last reported by the sponsor to OOPD. botulinum toxin type A Botox : 06/20/2019
1 Generic Name: Trade Name: Marketing Approval Date	The sponsor address listed is the last reported by the sponsor to OOPD. botulinum toxin type A Botox : 06/20/2019



## Dupixent

Gene	eric Name:	dupilumab
Trade	e Name:	Dupixent
Date	Designated:	09/05/2017
Orph	an Designation:	Treatment of eosinophilic esophagitis
Orph	-	Designated/Approved
		Regeneron Pharmaceuticals, Inc. 777 Old Saw Mill River Road
Spon		Tarrytown, New York 10591 United States
Mark	keting approved:	The sponsor address listed is the last reported by the sponsor to OOPD.
1	Generic Name:	dupilumab
	Trade Name:	Dupixent
	Marketing Approval Date:	05/20/2022
	Approved Labeled Indication	Treatment of adult and pediatric patients aged 12 years and older, weighing at least 40 kg, with eosinophilic esophagitis (EoE)
	Exclusivity End Date:	05/20/2029
	Exclusivity Protected Indicat	tion*: Treatment of adult and pediatric patients aged 12 years and older, weighing at least 40 kg, with eosinophilic esophagitis (EoE)
2	Generic Name:	dupilumab
	Trade Name:	Dupixent
	Marketing Approval Date:	01/25/2024
	Approved Labeled Indication	treatment of adult and pediatric patients aged 1 year and older, weighing at least 15 kg, with eosinophilic esophagitis (EoE)
	Exclusivity End Date:	01/25/2031
	Exclusivity Protected Indicat	tion*: treatment of pediatric patients aged 1 year and older weighing at least 15 kg who are less than 12 years of age or less than 40 kg in weight with eosinophilic esophagitis (EoE)
Gen	eric Name:	dupilumab
Det	- Decimented	08/21/2019
	e Designated:	
Orp	han Designation:	Treatment of bullous pemphigoid
Orp	han Designation Statu	s: Designated
FDA	Orphan Approval Sta	tus: Not FDA Approved for Orphan Indication
Spo	onsor:	Regeneron Pharmaceuticals, Inc. 777 Old Saw Mill River Road Tarrytown, New York 10591 United States
		The sponsor address listed is the last reported by the sponsor to OOPD.



## Humira

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Gene	ric Name:	adalimumab
Trade	e Name:	Humira
Date	Designated:	03/21/2005
Orpha	an Designation:	Treatment of juvenile rheumatoid arthritis
Orpha	an Designation Status:	Designated/Approved
Spon	sor:	AbbVie Inc. 1 North Waukegan Road Bidg. AP-30 North Chicago, Illinois 60064 United States
		The sponsor address listed is the last reported by the sponsor to OOPD.
Mark	ceting approved:	
1	Generic Name:	adalimumab
	Trade Name:	Humira
	Marketing Approval Date:	02/21/2008
	Approved Labeled Indication	Reducing signs and symptoms of moderately to severely active polyarticular juvenile idiopathic arthritis in patients 4 years of age and older.
	Exclusivity End Date:	02/21/2015
	Exclusivity Protected Indic	ation* :
2	Generic Name:	adalimumab
	Trade Name:	Humira
	Marketing Approval Date:	09/30/2014
	Approved Labeled Indication	Reducing signs and symptoms of moderately to severely active polyarticular juvenile idiopathic arthritis in patients 2 years of age and older.
	Exclusivity End Date:	09/30/2021
	Exclusivity Protected Indic	ation*: Treatment of polyarticular juvenile idiopathic arthritis in patients 2 to less than 4 years of age.
Gene	ric Name:	adalimumab

Gener	ic Name:	adalimumab
Trade	Name:	HUMIRA
Date D	Designated:	10/19/2006
Orpha	n Designation:	Treatment of pediatric Crohn's disease
Orpha		Designated/Approved AbbVie, Inc. I.N. Waukegan Road Bida AP30, Dept. PA77
Spons	ior:	North Chicago, Illinois 60064 Jnited States
		The sponsor address listed is the last reported by the sponsor to OOPD.
Marke	eting approved:	
1	Generic Name:	adalimumab
	Trade Name:	HUMIRA
	Marketing Approval Date:	09/23/2014
	Approved Labeled Indication	Reducing signs and symptoms and inducing and maintaining clinical remission in patients 6 years of age and older with moderately to severely active Crohn's disease who have had an inadequate response to corticosteroids or immunomodulators such as azathioprine, 6-mercaptopurine, or methotrexate.
	Exclusivity End Date:	09/23/2021
	Exclusivity Protected Indicat	Reducing signs and symptoms and inducing and maintaining clinical remission in patients 6 through 16 ion*: years of age with moderately to severely active Crohn's disease who have had an inadequate response to corticosteroids or immunomodulators such as azathioprine, 6-mercaptopurine, or methotrexate.



