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Janet Stanek, Acting Secretary

Laura Kelly, Governor

Drug Utilization Review Board Meeting
Agenda, Open Session January 19, 2022
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:
Computer Audio Enabled Zoom Meeting: https://us02web.zoom.us/j/83394124132
Required Passcode: 431619 Audio Dial in: (312) 626-6799 Meeting ID: 833 9412 4132
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 (January 12, 2022). Please email the completed form to Annette.Grant@ks.gov.

Board Members

Moneeshindra Mittal, MD (Chair)
James Backes, PharmD
Gregory Burger, PharmD, CPPS, FASHP, EMT
Daryl J. Callahan, D.O., M.S.S.
Jennifer Clair, MD
Kristen Powell, PharmD
Michele Reisinger, DNP, APRN, FNP-BC
Arthur Snow, MD

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 October 20, 2021 Meeting Minutes

III. NEW BUSINESS

A. Revised Prior Authorization (PA) Criteria

1. **Adult Rheumatoid Arthritis Agents**
   This revision includes the addition of Avsola®, Ruxience®, and Truxima® to the list of agents requiring prior authorization. This revision also includes additional criteria for the use of JAK inhibitors.
   i. Revised PA Criteria
   ii. *Public Comment
   iii. Board Discussion

2. **Asthma Agents**
   This revision includes an update to the indicated age groups and dosing information for Dupixent® and the addition of Tezspire™ to the list of agents requiring prior authorization.
   i. Revised PA Criteria
   ii. *Public Comment
   iii. Board Discussion

3. **Atopic Dermatitis Agents**
   This revision includes the addition of Opzelura™ and Adbry™ to the list of agents requiring prior authorization and updates to initial and renewal criteria.
   i. Revised PA Criteria
   ii. *Public Comment
   iii. Board Discussion

4. **Enzyme Replacement Agents**
   This revision includes the migration of Lumizyme® and Nexviazyme® to the list of agents requiring prior authorization.
   i. Revised PA Criteria
   ii. *Public Comment
   iii. Board Discussion

5. **Hepatitis C Agents**
   This revision includes updates to the indicated age groups and dosing information and the addition of new formulations of Epclusa® and Mavyret®.
   i. Revised PA Criteria
   ii. *Public Comment
   iii. Board Discussion

6. **Oncology Agents**
   This revision includes the addition and/or removal of several drugs to the list of agents requiring prior authorization.
   i. Revised PA Criteria
   ii. *Public Comment
   iii. Board Discussion

7. **Oncology - Auxiliary Treatment Agents**
   This revision includes the addition and/or removal of several drugs to the list of agents requiring prior authorization.
   i. Revised PA Criteria
   ii. *Public Comment
   iii. Board Discussion

8. **Opioid Products Indicated for Pain Management**
   This revision includes the addition of Seglentis® 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. **Systemic Lupus Erythematosus Agents**
   This revision consolidates the existing criteria for Benlysta© and new criteria for Saphnelo™.
   i. Prior Authorization Criteria
   ii. *Public Comment
   iii. Board Discussion

C. Tentative Agenda Items (MHMAC and PDL Meeting Agenda Items)

1. **MHMAC Meeting (January 18, 2022)**

   a. ADHD Medications – Safe Use for All Ages
   -Clarification of PDMP requirements.
   i. Prior Authorization Criteria
   ii. *Public Comment
   iii. Board Discussion

   b. Antipsychotic Medications – Safe Use for All Ages
   -Revisit the diagnosis requirement. Revisit management of current drugs with new indications.
   i. Prior Authorization Criteria
   ii. *Public Comment
   iii. Board Discussion

2. **PDL Meeting (January 18, 2022) New PDL Classes**

   a. Dry Eye Disease: Cequa™, Restasis®, Tyrvaya™, Xiidra™
   i. Public Comment
   ii. Board Discussion

   b. Immunomodulation Agents- Atopic Dermatitis: Adbry™, Dupixent®
   i. Public Comment
   ii. Board Discussion

IV. ADJOURN

The next DUR Board meeting is scheduled for April 20, 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****