Oklahoma Health Care Authority

Drug Utilization Review Board (DUR Board) Meeting – June 11, 2025 @ 4:00pm

at the

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

NOTE: The DUR Board will meet at 4:00pm at OHCA (see address above). There will be Zoom access to this meeting; however, Zoom access will be set up in view-only mode with no voting, speaking, video, or chat box privileges. Zoom access will allow for viewing of the presentation slides as well as audio of the presentations and discussion during the meeting; however, the DUR Board meeting will not be delayed or rescheduled due to any technical issues that may arise.

AGENDA

Discussion and action on the following items:

<u>Items to be presented by Dr. Haymore, Chairman:</u>

1. Call to Order

A. Roll Call - Dr. Wilcox

DUR Board Members:

| Dr. Cassidy Blaiss – | participating in person |
|--------------------------|-------------------------|
| Mr. Kenneth Foster – | participating in person |
| Dr. Bret Haymore – | participating in person |
| Dr. Bethany Holderread – | participating in person |
| Dr. Craig Kupiec – | participating in person |
| Dr. Lee Muñoz – | participating in person |
| Dr. James Osborne – | participating in person |
| Dr. Edna Patatanian – | participating in person |
| Dr. Jennifer Weakley – | participating in person |

Viewing Access Only via Zoom:

Please register for the meeting at:

https://oklahoma.zoom.us/webinar/register/WN_94lCoSe9Ty2msgsLMqg2Ww After registering, you will receive a confirmation email containing information about joining the webinar.

Or join by phone:

Dial: +1-602-753-0140 or +1-669-219-2599

Webinar ID: 958 2294 2095

Passcode: 65079339

Public Comment for Meeting:

- Speakers who wish to sign up for public comment at the OHCA DUR Board meeting may do so in writing by visiting the DUR Board page on the OHCA website at www.oklahoma.gov/ohca/about/boards-and-committees/drug-utilization-review/dur-board and completing the Speaker Registration Form. Completed Speaker Registration forms should be submitted to DURPublicComment@okhca.org. Forms must be received after the DUR Board agenda has been posted and no later than 24 hours before the meeting.
- The DUR Board meeting will allow public comment and time will be limited to 40 minutes total for all speakers during the meeting. Each speaker will be given 5 minutes to speak at the public hearing. If more than 8 speakers properly request to speak, time will be divided evenly.
- Only 1 speaker per manufacturer will be allowed.
- Any speakers who sign up for public comment must attend the DUR Board meeting in person at OHCA (see above address). Public comment through Zoom will not be allowed for the DUR Board meeting.

Items to be presented by Dr. Haymore, Chairman:

2. Public Comment Forum

A. Acknowledgement of Speakers for Public Comment

<u>Items to be presented by Dr. Haymore, Chairman:</u>

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

- A. May 14, 2025 DUR Board Meeting Minutes
- B. May 14, 2025 DUR Board Recommendations Memorandum
- C. Correspondence

Non-presentation items reviewed by Dr. DeRemer, Dr. Haymore, Chairman:

4. Update on Medication Coverage Authorization Unit – See Appendix B

- A. Pharmacy Help Desk Activity for May 2025
- B. Medication Coverage Activity for May 2025

<u>Items to be presented by Dr. O'Halloran, Dr. Haymore, Chairman:</u>

5. Dipeptidyl Peptidase-4 (DPP-4) Inhibitor Utilization Update – See Appendix C

- A. Introduction
- B. DPP-4 Inhibitor Utilization in the SoonerCare Population
- C. Conclusions
- D. College of Pharmacy Recommendations

<u>Items to be presented by Dr. Moss, Dr. Haymore, Chairman:</u>

- 6. Action Item Vote to Prior Authorize Daxxify® (DaxibotulinumtoxinA-lanm) and Update the Approval Criteria for the Botulinum Toxins See Appendix D
- A. Market News and Updates
- B. Daxxify® (DaxibotulinumtoxinA-lanm) Product Summary
- C. College of Pharmacy Recommendations

<u>Items to be presented by Dr. O'Halloran, Dr. Haymore, Chairman:</u>

- 7. Action Item Vote to Prior Authorize Brynovin™ (Sitagliptin Oral Solution), Glimepiride 3mg Tablet, Merilog™ (Insulin Aspart-szjj), Metformin 750mg Tablet, and Zituvimet™ XR [Sitagliptin/Metformin Extended-Release (ER)] and Update the Approval Criteria for the Anti-Diabetic Medications See Appendix E
- A. Market News and Updates
- B. Cost Comparisons
- C. College of Pharmacy Recommendations