## Humira continued

Gene	ric Name:	adalimumab
		Humira
		05/11/2011
-	-	Treatment of pediatric patients with ulcerative colitis
Orpha	-	Designated/Approved
		AbbVie, Inc. 1 North Waukegan Rd
	I	Dept PA72; Bldg AP30-4
Spon		North Chicago, Illinois 60064 United States
		The sponsor address listed is the last reported by the sponsor to OOPD.
Mark	eting approved:	
1	Generic Name:	adalimumab
	Trade Name:	Humira
	Marketing Approval Date:	02/24/2021
	Approved Labeled Indication	<ul> <li>treatment of moderately to severely active ulcerative colitis in pediatric patients 5 years of age and older.</li> <li>Limitations of Use: The effectiveness of HUMIRA has not been established in patients who have lost response to or were intolerant to TNF blockers.</li> </ul>
	Exclusivity End Date:	02/24/2028
	Exclusivity Protected Indicat	treatment of moderately to severely active ulcerative colitis in pediatric patients 5 years of age and older. tion*: Limitations of Use: The effectiveness of HUMIRA has not been established in patients who have lost response to or were intolerant to TNF blockers.
Gene	ric Name:	adalimumab
		Humira
		05/13/2014
	•	Treatment of non-infectious intermediate, posterior, or panuveitis, or chronic non-infectious anterior uveitis
		Designated/Approved
	-	AbbVie, Inc.
	· · · · · · · · · · · · · · · · · · ·	1 North Waukegan Road
Spon		North Chicago, Illinois 60064 United States
	· · · · · · · · · · · · · · · · · · ·	
		The sponsor address listed is the last reported by the sponsor to OOPD.
Mark	eting approved:	
1	Generic Name:	adalimumab
	Trade Name:	Humira
	Marketing Approval Date:	06/30/2016
	Approved Labeled Indication	Indicated for the treatment of non-infectious intermediate, posterior and panuveitis in adult patients
	Exclusivity End Date:	06/30/2023
	Exclusivity Protected Indicat	ion*: Indicated for the treatment of non-infectious intermediate, posterior and panuveitis in adult patients
2	Generic Name:	adalimumab
	Trade Name:	Humira
	Marketing Approval Date:	09/28/2018
	Approved Labeled Indication	Treatment of non-infectious intermediate, posterior, and panuveitis in adults and pediatric patients 2 years of age and older
	Exclusivity End Date:	09/28/2025
	Exclusivity Protected Indicat	ion*: Treatment of non-infectious intermediate, posterior, and panuveitis in pediatric patients 2 years of age and older



## Humira continued

Generic Name: adalin		dalimumab	
Trade Name: HUMIF		IRA	
Date Designated: 05/13/		3/2015	
Orphan Designation: Treatm		ment of moderate to severe hidradenitis suppurativa (Hurley stage 2 and Hurley stage 3 disease)	
Orphan Designation Status: Design		nated/Approved	
		bbVie, Inc.	
	N	North Waukegan Road orth Chicago, Illinois 60064	
		nited States	
The st		he sponsor address listed is the last reported by the sponsor to OOPD.	
Mark	eting approved:		
1	Generic Name:	adalimumab	
	Trade Name:	HUMIRA	
	Marketing Approval Date:	09/09/2015	
	Approved Labeled Indication:	Treatment of moderate to severe hidradenitis suppurativa	
	Exclusivity End Date:	09/09/2022	
Exclusivity Protected Indication* :		n*: Treatment of moderate to severe hidradenitis suppurativa	
2 Generic Name:		adalimumab	
	Trade Name:	HUMIRA	
	Marketing Approval Date:	10/16/2018	
	Approved Labeled Indication:	Treatment of moderate to severe hidradenitis suppurativa in patients 12 years of age and older.	
	Exclusivity End Date:	10/16/2025	
	Exclusivity Protected Indication	n*: Treatment of moderate to severe hidradenitis suppurativa (HS) in adolescent patients 12 years of age and older	



