Drug Utilization Review Board
Minutes Draft

Name of Meeting:	Drug Utilization Review Board
Date of Meeting:	December 1, 2021
Length of Meeting:	3 hours
Location of Meeting:	DMAS Board Room 102

Members Present:
John Morgan, MD, Chief Clinical Innovation Officer, Chair
Rachel Cain, PharmD
Melissa Chouinard, MD
Michele Thomas, PharmD
Wendy Nash, PharmD
Kristi Fowler, RPh
Matthew Estes, PharmD

Members Not Present:
Seth Brant, MD
Denese Gomes, NP
Randy Ferrance, MD
Kathryn Reid, PhD
Denise Lowe, PharmD

DMAS Attendees:
MaryAnn McNeil, RPh, Pharmacy Manager
Nettie Emmelhainz, PharmD, Senior Pharmacy Policy and Data Analyst
JoeMichael Fusco, PharmD, Common Core Formulary Pharmacist
Kiara Jasper, MHA, CPhT, Pharmacy Systems Administrator

Contractors:
Debbie Moody, RPh, Director, Clinical Account Services, Magellan Health Services
Nancy Eldin, PharmD, Pharmacist Account Executive, Magellan Health Services

Visitors:
Brad Burmeister, Gilead
Cindy Snyder, ViiV Healthcare
Dan Calloway, Sunovion
Darren Ray, Neurocrine Biosciences
Jane Oshinsky, Novo Nordisk
Jessica Todd, Bayer
Kristie Bryerton, Sarepta

Mark Stephens, Global Blood Therapeutics

Call to Order and Introductions

Dr. John Morgan called the meeting to order at 1:05 pm.

Dr. Rachel Cain introduced two new DUR Board Members:

- Kristi Fowler, RPh – Pharmacy Director, UnitedHealthcare Community Plan of Virginia
- Matthew Estes, PharmD – Pharmacy Manager, Local Specialty at Walgreens

MaryAnn McNeil introduced new DMAS Staff Members:

- Nettie Emmelhainz, PharmD, Senior Pharmacy Policy and Data Analyst
- JoeMichael Fusco, PharmD, Common Core Formulary Pharmacist
- Kiara Jasper, MHA, CPhT, Pharmacy Systems Administrator

Minutes – June 10, 2021 and September 9, 2021

Dr. Morgan motioned to approve the June 10, 2021 and September 9, 2021 meeting minutes as submitted. Dr. Michele Thomas seconded the motion.

DUR Board Updates

Dr. Morgan welcomed and thanked everyone for attending the DUR meeting.

Dr. Morgan reminded the DUR Board that we will be reviewing, voting, and approving clinical criteria for New Drugs from the September 9, 2021 DUR meeting due to not having an in-person quorum meeting for the September 9, 2021 meeting.

New Drugs from September 9, 2021 DUR Meeting

The DUR Board reviewed Fotivda® (tivozanib), Lumakras™ (sotorasib), Myfembree® (relugolix, estradiol, and norethindrone acetate), Truseltiq™ (infigratinib) and Wegovy™ (semaglutide). The Impact Reports and the report for the utilization of these 5 new DUR drugs for FFS and MCOs was reviewed.

The DUR Board discussed the service authorization (SA) criteria for Myfembree®. Myfembree® was added to the current Oriahnn™ SA fax form. The DUR Board members discussed adding a selection box of N/A for question number 10. Dr. Morgan motioned to accept the SA criteria with adjustments to question number 10 by adding a selection box of N/A. Dr. Melissa Chouinard seconded the motion.

The DUR Board discussed the SA criteria for Truseltiq™. Truseltiq™ was added to the current Pemazyre™ SA fax form. The DUR Board members agreed in the removal of some of the clinical criteria details since this must be prescribed by an oncologist. Dr. Morgan motioned to accept the SA criteria. Dr. Cain seconded the motion.

The DUR Board discussed the SA criteria for Wegovy™. Wegovy™ was added to the current DUR Anti-Obesity Drugs SA fax form. The DUR Board members discussed the different cut-off percentages for weight loss in the renewal criteria. These cut-off percentages are from the clinical studies for the drugs and are included in the drug package insert. Can look at the coverage practices for the weight loss cut-offs for renewals at a future meeting. Dr. Morgan motioned to accept the SA criteria. Dr. Thomas seconded the motion.

New Drugs for December 1, 2021 DUR Meeting

The DUR Board reviewed Exkivity™ (mobocertinib), Kerendia® (finerenone) and Welireg™ (belzutifan). The Impact Reports and the report for the utilization of these 3 new DUR drugs for FFS and MCOs was reviewed.

Utilization Management (UM)

- **Movement Disorders**
  Movement Disorder Drugs Class was discussed at the last P&T Meeting in September 2021 and the class was added to the PDL as a Closed Class. The DUR Board discussed and reviewed the clinical criteria and quantity limits for the class. The Board members had discussions around the clinical criteria stating, “Prescribed by or in consult with a neurologist or psychiatrist”. The DUR Board recommended for P&T to revisit these criteria and remove the “in consult with” and have the clinical criteria state, “Prescribed by a neurologist or psychiatrist”. Dr. Morgan motioned to accept the quantity limits for the Movement Disorder Drugs Class and recommend to P&T to revisit the criteria and propose to remove the “in consult with” and have the clinical criteria state, “Prescribed by a neurologist or psychiatrist”. Dr. Thomas seconded the motion.

- **HIV**
  HIV Drugs Class was discussed at the last P&T Meeting in September 2021 and the class was added to the PDL as a Closed Class. All HIV Agents will be Preferred except for Trogarzo (ibalizumab-uiyk) injection, for intravenous use – which will be non-preferred. MaryAnn McNeil

mentioned that DMAS has reached out to the MCOs in reference to quantity limits data for HIV drugs and this information will be presented at the next DUR meeting in March. The DUR Board discussed and would like to suggest to the P&T Committee to look at cost comparison of these drugs and cost-effective alternatives where possible.

