

**Drug Utilization Review Board
Meeting Minutes, Open Session
April 20, 2022 10:00am – 2:00pm**

<p>Drug Utilization Review Board Due to COVID-19, this meeting was held virtually.</p>	<p>Board Members: Moneeshindra Mittal, MD, Chair James Backes, PharmD, Interim Chair Gregory Burger, PharmD, CPPS, FASHP, EMT Daryl Callahan, DO, MSS Jennifer Clair, MD (Absent) Kristen Powell, PharmD Michele Reisinger, DNP, APRN, FNP-BC (Absent) Arthur Snow, MD</p> <p>KDHE-DHCF/Contractor Staff: Annette Grant, RPh Victor Nguyen, PharmD Carol Arace, Administrative Specialist</p> <p>MCO Staff: Mark DeMary, PharmD, Aetna Better Health of Kansas Aaron Dold, PharmD, Sunflower State Health Plan Sunny Bounyalath, PharmD, UnitedHealthcare Community Plan</p> <p>Gainwell Technology Staff: Debra Bruchko, LPN (Absent) Christina Faulkner, PharmD, BCPS Kathy Kaesewurm, RN, BSN Karen Kluczykowski, RPh (Absent) Harry Vu, PharmD</p>	<p>Public attendees: Melissa Basil, Erin Hohman, Abbvie; Mark Kaiser, Terry McCurren, Otsuka; Marc Parker; Chris Stanfield, Supernus; Tia Nguyen, Donna Osterlund, Sanofi; Brad Leiser, Chrissy Welsh, Craig Bloom, Don McCaffrey, Jim Baumann, Pfizer; JJ Roth, Jordan Feuerborn, Merck; Karen Floeder, Keith Gulley, Kevin Hinthorne, Lee Ward, Nishil Patel, Amgen; Porscha Showers, Rob Kilo, Ryan Reza, NAMI-Kansas; Sarah Sanders, Shelby Go</p> <p>[Non-identified participants are not listed.]</p>
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TOPIC	DISCUSSION	DECISION
<p>I. Call to Order A. Announcements</p>	<p>Call to Order: Dr. Mittal called the meeting to order at 10:02am.</p> <p>Announcements: None.</p> <p>Introductions: None.</p>	

TOPIC	DISCUSSION	DECISION
<p>II. Old Business</p> <p>A. Review and Approval of the January 19, 2022 Meeting Minutes</p>	<p>Board Discussion: None.</p>	<p>Dr. Snow motioned to approve. Dr. Powell seconded this motion. Dr. Mittal abstained due to absence at that meeting.</p> <p>Motion to approve was carried unanimously.</p>
<p>III. New Business</p> <p>A. New Prior Authorization (PA) Criteria</p> <p>1. High Cost Compound PA</p>	<p>Background: This PA will be used to increase oversight of APIs used in compounded products.</p> <p>Public comment: None.</p> <p>Board Discussion: The Board inquired about current Medicaid coverage of compounds, weight and dosing limits, clarification on compendium support, the number of beneficiaries affected, how providers and beneficiaries will be notified, and if there is a grandfathering process.</p> <p>The State informed the Board that there is currently broad allowance for compounds. Because the current focus was on topical compounds, weight and dosing limits will be kept in mind for future review. The Board suggested combining the 2nd and 4th bullet points to address the issue on compendium support. The State noted that a managed care organization reported that a 20% denial rate would have an annual impact of \$125,000 in unnecessary spending, but a much higher denial rate for inappropriate compounds has been seen in other markets. The State informed the Board that a provider bulletin will be sent to providers (including pharmacies) to notify them of the PA and that the Medicaid member manual informs patients that medication coverage may change over time and reminded the Board of the grandfathering process.</p>	<p>Dr. Burger motioned to approve, as amended. Dr. Snow seconded this motion.</p> <p>Motion to approve as amended was carried unanimously.</p>
<p>B. Revised PA Criteria</p> <p>1. Ankylosing Spondylitis Agents</p>	<p>Background: This revision includes the addition of Xeljanz®/Xeljanz® XR to the list of agents requiring prior authorization and provides updates to the table of conventional oral agents.</p> <p>Public comment: Nishil Patel (Amgen) yielded his time back to the Board with the offer to answer any questions they may have about Enbrel® or Avsola®. Jim Baumann (Pfizer) yielded his time back to the Board with the offer to answer any questions they may have about Xeljanz®/Xeljanz® XR.</p> <p>Board Discussion: None.</p>	<p>Dr. Powell motioned to approve. Dr. Backes seconded this motion.</p> <p>Motion to approve was carried unanimously.</p>

