

RE-ADDING EXPAREL TO FORMULARY

The Pharmacist Perspective

This case study represents the individual experience of one health system and is intended to demonstrate its experience navigating formulary and operationalization of EXPAREL. Each health system's experience may vary based on, but not limited to, population, location, reimbursement structure, and surgery types.

Pacira BioSciences, Inc. recognizes that there are alternative methodologies for identifying appropriate indications, patient populations, management approaches, and data tracking, and approaches vary by health system.

INDICATION

EXPAREL® (bupivacaine liposome injectable suspension) is indicated to produce postsurgical local analgesia via infiltration in patients aged 6 years and older and regional analgesia in adults via an interscalene brachial plexus nerve block, sciatic nerve block in the popliteal fossa, and an adductor canal block. Safety and efficacy have not been established in other nerve blocks.

IMPORTANT SAFETY INFORMATION

- EXPAREL is contraindicated in obstetrical paracervical block anesthesia

Please see full Important Safety Information on page 4.
Full Prescribing Information is available at www.EXPARELpro.com

EXPAREL®
BUPIVACAINE LIPOSOME INJECTABLE SUSPENSION

A FOCUSED APPROACH TO ADDING EXPAREL ONTO FORMULARY

System Overview

Small, physician-owned surgical center, operating as a hospital outpatient department (HOPD), that had removed EXPAREL from its formulary for approximately 5 years based on cost concerns

Strategic Goal

Leverage separate Medicare reimbursement for EXPAREL (NOPAIN Act) to create an opportunity for adding EXPAREL back onto formulary in order to reduce opioid use in the community surrounding the health system

Approach

1

Established positive rapport with cross-functional partners

The Director of Pharmacy engaged physicians and surgeons who had experience with EXPAREL at other facilities to understand their perspectives and kickstart the conversation

2

Engaged leadership

Key members of system leadership—including the medical executive team—were educated on the potential benefits of EXPAREL prior to presenting the full plan to the Pharmacy & Therapeutics committee

3

Started with few indications to monitor closely

EXPAREL usage was initially granted to only two indications, interscalene and adductor canal blocks, based upon high usage in orthopedic procedures, and provided on a case-by-case basis requiring the anesthesiologists to prove that the patient use case met preidentified criteria to gain approval

4

Ensured appropriate implementation

Surgeons and anesthesiologists were trained to ensure that EXPAREL was tracked and charted appropriately (in milligrams), and office managers were engaged to ensure that the J-code was used for billing

5

Regularly analyzed cost benefits and clinical outcomes

Leadership met quarterly to review the economic benefits and clinical outcomes, including postoperative pain scores and opioid use compared with patients not receiving EXPAREL

NOPAIN = Non-Opioids Prevent Addiction in the Nation.

IMPORTANT SAFETY INFORMATION (cont'd)

- Adverse reactions reported in adults with an incidence greater than or equal to 10% following EXPAREL administration via infiltration were nausea, constipation, and vomiting; adverse reactions reported in adults with an incidence greater than or equal to 10% following EXPAREL administration via nerve block were nausea, pyrexia, headache, and constipation

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FOCUSING ON SMALL, CLEAR STEPS LEADS TO SIGNIFICANT RESULTS

Key Considerations

Start small with clear criteria

Establishing the benefit in select indications can help gain a controlled assessment of the potential for EXPAREL

Collect and assess data

Using health system data and patient feedback is critical to determining success and guiding future decisions

Have a vision

Mapping out the proposed plan and the potential impact can help gain buy-in from colleagues and leadership

Leverage manufacturer support

Maintaining a strong relationship with the Pacira representative helped connect the system with medical science liaisons and nurse educators

Results



By adding EXPAREL back onto formulary with clear controls and a controlled population, the system was able to see reductions in spending compared with its original experience 5 years prior



The Director of Pharmacy and their team were able to elevate the standard of care for the health system while reducing opioid use and providing greater overall patient satisfaction



The success of the initial rollout has allowed the facility to expand the use of EXPAREL to more indications while maintaining control and minimizing the financial impact



The Director of Pharmacy was able to establish strong lines of communication between clinicians and pharmacy to support future collaborations in advancing patient care

For more information on how to establish or expand access to EXPAREL at your health system, contact your Pacira representative or visit [EXPARELpro.com/connect](https://www.EXPARELpro.com/connect)

IMPORTANT SAFETY INFORMATION (cont'd)

- Adverse reactions with an incidence greater than or equal to 10% following EXPAREL administration via infiltration in pediatric patients six to less than 17 years of age were nausea, vomiting, constipation, hypotension, anemia, muscle twitching, vision blurred, pruritus, and tachycardia

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EXPAREL IMPORTANT SAFETY INFORMATION

INDICATION

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IMPORTANT SAFETY INFORMATION

- EXPAREL is contraindicated in obstetrical paracervical block anesthesia
- Adverse reactions reported in adults with an incidence greater than or equal to 10% following EXPAREL administration via infiltration were nausea, constipation, and vomiting; adverse reactions reported in adults with an incidence greater than or equal to 10% following EXPAREL administration via nerve block were nausea, pyrexia, headache, and constipation
- Adverse reactions with an incidence greater than or equal to 10% following EXPAREL administration via infiltration in pediatric patients six to less than 17 years of age were nausea, vomiting, constipation, hypotension, anemia, muscle twitching, vision blurred, pruritus, and tachycardia
- Do not admix lidocaine or other non-bupivacaine local anesthetics with EXPAREL. EXPAREL may be administered at least 20 minutes or more following local administration of lidocaine
- EXPAREL is not recommended to be used in the following patient populations: patients <6 years old for infiltration, patients younger than 18 years old for nerve blocks, and/or pregnant patients
- Because amide-type local anesthetics, such as bupivacaine, are metabolized by the liver, EXPAREL should be used cautiously in patients with hepatic disease

WARNINGS AND PRECAUTIONS SPECIFIC TO EXPAREL

- Avoid additional use of local anesthetics within 96 hours following administration of EXPAREL
- EXPAREL is not recommended for the following types or routes of administration: epidural, intrathecal, regional nerve blocks **other than interscalene brachial plexus nerve block, sciatic nerve block in the popliteal fossa, and adductor canal block**, or intravascular or intra-articular use
- The potential sensory and/or motor loss with EXPAREL is temporary and varies in degree and duration depending on the site of injection and dosage administered and may last for up to 5 days, as seen in clinical trials

WARNINGS AND PRECAUTIONS FOR BUPIVACAINE-CONTAINING PRODUCTS

- **Central Nervous System (CNS) Reactions:** There have been reports of adverse neurologic reactions with the use of local anesthetics. These include persistent anesthesia and paresthesia. CNS reactions are characterized by excitation and/or depression
- **Cardiovascular System Reactions:** Toxic blood concentrations depress cardiac conductivity and excitability, which may lead to dysrhythmias, sometimes leading to death
- **Allergic Reactions:** Allergic-type reactions (eg, anaphylaxis and angioedema) are rare and may occur as a result of hypersensitivity to the local anesthetic or to other formulation ingredients
- **Chondrolysis:** There have been reports of chondrolysis (mostly in the shoulder joint) following intra-articular infusion of local anesthetics, which is an unapproved use
- **Methemoglobinemia:** Cases of methemoglobinemia have been reported with local anesthetic use

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For more information, please visit www.EXPARELpro.com or call 1-855-793-9727.