<u>Items to be presented by Dr. Wilson, Dr. Haymore, Chairman:</u>

- 8. Action Item Vote to Prior Authorize Onyda™ XR [Clonidine Extended-Release (ER) Oral Suspension) and Update the Approval Criteria for the Attention-Deficit/Hyperactivity Disorder (ADHD) Medications See Appendix F
- A. Market News and Updates
- B. College of Pharmacy Recommendations

<u>Items to be presented by Dr. DeRemer, Dr. Haymore, Chairman:</u>

- 9. Action Item Vote to Prior Authorize Sofdra™ (Sofpironium) See Appendix G
- A. Market News and Updates
- B. College of Pharmacy Recommendations

<u>Items to be presented by Dr. Moss, Dr. Haymore, Chairman:</u>

- 10. Action Item Vote to Prior Authorize Enzeevu™ (Aflibercept-abzv),
 Opuviz™ (Aflibercept-yszy), and Yesafili™ (Aflibercept-jbvf) and Update
 the Approval Criteria for the Age-Related Macular Degeneration (AMD)
 Medications See Appendix H
- A. Market News and Updates
- B. College of Pharmacy Recommendations

Items to be presented by Dr. O'Halloran, Dr. Haymore, Chairman:

- 11. Action Item Vote to Prior Authorize Crexont® [Carbidopa/Levodopa Extended-Release (ER) Capsule], Onapgo™ (Apomorphine Injection for Continuous Infusion), and Vyalev™ (Foscarbidopa/Foslevodopa Injection for Continuous Infusion) and Update the Approval Criteria for the Parkinson's Disease Medications See Appendix I
- A. Market News and Updates
- B. Product Summaries
- C. Cost Comparison: Oral Carbidopa/Levodopa Products
- D. College of Pharmacy Recommendations

<u>Items to be presented by Dr. Moss, Dr. Haymore, Chairman:</u>

- 12. Action Item Vote to Prior Authorize Vanrafia® (Atrasentan) and Update the Approval Criteria for the Primary Immunoglobulin A Nephropathy (IgAN) Medications See Appendix J
- A. Market News and Updates
- B. Vanrafia® (Atrasentan) Product Summary
- C. College of Pharmacy Recommendations

<u>Items to be presented by Dr. Sinko, Dr. Haymore, Chairman:</u>

- 13. Action Item Vote to Prior Authorize Axtle™ (Pemetrexed), Bizengri® (Zenocutuzumab-zbco), Imdelltra™ (Tarlatamab-dlle), Lazcluze™ (Lazertinib), and Tecentriq Hybreza™ (Atezolizumab/Hyaluronidase-tqjs) and Update the Approval Criteria for the Lung Cancer Medications See Appendix K
- A. Market News and Updates
- B. Product Summary
- C. College of Pharmacy Recommendations

<u>Items to be presented by DeRemer, Dr. Haymore, Chairman:</u>

14. Action Item – Annual Review of Antiviral Medications – See Appendix L

- A. Current Prior Authorization Criteria
- B. Utilization of Antiviral Medications
- C. Prior Authorization of Antiviral Medications
- D. Market News and Updates
- E. Cost Comparison: Prevymis® (Letermovir) Products
- F. College of Pharmacy Recommendations
- G. Utilization Details of Antiviral Medications

<u>Items to be presented by Dr. Wilson, Dr. Haymore, Chairman:</u>

15. Action Item – Annual Review of Daybue™ (Trofinetide) – See Appendix M

- A. Current Prior Authorization Criteria
- B. Utilization of Daybue™ (Trofinetide)
- C. Prior Authorization of Daybue $^{\text{TM}}$ (Trofinetide)
- D. Market News and Updates

- E. College of Pharmacy Recommendations
- F. Utilization Details of Daybue™ (Trofinetide)

Items to be presented by Dr. DeRemer, Dr. Haymore, Chairman:

16. Action Item – Annual Review of Strensiq® (Asfotase Alfa) – See Appendix N

- A. Current Prior Authorization Criteria
- B. Utilization of Strensiq® (Asfotase Alfa)
- C. Prior Authorization of Strensiq® (Asfotase Alfa)
- D. Market News and Updates
- E. College of Pharmacy Recommendations
- F. Utilization Details of Strensiq® (Asfotase Alfa)

<u>Items to be presented by Dr. Sinko, Dr. Haymore, Chairman:</u>

17. Annual Review of Genitourinary and Gynecologic Cancer Medications and 30-Day Notice to Prior Authorize Avmapki™ Fakzynja™ Co-Pack (Avutometinib and Defactinib) – See Appendix O

- A. Current Prior Authorization Criteria
- B. Utilization of Genitourinary and Gynecologic Cancer Medications
- C. Prior Authorization of Genitourinary and Gynecologic Cancer Medications
- D. Market News and Updates
- E. Avmapki™ Fakzynja™ Co-Pack (Avutometinib and Defactinib) Product Summary
- F. College of Pharmacy Recommendations
- G. Utilization Details of Genitourinary and Gynecologic Cancer Medications