## Rinvoq

		upadacitinib			
Trade Name:		Rinvoq			
U U		09/18/2015			
		Ireatment of pediatric (ag systemic JIA	nent of pediatric (aged 0 through 16 years) juvenile idiopathic arthritis (JIA) ILAR categories excluding nic JIA		
Orphan Designation Status:		Designated/Approved			
		AbbVie, Inc. 1 North Waukegan Road			
Sponsor: N		North Chicago, Illinois 600 United States	h Chicago, Illinois 60064		
		The sponsor address listed is the last reported by the sponsor to OOPD.			
Marketing approved:					
1	Generic Name:	upadacitinib			
	Trade Name:	Rinvoq			
	Marketing Approval Date:	04/26/2024	to Queens of any and alder with active polyopticular investigation of the arthritis who have		
	Approved Labeled Indication	had an inadequate the treatment of pe	tts 2 years of age and older with active polyarticular juvenile idiopathic arthritis who have response or intolerance to one or more tumor necrosis factor (TNF) blockers, and for adiatric patients 2 years of age and older with active psoriatic arthritis who have had an use or intolerance to one or more TNF blockers		
	Exclusivity End Date:	04/26/2031			
	Exclusivity Protected Indic	ation*: who have had an i blockers, and for t	atric patients 2 years of age and older with active polyarticular juvenile idiopathic arthritis nadequate response or intolerance to one or more tumor necrosis factor (TNF) he treatment of pediatric patients 2 years of age and older with active psoriatic arthritis nadequate response or intolerance to one or more TNF blockers		
Generic Name:		upada	upadacitinib		
Trade Name:		Rinvo	Rinvoq		
Date Designated:		09/20/	09/20/2024		
Orphan Designation: tr		treatm	ent of giant cell arteritis		
Abl		itus: Desigi	nated/Approved		
			AbbVie Inc.		
			h Waukegan Road		
			Chicago, Illinois 60064		
oponion.		United	United States		
		The spo	onsor address listed is the last reported by the sponsor to OOPD.		
Mar	koting approved				
Marketing approved:					
1	Generic Name:		upadacitinib		
	Trade Name:		Rinvoq		
	Marketing Appro	val Date:	04/28/2025		
Approved Labeled Ind		ed Indication:	treatment of adults with giant cell arteritis		
	Exclusivity End I		TBD		
	Exclusivity Enul	Date.			



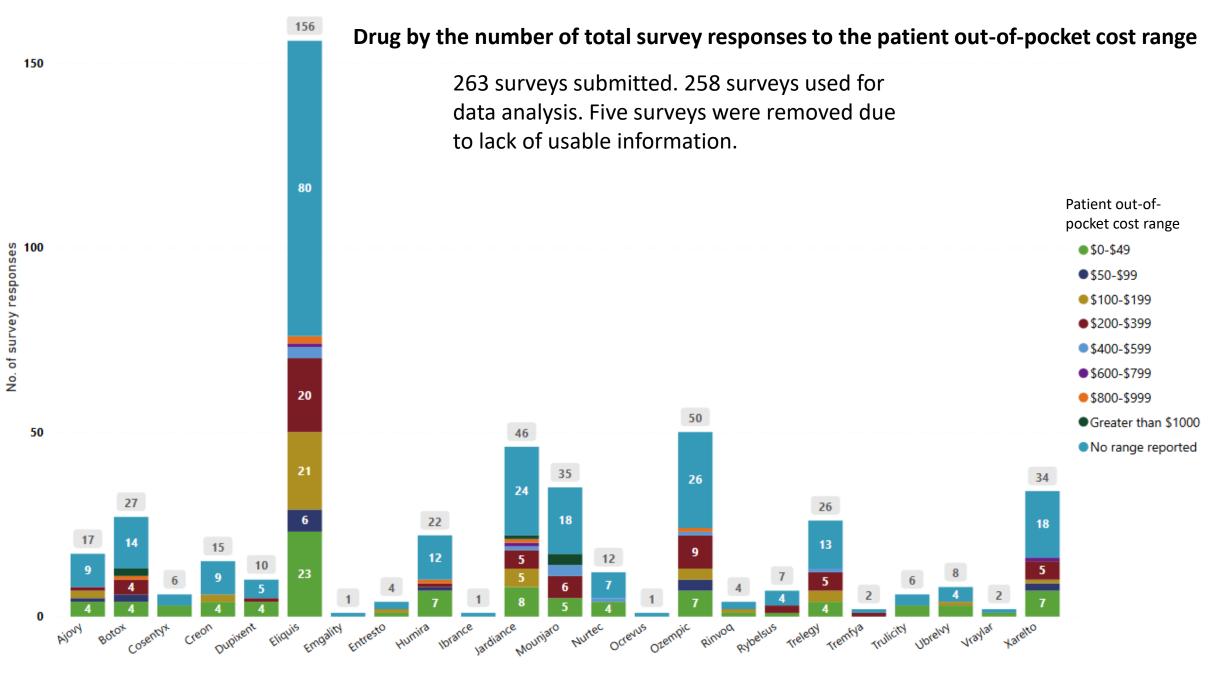
Oregon Prescription Drug Affordability Board



