

Oklahoma Health Care Authority

Drug Utilization Review Board

(DUR Board)

Meeting – June 10, 2020 @ 4:00pm

OHCA Webinar

Register for the meeting here:

https://okhca.zoom.us/webinar/register/WN_0MkFwBoVQbS6LhOWqnoWzw

AGENDA

Discussion and Action on the Following Items:

Items to be presented by Dr. Muchmore, Chairman:

1. Call to Order

A. Roll Call – Dr. Skrepnek

Telephone Conference Participants

DUR Board Members:

Dr. Stephen Anderson –

participating via Zoom Teleconference

Dr. Jennifer de los Angeles –

participating via Zoom Teleconference

Ms. Jennifer Boyett –

participating via Zoom Teleconference

Dr. Markita Broyles –

participating via Zoom Teleconference

Dr. Theresa Garton –

participating via Zoom Teleconference

Dr. Megan Hanner –

participating via Zoom Teleconference

Dr. Lynn Mitchell –

participating via Zoom Teleconference

Dr. John Muchmore –

participating via Zoom Teleconference

Dr. Lee Munoz –

participating via Zoom Teleconference

Dr. James Osborne –

participating via Zoom Teleconference

Public Access to Meeting via Zoom:

Register at: https://okhca.zoom.us/webinar/register/WN_0MkFwBoVQbS6LhOWqnoWzw

Or join by phone:

Dial (for higher quality, dial a number based on your current location):

US: +1 253 215 8782 or +1 346 248 7799 or +1 669 900 6833 or +1 301 715 8592 or +1 312 626 6799 or +1 646 558 8656

Webinar ID: 933 9078 0729

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 www.okhca.org/DUR 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.

Items to be presented by Dr. Muchmore, Chairman:

2. Public Comment Forum

- A. Acknowledgment of Speakers for Public Comment

Items to be presented by Dr. Muchmore, Chairman:

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

- A. May 13, 2020 DUR Minutes – Vote
- B. May 13, 2020 DUR Recommendations Memorandum

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

4. Update on Medication Coverage Authorization Unit/Use of Angiotensin Converting Enzyme Inhibitor (ACEI)/Angiotensin Receptor Blocker (ARB)/Angiotensin Receptor-Nepriylsin Inhibitor (ARNI) Therapy in Patients with Chronic Heart Failure (HF) Mailing Update – See Appendix B

- A. Pharmacy Helpdesk Activity for May 2020
- B. Medication Coverage Activity for May 2020
- C. Use of ACEI/ARB/ARNI Therapy in Patients with Chronic HF Mailing Summary

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

5. Action Item – Vote to Prior Authorize Ziextenzo® (Pegfilgrastim-bmez) – See Appendix C

- A. Introduction
- B. College of Pharmacy Recommendations

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

6. Action Item – Vote to Prior Authorize Palforzia™ (Peanut Allergen Powder-dnfp) – See Appendix D

- A. Introduction
- B. College of Pharmacy Recommendations

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

7. Action Item – Vote to Prior Authorize Nourianz™ (Istradefylline Tablet) – See Appendix E

- A. Introduction
- B. College of Pharmacy Recommendations

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

8. Annual Review of Atypical Antipsychotic Medications and 30-Day Notice to Prior Authorize Secuado® (Asenapine Transdermal System) and Caplyta™ (Lumateperone Capsule) – See Appendix F

- A. Current Prior Authorization Criteria
- B. Medicaid Drug Rebate Program
- C. Utilization of Atypical Antipsychotic Medications
- D. Prior Authorization of Atypical Antipsychotic Medications
- E. Market News and Updates

- F. Secuado® (Asenapine) Transdermal System Product Summary
- G. Caplyta™ (Lumateperone) Product Summary
- H. College of Pharmacy Recommendations
- I. Utilization Details of Atypical Antipsychotic Medications

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

9. Annual Review of Attention-Deficit/Hyperactivity Disorder (ADHD) and Narcolepsy Medications and 30-Day Notice to Prior Authorize Wakix® (Pitolisant) – See Appendix G

- A. Current Prior Authorization Criteria
- B. Medicaid Drug Rebate Program
- C. Utilization of ADHD and Narcolepsy Medications
- D. Prior Authorization of ADHD and Narcolepsy Medications
- E. Market News and Updates
- F. Wakix® (Pitolisant) Product Summary
- G. Cost Comparison
- H. College of Pharmacy Recommendations
- I. Utilization Details of ADHD and Narcolepsy Medications

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

10. Annual Review of Various Special Formulations and 30-Day Notice to Prior Authorize Absorica LD™ (Isotretinoin Capsule), Amzeeq™ (Minocycline 4% Topical Foam), Aprizio Pak™ (Lidocaine/Prilocaine 2.5%/2.5% Kit), Caldolor® (Ibuprofen Injection), Exservan™ (Riluzole Oral Film), Metronidazole 1% Gel, Noritate® (Metronidazole 1% Cream), Procysbi® [Cysteamine Delayed-Release (DR) Granule], Pyridostigmine 30mg Tablet, Quzyttir™ (Cetirizine Injection), Relafen™ DS (Nabumetone Tablet), Slynd™ (Drospirenone Tablet), Talicia® (Omeprazole/Amoxicillin/Rifabutin Capsule), and Tirosint® (Levothyroxine Capsule) – See Appendix H

- 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

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

11. Annual Review of Ophthalmic Anti-Inflammatories and 30-Day Notice to Prior Authorize Iluvien® (Fluocinolone Intravitreal Implant), Ozurdex® (Dexamethasone Intravitreal Implant), and Retisert® (Fluocinolone Intravitreal Implant) – See Appendix I

- A. Current Prior Authorization Criteria
- B. Utilization of Ophthalmic Anti-Inflammatories
- C. Prior Authorization of Ophthalmic Anti-Inflammatories
- D. Market News and Updates
- E. Iluvien® (Fluocinolone Intravitreal Implant) Product Summary
- F. Ozurdex® (Dexamethasone Intravitreal Implant) Product Summary
- G. Retisert® (Fluocinolone Intravitreal Implant) Product Summary
- H. Other Formulations and Cost Comparison
- I. College of Pharmacy Recommendations

- J. Utilization Details of Ophthalmic NSAIDs
- K. Utilization Details of Ophthalmic Corticosteroids

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

12. 30-Day Notice to Prior Authorize Isturisa® (Osilodrostat) – See Appendix J

- A. Market News and Updates
- B. Isturisa® (Osilodrostat) Product Summary
- C. College of Pharmacy Recommendations

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

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

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

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

- A. Topical Corticosteroids
- B. Opioid Analgesic and Medication-Assisted Treatment (MAT) Medications
- C. Amyloidosis Medications
- D. Koselugo™ (Selumetinib) and Pemazyre™ (Pemigatinib)

**Future business subject to change.*

15. Adjournment