<u>Items to be presented by Dr. Adams, Dr. Haymore, Chairman:</u>

18. Annual Review of the SoonerCare Pharmacy Benefit – See Appendix P

- A. Summary
- B. Medicaid Drug Rebate Program
- C. Alternative Payment Models
- D. Drug Approval Trends
- E. Traditional Versus Specialty Pharmacy Products
- F. Top 10 Traditional Therapeutic Categories by Reimbursement
- G. Top 10 Specialty Therapeutic Categories by Reimbursement
- H. Top 10 Medications by Reimbursement
- I. Cost Per Claim
- J. Market Projections
- K. Conclusion
- L. Fiscal Year Comparison

<u>Items to be presented by Dr. O'Halloran, Dr. Haymore, Chairman:</u>

19. Annual Review of Atypical Antipsychotic Medications and 30-Day Notice to Prior Authorize Cobenfy™ (Xanomeline/Trospium), Erzofri® [Paliperidone Palmitate Extended-Release (ER) Injection], and Opipza™ (Aripiprazole Oral Film) – See Appendix Q

- A. Current Prior Authorization Criteria
- B. Utilization of Atypical Antipsychotic Medications
- C. Prior Authorization of Atypical Antipsychotic Medications
- D. Oklahoma Resources
- E. Market News and Updates
- F. Cobenfy™ (Xanomeline/Trospium) Product Summary
- G. Cost Comparisons
- H. College of Pharmacy Recommendations
- I. Utilization Details of Atypical Antipsychotic Medications

<u>Items to be presented by Dr. Moss, Dr. Haymore, Chairman:</u>

- 20. Annual Review of Various Special Formulations and 30-Day Notice to Prior Authorize Carbamazepine 200mg Chewable Tablet, Femlyv™ [Norethindrone Acetate/Ethinyl Estradiol Orally Disintegrating Tablet (ODT)]; Focinvez™ (Fosaprepitant Injection), Imkeldi (Imatinib Oral Solution), IVRA (Melphalan 90mg/mL Injection), Myhibbin™ (Mycophenolate Mofetil Oral Suspension), Ondansetron 16mg ODT, Tezruly™ (Terazosin Oral Solution), Topiramate 50mg Sprinkle Capsule, Veltassa® (Patiromer) 1g Powder Packet, and Vigafyde™ (Vigabatrin Oral Solution) See Appendix R
- A. Introduction
- B. Current Prior Authorization Criteria
- C. Utilization of Various Special Formulations
- D. Prior Authorization of Various Special Formulations
- E. Product Summaries
- F. College of Pharmacy Recommendations
- G. Utilization Details of Various Special Formulations

Non-presentation items reviewed by Dr. Wilson, Dr. Haymore, Chairman:

21. Annual Review of Rezdiffra $^{™}$ (Resmetirom) – See Appendix S

- A. Current Prior Authorization Criteria
- B. Utilization of Rezdiffra™ (Resmetirom)
- C. Prior Authorization of Rezdiffra™ (Resmetirom)
- D. Market News and Updates
- E. College of Pharmacy Recommendations
- F. Utilization Details of Rezdiffra™ (Resmetirom)

Non-presentation items reviewed by Dr. DeRemer, Dr. Haymore, Chairman:

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

Non-presentation items reviewed by Dr. Adams, Dr. Haymore, Chairman:

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

- A. Alzheimer's Disease Medications
- B. Colorectal Cancer (CRC) Medications

- C. Epidermolysis Bullosa (EB) Medications
- D. Testosterone Products
- *Future product and class reviews subject to change.

24. Adjournment

NOTE: An analysis of the atypical [Aged, Blind, and Disabled (ABD)] patient subgroup of the Oklahoma Medicaid population has been performed pertaining to all recommendations included in this DUR Board meeting packet to ensure fair and knowledgeable deliberation of the potential impact of the recommendations on this patient population.

NOTE: Oklahoma Medicaid transitioned from a fee-for-service (FFS) pharmacy benefit to a managed care pharmacy benefit for most members on April 1, 2024. At that time, the majority of SoonerCare members were transitioned to one of the three managed care SoonerSelect plans: Aetna, Humana, or Oklahoma Complete Health. SoonerSelect data has been provided to the College of Pharmacy and has been used in analyses throughout this DUR Board meeting packet. The data included in this DUR Board meeting packet combines FFS and managed care utilization data. The managed care utilization and prior authorization (PA) data reported in this packet is based solely on the data provided by the SoonerSelect plans. SoonerSelect PA data only includes medications billed as pharmacy claims (NDC) and does not include those billed as medical claims (HCPCS), where applicable.