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Janet Stanek, Secretary

Laura Kelly, Governor

Drug Utilization Review Board Meeting
Agenda, Open Session July 19, 2023
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/87254963991?pwd=d2FQRW1XQ0plVngvNWx0TzRaNk9HZz09
Required Passcode: 799854 **Audio Dial in:** (312) 626-6799 US Toll-free
Meeting ID: 87254963991

Members of the public are required to complete a conflict-of-interest (COI) 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 (July 12, 2023). Please email the completed form to Annette.Grant@ks.gov.

COI Form: https://www.kdhe.ks.gov/DocumentCenter/View/15521/DUR-Conflict-of-Interest-Form-PDF

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
Cori Durall, PharmD
McKayla Edwards, PharmD
Michele Reisinger, DNP, APRN, FNP-BC
Arthur Snow, MD

KDHE-DHCF Staff

Annette Grant, RPh
Victor Nguyen, PharmD
Anh Rongish, PharmD, BCPS
Sridevi Donepudi, MD, MMM, FAAFP
Crystal Blackmon, Sr. Administrative Specialist

Gainwell Technologies/Kepro Staff

Karen Kluczykowski, RPh
Kathy Kaesewurm, RN, BSN
Harry Vu, PharmD
Jordan Brazeal, 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 April 19, 2023 Meeting Minutes

III. NEW BUSINESS

A. Executive Sign-off Agenda Items – Revised Prior Authorization (PA) Criteria

1. **Adult Rheumatoid Arthritis (RA) Agents, Axial Spondyloarthritis Agents, Juvenile Idiopathic Arthritis (JIA) Agents, Plaque Psoriasis (PsO) Agents, Psoriatic Arthritis (PsA) Agents, and Ulcerative Colitis (UC) Agents**
   This revision includes the addition of Humira biosimilars (Abrilada™, Cyltezo®, Hadlima™, Hulio®, Hyrimoz®, Idacio®, Yuflyma®, Yusimry™) to the list of agents requiring prior authorization.

2. **Crohn's Disease (CD) Agents**
   This revision includes the addition of Rinvoq® and Humira biosimilars (Abrilada™, Cyltezo®, Hadlima™, Hulio®, Hyrimoz®, Idacio®, Yuflyma®, Yusimry™) to the list of agents requiring prior authorization.

3. **Enzyme Replacement Therapy**
   This revision includes the addition of Elfabrio® to the list of agents requiring prior authorization.

4. **Minimum Requirements Prior Authorization (MRPA)**
   This revision includes the addition of Demser®, Ryplazim®, Enjaymo®, Voxzogo® to the list of agents requiring prior authorization and updates the indicated age for Trikfata® and Kayldeco®.

    i. Review of agenda items for Executive Sign-off
    ii. Board Discussion

B. Revised Prior Authorization (PA) Criteria

1. **Diabetes Mellitus – Type 2 Agents**
   This revision includes re-evaluation of metformin step-therapy, re-evaluation of the renewal criteria, updates to indicated age for Jardiance® and Synjardy®, and updates to the indication for Farxiga®.

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

2. **Alzheimer's Disease Agents**
   This revision includes re-evaluating disease screening tools and proposal of Aduhelm® step therapy for prior authorization.

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

3. **Migraine Acute Treatment Agents**
   This revision includes the addition of Zavzpret™ to the list of agents requiring prior authorization and various other criteria revisions.

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

4. **Migraine Prophylaxis Agents**
   This revision includes updates to the indication for Qulipta® and various other minor criteria revisions.

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

5. **Hypercholesterolemia Agents**
   This revision includes re-evaluation of step-therapy, updates to indicated age for Evkeeza™, and various other critera revisions.

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

6. **Brand Medical Necessity**
   This revision includes State-determined drug exceptions to the Brand Medical Necessity PA requirement.

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

7. **Advanced Medical Hold Manual Review**
   This revision includes revisions to criteria #2 and #3 to include all of the corresponding clinical PA criteria.

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

8. **Weight Loss Agents**
   This revision includes re-evaluating clinical criteria to Wegovy® and Saxenda® for prior authorization.

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

C. New Prior Authorization (PA) Criteria

1. **Hemophilia A Gene Therapy**
   Roctavian® (valoctocogene roxaparvovec-rvox) is an adeno-associated virus vector-based gene therapy recently approved for the treatment of Hemophilia A. The prior authorization criteria are being proposed to ensure appropriate use based upon the FDA-approved labeling information and clinical guidelines.

   i. New PA Criteria
   ii. *Public Comment
   iii. Board Discussion

2. **Duchenne Muscular Dystrophy Gene Therapy**
Elevidys™ (delandistrogene moxeparvovec-rokl) is an adeno-associated virus vector-based gene therapy recently approved for the treatment of Duchenne muscular dystrophy. The prior authorization criteria are being proposed to ensure appropriate use based upon the FDA-approved labeling information and clinical guidelines.

    i. New PA Criteria
    ii. *Public Comment
    iii. Board Discussion

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

1. **MHMAC Meeting (July 11, 2023)**

    a. ADHD Medications – Safe Use for All Ages
    - Minor revision to length of approval.
        i. Public Comment
        ii. Board Discussion

    b. Antidepressant Medications – Safe Use for All Ages
    - Minor revision to length of approval. Discussion on venlafaxine dosing.
        i. Public Comment
        ii. Board Discussion

    c. Antipsychotic Medications – Safe Use for All Ages
    - Minor revision to length of approval. Review of step-therapy for Lybalvi. Addition of Uzedy™.
        i. Public Comment
        ii. Board Discussion

2. **PDL Meeting (July 18, 2023)**

    a. Oral Non-Statins: Zetia®, Nexletol®, Nexlizet®
        i. Public Comment
        ii. Board Discussion

    b. Non-preferred PDL PA Criteria
    - Update of additional PDL classes that do not require annual renewal
        i. Public Comment
        ii. Board Discussion

E. Miscellaneous Items

1. **Fee-for-Service Retrospective Drug Utilization Review Topic Selections**
The DUR Board will select topics for the two (2) FFS RDUR interventions between May and June 2023.

    i. Presentation
    ii. Board Discussion

IV. ADJOURN

The next DUR Board meeting is scheduled for October 18, 2023.

*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****