# Oregon Prescription Drug Affordability board meeting

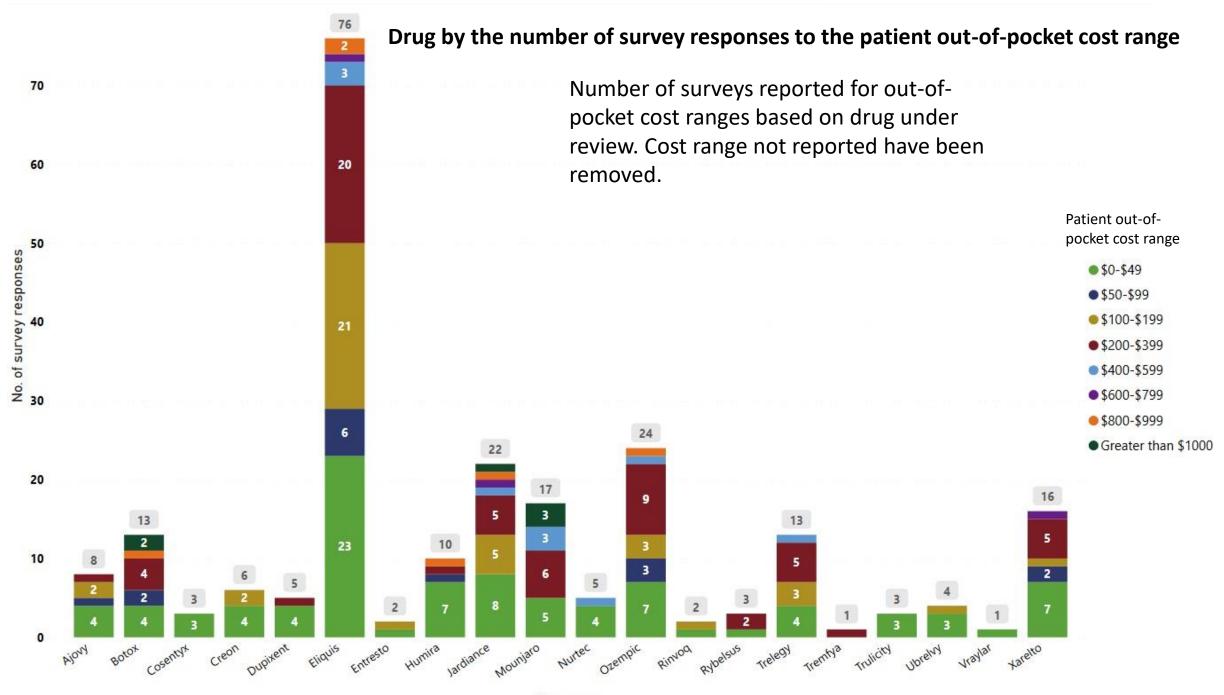
Survey results Cortnee Whitlock, senior policy analyst

