

**Drug Utilization Review Board Meeting
Agenda, Open Session October 20, 2021
10:00 a.m. – 2:00 p.m.**

Meeting Location*

*Due to COVID-19, this meeting will be held virtually. Please use the information below to join the meeting:

Public/Participant Line: Dial: (312) 626-6799, Meeting ID: 868 8919 3873

Zoom Meeting: <https://us02web.zoom.us/j/86889193873>, Passcode: 338845

Members of the public are required to complete a conflict-of-interest form if they intend to provide public comments to the Board. To assist the operator in coordinating public comment, completed forms are due 1 week prior to the meeting (October 13, 2021). Please email the completed form to Annette.Grant@ks.gov.

Board Members

Moneeshindra Mittal, MD
James Backes, PharmD
Jennifer Clair, MD
Gregory Burger, PharmD, CPPS, FASHP, EMT

Michele Reisinger, DNP, APRN, FNP-BC
Arthur Snow, MD
Kristen Powell, PharmD

KDHE-DHCF Staff

Annette Grant, RPh
Victor Nguyen, PharmD

Carol Arace, Administrative Specialist

Gainwell Technologies/KEPRO Staff

Karen Kluczykowski, RPh
Kathy Kaesewurm, RN, BSN

Christina Faulkner, PharmD, BCPS
Harry Vu, PharmD

MCO Staff

Mark DeMary, PharmD, **Aetna Better Health of Kansas**
Angie Yoo, PharmD, **Sunflower State Health Plan**
Kelly Flannigan, PharmD, **UnitedHealthcare Community Plan**

I. CALL TO ORDER

A. Announcements

This meeting will be operator-assisted. An opportunity for public comment was given at the top of the agenda.

II. OLD BUSINESS

A. Review and Approval of July 21, 2021 Meeting Minutes

III. NEW BUSINESS

A. Revised Prior Authorization (PA) Criteria

1. Ankylosing Spondylitis Agents

This revision includes the addition of Taltz® to the list of agents requiring prior authorization.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

2. Crohn's Disease Agents

This revision includes the addition of Avsola™, clarifications regarding dosing limitations, and allowance for alternative dosing based on therapeutic drug monitoring.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

3. Ulcerative Colitis Agents

This revision includes review of all agents, including indications and dosing. In addition, a warning for JAK inhibitors is noted. Also included is an addition to the criteria allowing for dose modifications based on therapeutic drug monitoring.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

4. Migraine Prophylaxis Agents

This revision includes the addition of Qulipta® and corrects dosing frequency for Vyepiti®.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

5. Synagis®

This revision adds language to allow for expanded coverage based on the Centers for Disease Control and Prevention (CDC) reports on respiratory syncytial virus (RSV) activity in the state.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

6. **Multiple Sclerosis**

This revision includes the addition of Ponvory™ and clarification regarding the applicability of the PDL PA statement due to Zeposia’s lateral approval for ulcerative colitis (UC).

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

7. **Non-Preferred PDL PA Criteria**

The Non-Preferred PDL PA criteria were last updated in July 2019. This revision includes the addition of a list of PDL drug classes no longer requiring annual PDL PA renewal.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

8. **Oncology Agents**

This revision includes the addition of several drugs to the list of agents requiring prior authorization.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

9. **Oncology - Auxiliary Treatment Agents**

This revision includes the addition of several drugs to the list of agents requiring prior authorization.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

10. **Enzyme Replacement Therapy**

This revision includes the migration of Elaprase® and adjustments to the criteria.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

11. **Minimum Requirements Prior Authorization**

This revision includes the migration of Hetlioz®, Hetlioz LQ™, Nplate® and Promacta® to the list of agents requiring prior authorization.

- i. Revised PA Criteria
- ii. *Public Comment
- iii. Board Discussion

B. New Prior Authorization (PA) Criteria

1. **Aduhelm™ (aducanumab-avwa) injection**

Aduhelm is a monoclonal antibody for the treatment of Alzheimer’s disease in patients with mild cognitive impairment or mild dementia. The prior authorization criteria are being proposed to ensure appropriate use based upon the FDA-approved labeling information and clinical guidelines.

- i. Prior Authorization Criteria
- ii. *Public Comment
- iii. Board Discussion

C. Miscellaneous Items

1. Blanket Statements

At the July and October meetings in 2019, the DUR Board approved blanket changes to existing criteria with regards PDL criteria, new/other indications, and billing code type. A summary of changes to specific criteria will be presented.

- i. Presentation
- ii. Board Discussion

2. Fee-for-Service Annual Program Assessment

The annual program assessment for the Medicaid fee-for-service population will be presented to show drug trends over the past state fiscal year.

- i. Presentation
- ii. Board Discussion

3. Managed Care Annual Program Assessment

Aetna Better Health of Kansas, Sunflower State Health Plan, and UnitedHealthcare Community Plan will present reports detailing utilization trends and provider education efforts for 2020.

- i. Aetna Individual Report – Mark DeMary, PharmD
- ii. Sunflower Individual Report – Angie Yoo, PharmD
- iii. UnitedHealthcare Individual Report – Kelly Flannigan, PharmD
- iv. *Public Comment
- v. Board Discussion

IV. ADJOURN

The next DUR Board meeting is scheduled for January 19, 2022.

*Public comment is limited to five minutes per product; additional time will be allowed at the DUR Board's discretion. Informal comments will be accepted from members of the audience at various points in the agenda.

****THIS AGENDA IS SUBJECT TO CHANGE****