

Oklahoma Health Care Authority

Drug Utilization Review Board (DUR Board)

Meeting – November 13, 2019 @ 4:00pm

Oklahoma Health Care Authority
4345 N. Lincoln Blvd.
Oklahoma City, Oklahoma 73105

AGENDA

Discussion and Action on the Following Items:

Items to be presented by Dr. Muchmore, Chairman:

1. Call to Order

A. Roll Call – Dr. Cothran

Items to be presented by Dr. Muchmore, Chairman:

2. Public Comment Forum – See Appendix A

A. Acknowledgment of Speakers for Public Comment
B. Changes to Public Comment Procedure

Items to be presented by Dr. Muchmore, Chairman:

3. Action Item – Approval of DUR Board Meeting Minutes – See Appendix B

A. October 9, 2019 DUR Minutes – Vote
B. October 9, 2019 DUR Recommendations Memorandum

Items to be presented by Dr. Holderread, Dr. Muchmore, Chairman:

4. Action Item – 2020 Drug Utilization Review Board Meeting Dates – See Appendix C

A. 2020 DUR Board Meeting Dates – Vote

Items to be presented by Dr. Holderread, Dr. Muchmore, Chairman:

5. Update on Medication Coverage Authorization Unit/U.S. Food and Drug Administration (FDA) Safety Alerts – See Appendix D

A. Pharmacy Helpdesk Activity for October 2019
B. Medication Coverage Activity for October 2019
C. FDA Safety Alerts

Items to be presented by Dr. Holderread, Dr. Muchmore, Chairman:

6. Action Item – Vote to Prior Authorize Harvoni® (Ledipasvir/Sofosbuvir Oral Pellets) and Sovaldi® (Sofosbuvir Oral Pellets) – See Appendix E

A. Introduction
B. College of Pharmacy Recommendations

Items to be presented by Dr. Chandler, Dr. Muchmore, Chairman:

7. Action Item – Vote to Prior Authorize Vyndaqel® (Tafamidis Meglumine) and Vyndamax™ (Tafamidis) – See Appendix F

A. Introduction
B. College of Pharmacy Recommendations

Items to be presented by Dr. Adams, Dr. Muchmore, Chairman:

8. Action Item – Vote to Prior Authorize Recarbrio™ (Imipenem/Cilastatin/Relebactam) and Xenleta™ (Lefamulin) – See Appendix G

A. Introduction
B. College of Pharmacy Recommendations

Items to be presented by Dr. Schmidt, Dr. Muchmore, Chairman:

9. Action Item – Vote to Prior Authorize Turalio™ (Pexidartinib) – See Appendix H

A. Introduction

B. Recommendations

Items to be presented by Dr. Schmidt, Dr. Muchmore, Chairman:

10. Action Item – Annual Review of Skin Cancer Medications – See Appendix I

- A. Introduction
- B. Current Prior Authorization Criteria
- C. Utilization of Skin Cancer Medications
- D. Prior Authorization of Skin Cancer Medications
- E. Market News and Updates
- F. Recommendations
- G. Utilization Details of Skin Cancer Medications

Items to be presented by Dr. Schmidt, Dr. Muchmore, Chairman:

11. 30-Day Notice to Prior Authorize Elzonris® (Tagraxofusp-erzs) and Inrebic® (Fedratinib) – See Appendix J

- A. Introduction
- B. Market News and Updates
- C. Elzonris® (Tagraxofusp-erzs) Product Summary
- D. Inrebic® (Fedratinib) Product Summary
- E. Recommendations

Items to be presented by Dr. Abbott, Dr. Muchmore, Chairman:

12. Action Item – Annual Review of Atopic Dermatitis (AD) Medications – See Appendix K

- A. Current Prior Authorization Criteria
- B. Utilization of AD Medications
- C. Prior Authorization of AD Medications
- D. Market News and Updates
- E. College of Pharmacy Recommendations
- F. Utilization Details of AD Medications

Items to be presented by Dr. Holderread, Dr. Muchmore, Chairman:

13. Annual Review of Targeted Immunomodulator Agents and 30-Day Notice to Prior Authorize Eticovo™ (Etanercept-ykro), Hadlima™ (Adalimumab-bwwd), Hyrimoz™ (Adalimumab-adaz), Rinvoq™ (Upadacitinib), and Skyrizi™ (Risankizumab-rzaa) – See Appendix L

