

**Drug Utilization Review Board
Meeting Minutes, Open Session
July 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 (<i>Absent</i>) James Backes, PharmD, Interim Chair (<i>Acting chair</i>) Gregory Burger, PharmD, CPPS, FASHP, EMT Daryl Callahan, D.O, MSS Jennifer Clair, MD Kristen Powell, PharmD Michele Reisinger, DNP, APRN, FNP-BC Arthur Snow, MD Cori Durall, PharmD</p> <p>KDHE-DHCF/Contractor Staff: Annette Grant, RPh Victor Nguyen, PharmD Sridevi Donepudi, MD Carol Arace, Administrative Specialist</p> <p>MCO Staff: Mark DeMary, PharmD, Aetna Better Health of Kansas Angie Yoo, PharmD, Sunflower State Health Plan Sunny Bounyalath, PharmD, UnitedHealthcare Community Plan</p> <p>Gainwell Technology Staff: Karen Kluczykowski, RPh (<i>Absent</i>) Kathy Kaesewurm, RN, BSN Christina Faulkner, PharmD, BCPS Harry Vu, PharmD</p>	<p>Public attendees: Camille Kerr, Carrie Johnson, Chris Dobberpuhl, Corinne Glock, Craig Bloom, Debbie Illions-Clark, Donna Osterlund, Erica Kearns, Erin Hohman, Grace Tam, Jeff Knappen, Jim Baumann, Jordon Wild, Keith Gulley, Kenneth Berry, Kurt Hendrickson, Lee Ward, Lisa Tracz, Marc Parker, Melissa Basil, Rob Hansen, Rob Kilo, Rusty Hailey, Sean Jones, Tia Nguyen, Tracey Maravilla</p> <p>[Non-identified participants are not listed.]</p>
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TOPIC	DISCUSSION	DECISION
<p>I. Call to Order A. <u>Introductions</u> B. <u>Announcements</u></p>	<p>Call to Order: Dr. Backes called the meeting to order at 10:09am and proceeded to take roll call for the board members.</p> <p>Introductions: Annette Grant introduced the new board member Cori Durall, PharmD & State Medicaid Medical Director Sridevi Donepudi, MD</p> <p>Announcements: None.</p>	

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<p>II. Old Business</p> <p>A. <u>Review and Approval of the April 20, 2022 Meeting Minutes</u></p>	<p>Board Discussion: The minutes from the April 20, 2022 Meeting was approved.</p>	<p>Dr. Snow moved to approve the minutes. Dr. Burger second the motion. Dr. Durall, Dr. Clair and Dr. Reisinger abstained due to their absence in the previous meeting.</p> <p>Motion to approve was carried unanimously.</p>
<p>III. New Business</p> <p>A. <u>Revised Prior Authorization (PA) Criteria</u></p> <p>1. Atopic Dermatitis (AD) Agents</p>	<p>Background: This revision includes updates to the dosing of Dupixent and to step therapy.</p> <p>Public comment: Tia Nguyen (Sanofi) spoke on Dupixent® and asked the Board to consider adding the indications of chronic rhino sinusitis with nasal polyps and eosinophilic esophagitis. Erin Hohman (Abbvie) yielded her time back to the Board with the offer to answer any questions they may have about Rinvoq®.</p> <p>Board Discussion: The State reminded the Board that other indications are addressed with the blanket statement on the criteria.</p>	<p>Dr. Burger moved to approve. Dr. Snow second the motion.</p> <p>Motion to approve was carried unanimously.</p>
<p>2. Chimeric Antigen Receptor T-Cell (CAR-T) Agents</p>	<p>Background: This revision adds Carvykti™ and provides updates to indications, dosing limits and/or diagnoses for Kymriah®, Tecartus®, Breyanzi® and Yescarta®.</p> <p>Public comment: Lee Ward (BMS) representing Breyanzi® yielded his time back to the Board.</p> <p>Board Discussion: None.</p>	<p>Dr. Snow moved to approve. Dr. Clair second the motion.</p> <p>Motion to approve was carried unanimously.</p>
<p>3. Crohn's Disease Agents</p>	<p>Background: This revision adds Skyrizi®, removes biosimilar agents that are not yet available on the market, and adds another reference for Therapeutic Drug Monitoring.</p> <p>Public comment: Erin Hohman (Abbvie) representing Skyrizi® yield her time back to the Board. Carrie Johnson (Amgen) representing Avsola® yielded her time back to the Board.</p>	<p>Dr. Powell moved to approve. Dr. Callahan second the motion.</p> <p>Motion to approve was carried unanimously.</p>