TOPIC	DISCUSSION	DECISION
<p>2. Atopic Dermatitis Agents</p>	<p>Background: This revision includes the addition of Cibinqo™ and Rinvoq® to the list of agents requiring prior authorization and updates to initial and renewal criteria.</p> <p>Public comment: Jim Baumann (Pfizer) spoke on behalf of Cibinqo™ and recommended that the criteria be changed to require an adequate trial of a conventional agent or a biologic agent instead of requiring an adequate trial of both. Erin Hohman (Abbvie) spoke on behalf of Rinvoq® and agreed with the recommendation of Mr. Baumann and gave clinical information regarding wording in medication guide and inclusion criteria in clinical trials.</p> <p>Board Discussion: The Board asked the State for response to public comment and inquired about what conventional and biologic agents are offered to patients. The State reviewed previous discussions about the FDA’s press releases on the JAK inhibitors and also pointed out the FDA’s Multi-Discipline Review for Cibinqo™ where it was stated that “...abrocitinib should be used as 3rd line therapy after subjects...have failed or are intolerant to systemic treatment”. The State also clarified that current step therapy requires patients to have an adequate trial with only one conventional agent and only one biologic agent or have a contraindication to all.</p>	<p>Dr. Powell motioned to approve as written. Dr. Callahan seconded this motion.</p> <p>Motion to approve as written was carried unanimously.</p>
<p>3. Hypercholesterolemia Agents</p>	<p>Background: This revision includes updates to the age groups and dosing information for Repatha®, updates to dosing information for Praluent® and the addition of Leqvio® to the list of agents requiring prior authorization.</p> <p>Public comment: None.</p> <p>Board Discussion: The State requested to table this agenda item.</p>	<p>Dr. Burger motioned to table. Dr. Powell seconded this motion.</p> <p>Motion to table was carried unanimously.</p>
<p>4. Minimum Requirements Prior Authorization</p>	<p>Background: This revision includes updates to several agents and the removal of Onfi®.</p> <p>Public comment: None.</p> <p>Board Discussion: None.</p>	<p>Dr. Backes motioned to approve. Dr. Callahan seconded this motion.</p> <p>Motion to approve was carried unanimously.</p>

TOPIC	DISCUSSION	DECISION
<p>5. Psoriatic Arthritis Agents</p>	<p>Background: This revision includes an update to the indicated age groups and dosing information for Cosentyx® and adds Skyrizi® and Rinvoq® to the list of agents requiring prior authorization.</p> <p>Public comment: Nishil Patel (Amgen) expressed appreciation for the variety of agents offered and yielded his time back to the Board with the offer to answer any questions they may have about Otezla®, Enbrel®, or Avsola®. Erin Hohman (Abbvie) yielded her time back to the Board with the offer to answer any questions they may have about Skyrizi® or Rinvoq®.</p> <p>Board Discussion: None.</p>	<p>Dr. Powell motioned to approve. Dr. Snow seconded this motion.</p> <p>Motion to approve was carried unanimously.</p>
<p>C. Tentative Agenda Items (MHMAC and PDL Meeting Agenda Items)</p> <p>1. MHMAC Meeting (April 19, 2022)</p> <p>a. ADHD Medications – Safe Use for All Ages</p>	<p>Background: Revisit PDMP criteria and management of Qelbree®.</p> <p>Public comment: Ryan Reza (National Alliance on Mental Illness) yielded his time back to the Board.</p> <p>Board Discussion: The State recommended the removal of step-therapy for Qelbree® based on positive feedback from providers, including improvement in behaviors more than expected and with less side effects. The State hoped that providers will still consider the most cost-effective treatment options, where appropriate. Additionally, the State recommended removal of K-TRACS criteria as there is state policy in place for provider guidance.</p>	<p>Dr. Powell motioned to approve. Dr. Callahan seconded this motion.</p> <p>Motion to approve was carried unanimously.</p>
<p>b. Antipsychotic Medications – Safe Use for All Ages</p>	<p>Background: Revisit management of Caplyta®.</p> <p>Public comment: Ryan Reza (National Alliance on Mental Illness) yielded his time back to the Board.</p> <p>Board Discussion: The State reminded the Committee that step-therapy was initially added due to conflicting studies and a single indication for Schizophrenia. The State recommended the removal of step-therapy for Caplyta® due to the new indication for bipolar depression and better metabolic profile. The State hoped that providers will still consider the most cost-effective treatment options, where appropriate. The Board asked if there was any provider education or outreach regarding stewardship when trends are noticed. The State informed the Board that there have been efforts made by the managed care organizations and noted that further efforts will be considered for the future.</p>	<p>Dr. Snow motioned to approve. Dr. Powell seconded this motion.</p> <p>Motion to approve was carried unanimously.</p>

TOPIC	DISCUSSION	DECISION
<p>c. Benzodiazepine Medications – Safe Use for All Ages</p>	<p>Background: Revisit PDMP criteria and management of Loreev XR™.</p> <p>Public comment: Ryan Reza (National Alliance on Mental Illness) expressed his appreciation for the discussion by MHMAC and the Board and yielded his time back to the Board.</p> <p>Board Discussion: The State recommended adding a requirement for a compelling rationale from the provider regarding the need for the extended-release formulation as opposed to the immediate-release formulation. Additionally, the State recommended removal of K-TRACS monitoring criteria, as was previously discussed.</p> <p>The Board brought up concerns of concurrent use of opioids and benzodiazepines. The State pointed out on the Opioid PA where it is required for providers to attest that they have reviewed K-TRACS and have addressed concerns related to concurrent CNS depressant use. The State also noted that there is retrospective monitoring in place that reviews concurrent opioid and benzodiazepine use.</p>	<p>Dr. Burger motioned to approve. Dr. Snow seconded this motion.</p> <p>Motion to approve was carried unanimously.</p>
<p>III. Adjourn</p>	<p>The meeting adjourned at 11:25am.</p>	<p>Dr. Powell motioned to adjourn the meeting. Dr. Callahan seconded this motion.</p> <p>The motion was passed unanimously.</p>

The next DUR Board meeting is scheduled for July 20, 2022.

All approved PA criteria are posted to the KDHE website: <https://www.kdhe.ks.gov/206/General-Clinical-Prior-Authorization>