- A. Current Prior Authorization Criteria
- B. Utilization of Targeted Immunomodulator Agents
- C. Prior Authorization of Targeted Immunomodulator Agents
- D. Market News and Updates
- E. Rinvoq™ (Upadacitinib) Product Summary
- F. Skyrizi™ (Risankizumab-rzaa) Product Summary
- G. College of Pharmacy Recommendations
- H. Utilization Details of Targeted Immunomodulator Agents

Items to be presented by Dr. Adams, Dr. Muchmore, Chairman:

14. Annual Review of Constipation and Diarrhea Medications and 30-Day Notice to Prior Authorize Aemcolo™ (Rifamycin), Motegrity™ (Prucalopride), Zelnorm™ (Tegaserod), and Ibsrela® (Tenapanor) – See Appendix M

- A. Current Prior Authorization Criteria
- B. Utilization of Constipation and Diarrhea Medications
- C. Prior Authorization of Constipation and Diarrhea Medications
- D. Product Summaries
- E. Market News and Updates
- F. College of Pharmacy Recommendations
- G. Utilization Details of Constipation and Diarrhea Medications

Items to be presented by Dr. Chandler, Dr. Muchmore, Chairman:

15. Annual Review of Antidepressants and 30-Day Notice to Prior Authorize Drizalma Sprinkle™ [Duloxetine Delayed-Release (DR) Capsules], Spravato™ (Esketamine Nasal Spray), and Citalopram 20mg/10mL, Escitalopram 10mg/10mL, and Fluoxetine 20mg/5mL Unit Dose Cups – See Appendix N

- A. Current Prior Authorization Criteria
- B. Utilization of Antidepressants
- C. Prior Authorization of Antidepressants
- D. Market News and Updates
- E. Spravato™ (Esketamine Nasal Spray) Product Summary
- F. Cost Comparison
- G. College of Pharmacy Recommendations
- H. Utilization Details of Antidepressants

Items to be presented by Dr. Nawaz, Dr. Muchmore, Chairman:

16. Annual Review of Anticoagulants and Platelet Aggregation Inhibitors and 30-Day Notice to Prior Authorize Bevyxxa® (Betrixaban) and to Update the Current Xarelto® (Rivaroxaban) Prior Authorization Criteria – See Appendix O

- A. Current Prior Authorization Criteria
- B. Utilization of Anticoagulants and Platelet Aggregation Inhibitors
- C. Prior Authorization of Anticoagulants and Platelet Aggregation Inhibitors
- D. Market News and Updates
- E. Bevyxxa® (Betrixaban) Product Summary
- F. College of Pharmacy Recommendations
- G. Utilization Details Anticoagulants
- H. Utilization Details of Platelet Aggregation Inhibitors

Items to be presented by Dr. Van, Dr. Muchmore, Chairman:

17. Annual Review of Antiviral Medications and 30-Day Notice to Prior Authorize Avaclyr™ (Acyclovir 3% Ophthalmic Ointment) – See Appendix P

- A. Current Prior Authorization Criteria
- B. Utilization of Antiviral Medications
- C. Prior Authorization of Antiviral Medications
- D. Market News and Updates
- E. Avaclyr™ (Acyclovir 3% Ophthalmic Ointment) Product Summary
- F. College of Pharmacy Recommendations
- G. Utilization Details of Antiviral Medications

Non-Presentation; Questions Only:

18. Industry News and Updates – See Appendix Q

- A. Introduction
- B. News and Updates

Items to be presented by Dr. Cothran, Dr. Muchmore, Chairman:

19. U.S. Food and Drug Administration (FDA) and Drug Enforcement Administration (DEA) Updates – See Appendix R

Items to be presented by Dr. Holderread, Dr. Muchmore, Chairman:

20. Future Business* (Upcoming Product and Class Reviews)

- A. Maintenance Asthma and Chronic Obstructive Pulmonary Disease (COPD) Medications
- B. Thrombocytopenia Medications
- C. Carbaglu® (Carglumic Acid)
- D. Soliris® (Eculizumab) and Ultomiris® (Ravulizumab-cwvz)
- E. Muscular Dystrophy Medications

**Future business subject to change.*

21. Adjournment