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	<p>Board Discussion: None</p>	
4. Ulcerative Colitis Agents	<p>Background: This revision adds Rinvoq®, removes biosimilar agents that are not yet available on the market, and adds another reference for Therapeutic Drug Monitoring.</p> <p>Public comment: Erin Hohman (Abbvie) representing Rinvoq® yielded her time back to the Board. Carrie Johnson (Amgen) representing Avsola® yielded her time back to the Board.</p> <p>Board Discussion: None</p>	<p>Dr. Snow moved to approve. Dr. Clair second the motion.</p> <p>Motion to approve was carried unanimously.</p>
5. Growth Hormone Agents (Somatropin Products)	<p>Background: This revision adds Skytrofa™, consolidates the initial and renewal criteria, and updates the criteria to the standard format.</p> <p>Public comment: Tracey Maravilla (Ascends Pharma) clarified that Skytrofa™ was a prodrug. She highlighted other additional clinical information on Skytrofa™.</p> <p>Board Discussion: None</p>	<p>Dr. Burger moved to approve. Dr. Powell second the motion.</p> <p>Motion to approve was carried unanimously.</p>
6. Minimum Requirements Prior Authorization	<p>Background: This revision adds Demser® capsules.</p> <p>Public comment: None</p> <p>Board Discussion: None</p>	<p>Dr. Clair moved to approve. Dr. Snow second the motion.</p> <p>Motion to approve was carried unanimously.</p>
7. Oncology - Auxiliary Agents	<p>Background: This revision adds Releuko®.</p> <p>Public comment: None</p> <p>Board Discussion: None</p>	<p>Dr. Clair moved to approve. Dr. Callahan second the motion.</p> <p>Motion to approve was carried unanimously.</p>

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8. High Cost Compounds	<p>Background: This revision clarifies the prior authorization criteria.</p> <p>Public comment: None</p> <p>Board Discussion: The Board pointed out a potential conflict in criteria related to the requirement for the compounded product being FDA-approved for the route of administration and the criteria related to disallowing cosmetic and other non-covered FDA-approved indications. This was resolved by listing the latter as an exclusion under the former.</p>	<p>Dr. Burger moved to approve as amended. Dr. Powell second the motion.</p> <p>Motion to approve as amended was carried unanimously.</p>
9. Opioid Use Discussion – Long-Term Care Setting	<p>Background: Discussion on opioid use for pain management in Long-Term Care settings.</p> <p>Public comment: None</p> <p>Board Discussion: Dr. Durall affirmed the concern for opioid use in Long-Term Care settings and the need for oversight. The State acknowledged and planned to bring data at a future meeting. Dr Backes suggested reviewing any best practices that are available.</p>	N/A
<p>B. <u>Tentative Agenda Items (MHMAC and PDL Meeting Agenda Items)</u></p> <p>1. MHMAC Meeting (July 19, 2022) – Revised PA Criteria a.) ADHD Medications – Safe Use for All Ages</p>	<p>Background: Addition of the adult dosage of Qelbree®.</p> <p>Public comment: None</p> <p>Board Discussion: None</p>	<p>Dr. Snow moved to approve. Dr. Callahan second the motion.</p> <p>Motion to approve was carried unanimously.</p>
<p>2. PDL Meeting (July 19, 2022) – New PDL Classes a.) Imiquimod: Aldara®, Zyclara®</p>	<p>Background: Addition of a new PDL class for the imiquimod products.</p> <p>Public comment: None</p> <p>Board Discussion: None</p>	<p>Dr. Powell moved to approve. Dr. Snow second the motion.</p> <p>Motion to approve was carried unanimously.</p>