June 18, 2025



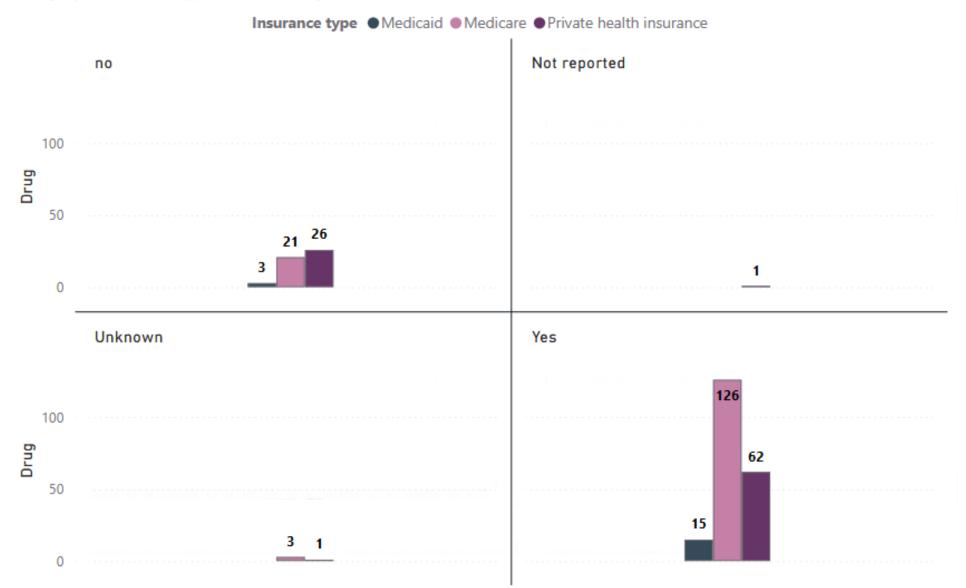
Drug name

Dru



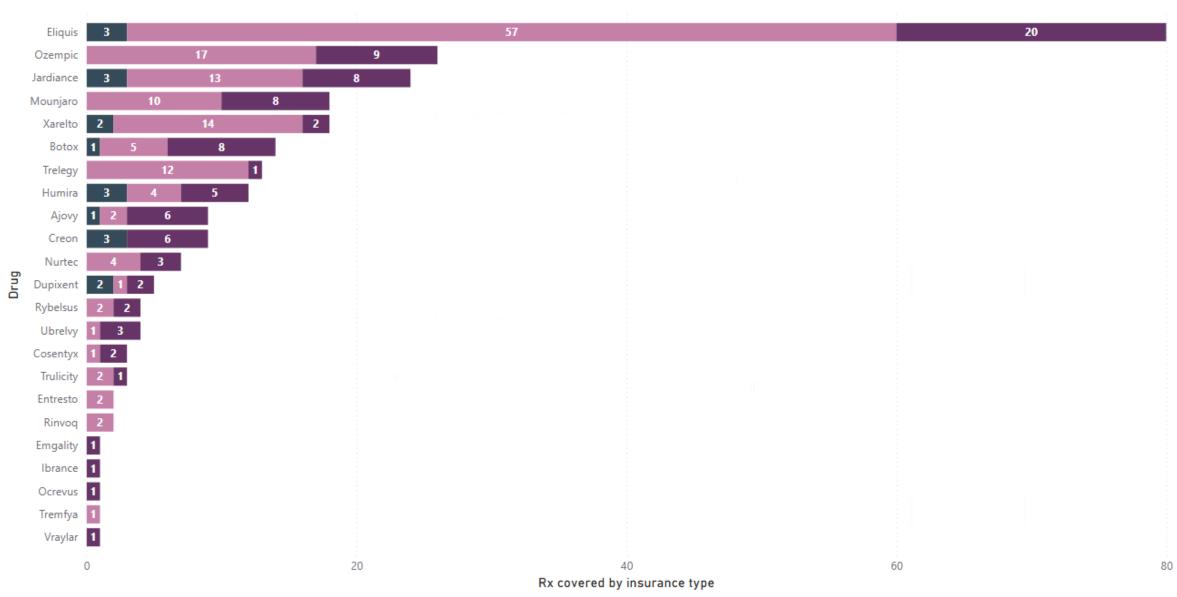
Drug name

## Drug by Insurance type and coverage under insurance



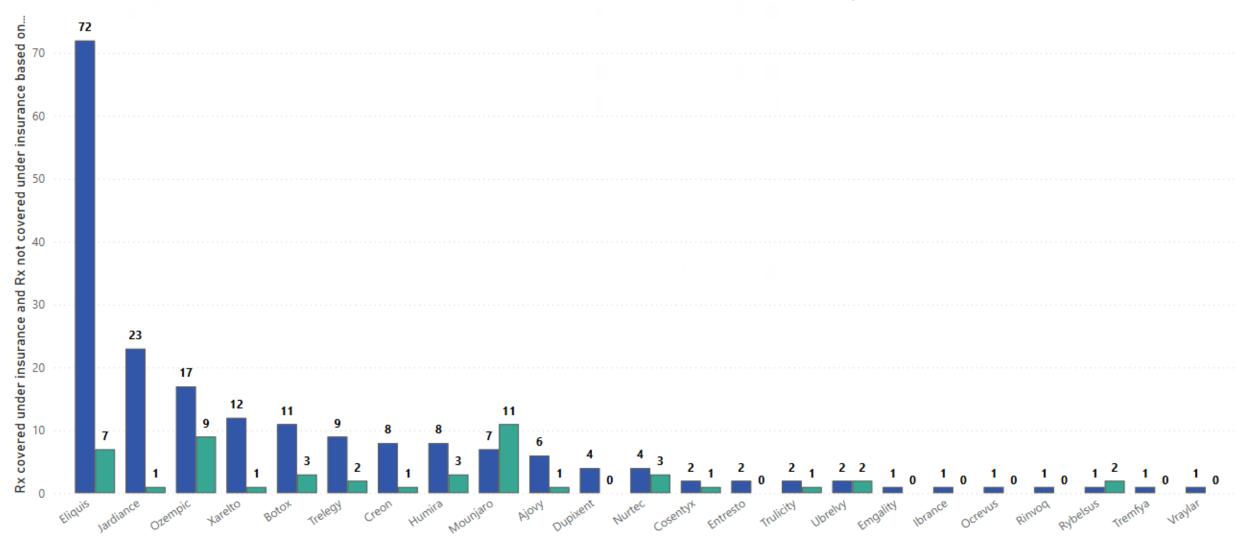
#### Rx covered by insurance type by Drug and Insurance

Insurance • Medicaid • Medicare • Private health insurance



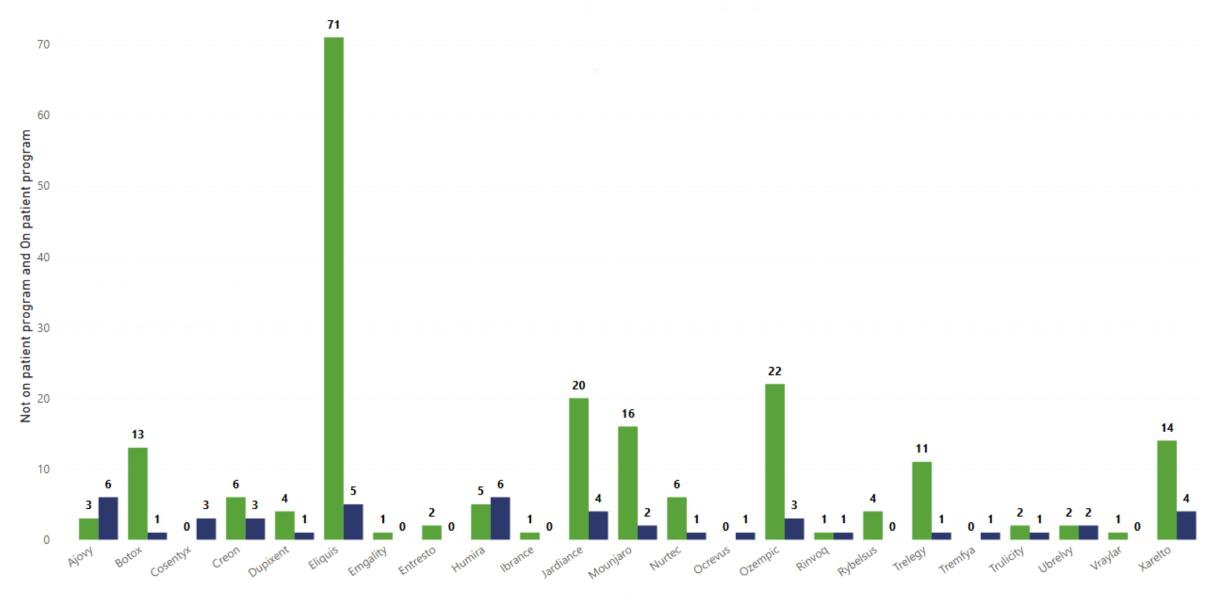
#### Rx covered under insurance and Rx not covered under insurance based on No. of responses by Drug

• Rx covered under insurance • Rx not covered under insurance based on No. of responses



Drug

#### Not on patient program and On patient program by Drug



#### Not on patient program On patient program



## Data Dashboard Web Links

**Agenda item**: Board review and possible vote for updated data subset list of prescription drugs and insulin products pursuant to OAR 925-200-0010

Click on the **Prescription Drug Affordability Board data web page** to access the data dashboard. Here are direct links to the dashboards:

- Oregon PDAB Subset List Dashboard
- Oregon PDAB Data Dashboard

Dashboard location on the PDAB website: https://dfr.oregon.gov/pdab/Pages/data.aspx