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<p>b.) Prenatal Vitamins: Various Products</p>	<p>Background: Addition of a new PDL class for Prenatal vitamins with 45 products listed.</p> <p>Public comment: None</p> <p>Board Discussion: Dr. Clair asked about the differences between the products. The State noted that higher price leads to the inclusion of more and/or different vitamins and minerals. Dr. Backes asked if prenats were classified as prescription products. The State pointed out that some prenatal vitamins are available over-the-counter, but the majority were by prescription only.</p>	<p>Dr. Powell moved to approve. Dr. Burger second the motion.</p> <p>Motion to approve was carried unanimously.</p>
<p>c.) Thyroid Hormones: Levoxyl®, Synthroid®, Tirosint®, Unithroid®, Thyquidity™</p>	<p>Background: Addition of a new PDL class for thyroid hormones.</p> <p>Public comment: None</p> <p>Board Discussion: None</p>	<p>Dr. Callahan moved to approve. Dr. Snow second the motion.</p> <p>Motion to approve was carried unanimously.</p>
<p>C. <u>Miscellaneous Items</u> 1. Fee-for-Service Retrospective Drug Utilization Review Outcomes Report</p>	<p>Background: Outcomes data for the R-DUR interventions performed during SFY 2021 will be presented by Dr. Faulkner (KEPRO). Interventions include “Gabapentin and CNS Depressants” and “Asthma-related Issues”.</p> <p>Board Discussion: Dr. Backes solicited feedback from Board members who were prescribers regarding interventions by letters. Dr. Faulkner noted that a “web application” was being worked on. Dr. Callahan commented that Blue Cross had found a reduction in emergency room visits in a similar asthma intervention. He asked if asthma treatment regimens were cross-referenced with emergency room visits or hospitalizations. Dr. Faulkner replied with no but mentioned that discussions were ongoing to be able to look at that outcome.</p>	<p>N/A</p>
<p>2. Fee-for-Service Retrospective Drug Utilization Review Topic Selections</p>	<p>Background: Dr. Faulkner presented several FFS RDUR interventions topics for the DUR Board to choose from. The two interventions would be performed between August and September 2022.</p> <p>Board Discussion: Dr. Snow asked how providers are informed of the interventions and commented that he has never received any such letters.</p>	<p>Dr. Snow moved to approve. Dr. Burger second the motion.</p> <p>Motion to approve was carried unanimously.</p>

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	<p>The Board deliberated on interventions that would be most likely to save a life. “Beneficiaries with Chronic Opioid Use and No Naloxone” and “Diabetes and Smokers not on a statin” were the two interventions nominated.</p>	
<p>3. Retrospective Drug Utilization Review</p>	<p>Background: Discussion about R-DUR effectiveness (impact on provider education/patient outcomes) and possible new strategies.</p> <p>Board Discussion: The State shared discussion and feedback from the Mental Health Medication Advisory Committee. The State also suggested phone calls, continuing education, and webinars. The Board agreed with continuing education and suggested other ideas, including scorecards, secure e-mail, and fax. The Board discussed that depending on the EMR, that faxes are more likely to be seen because they get attached to the patient’s chart and sent directly to the provider. This was compared to physical mail that does not reliably reach the provider. The Board also discussed how different providers respond to different notices and that younger providers would be more likely to respond to electronic notifications. The Board also commented that the strategy might depend on the goal and that a webinar would be appropriate for general education to all providers, but not for targeted/patient-centered risk factors.</p>	<p>N/A</p>
<p>IV. Adjourn</p>	<p>The meeting adjourned at 12:43pm</p>	<p>Dr. Snow motioned to approve. Dr. Burger seconded the motion.</p> <p>Motion to adjourn was carried unanimously.</p>

The next DUR Board meeting is scheduled for October 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.

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