Class Criteria

- **Hepatitis C**
  MaryAnn McNeil mentioned that the Hepatitis C Class was reviewed at the last P&T Meeting in September 2021 and the final decision was to remove the service authorization criteria from the preferred Hepatitis C Agents (Mavyret™ and sofosbuvir/velpatasvir (generic Epclusa®)). Also, they will be limited to 3 one-month fills (total 84 days supply) without service authorization. Dr. Morgan motioned to support the P&T decision to remove the SA criteria from the preferred Hepatitis C Agents (Mavyret™ and sofosbuvir/velpatasvir (generic Epclusa®)). Dr. Thomas seconded the motion.

- **Oral Hypoglycemic**
  Dr. Nancy Eldin and Dr. Morgan discussed the current metformin step edit that is required before use of all oral hypoglycemics and the barriers this can cause. Dr. Thomas motioned to remove the current metformin step edit for all oral hypoglycemics. Dr. Chouinard seconded the motion.

- **Oral Oncology – Lung Cancer**
  The DUR Board reviewed the Oral Oncology, Lung Cancer SA criteria. The new criteria combines all the lung cancer oral oncology drugs to create one SA criteria for the entire class. This new SA form will eliminate the single SA criteria forms for individual lung cancer oral oncology drugs. The DUR Board also reviewed the utilization of these lung cancer oral oncology drugs for FFS. The DUR Board discussed renaming the title of the Oral Oncology, Lung Cancer Drugs SA fax form to add “and Other Neoplasms” since some of these drugs can be used for other neoplasms. In addition, the DUR Board discussed removing question number 2 about member age limit and incorporating the age in the questions pertaining to each grouping of the lung cancer drugs since each grouping of lung cancer drugs have different ages for different indications. Dr. Morgan motioned to rename the title of the Oral Oncology, Lung Cancer Drugs SA fax form to “Oral Oncology, Lung Cancer and Other Neoplasms Drugs” and to remove question number 2 about member age limit and incorporate the age in the questions pertaining to each grouping of lung cancer drugs

since each grouping of lung cancer drugs have different ages for different indications. Dr. Chouinard seconded the motion.

- **Oral Oncology – Renal Cell Carcinoma**
  The DUR Board reviewed the Oral Oncology, Renal Cell Carcinoma SA criteria. The new criteria combines all the renal cell carcinoma oral oncology drugs to create one SA criteria for the entire class. This new SA form will eliminate the single SA criteria forms for individual renal cell carcinoma oral oncology drugs. The DUR Board also reviewed the utilization of these renal cell carcinoma oral oncology drugs for FFS. The DUR Board discussed renaming the title of the Oral Oncology, Renal Cell Carcinoma Drugs SA fax form to add "and Other Neoplasms" since some of these drugs can be used for other neoplasms. In addition, the DUR Board discussed removing question number 2 about member age limit and incorporating the age in the questions pertaining to each grouping of renal cell carcinoma drugs since each grouping of renal cell carcinoma drugs have different ages for different indications. Dr. Morgan motioned to rename the title of the Oral Oncology, Renal Cell Carcinoma Drugs SA fax form to "Oral Oncology, Renal Cell Carcinoma and Other Neoplasms Drugs" and to remove question number 2 about member age limit and incorporate the age in the questions pertaining to each grouping of renal cell carcinoma drugs since each grouping of renal cell carcinoma drugs have different ages for different indications. Dr. Cain seconded the motion.

MRx Pipeline and DUR Quarterly Newsletter- The October 2021 MRx Pipeline Report and the September 2021 DUR Quarterly Newsletter were available on the DUR Webportal for review.

Topics for Discussion

Concurrent Use of Opioids and Benzodiazepines – The DUR Board reviewed Concurrent Use of Opioids and Benzodiazepines reports for FFS and MCOs. The DUR Board discussed an interest of looking at these members further to see if there were any overdose deaths. Also, the DUR Board expressed an interest in seeing if the average days of being on the drug ends because the member actually stopped the drug or is it due to the member moving to an MCO.

Concurrent Use of Opioids and Antipsychotics – The DUR Board reviewed Concurrent Use of Opioids and Antipsychotics reports for FFS and MCOs.

Antipsychotic Medications in Children – The DUR Board reviewed Antipsychotic Medications in Children reports for FFS and MCOs. The DUR

Board would like to add the enrollment numbers for how many members are under the age of 18 to get a percentage for antipsychotic usage in children. In addition, the DUR Board is interested in doing audits on some of the members, especially the very young children, to check the appropriateness of using the antipsychotic.

Surveillance

Opioid Use with Risk Factors with and without Naloxone – The DUR Board reviewed Opioid Use with Risk Factors with and without Naloxone reports for FFS and MCOs. The DUR Board members suggested adding information to the Medicaid section of the Virginia Board of Pharmacy Newsletter in reference to educating about the importance of prescribing and dispensing Naloxone with Opioids.

Reports

The DUR Board reviewed the ProDUR, Recent RetroDUR Activity and Utilization Analysis reports. The Hemoglobin A1c Lab Value Over 9 and On Diabetic Meds for 6 Months Report was provided in the binder for review.

RetroDUR Criteria Estimates

Dr. Eldin reviewed the Criteria Exception Estimates Reports with the DUR Board. The reports were broken down to the Top 40 Criteria Exception Estimates by Members and the Top 40 Criteria Exception Estimates by Total Payment Amount for Fee-For-Service (FFS) and each individual Managed Care Organization (MCO) plan.

Members were interested in the following criteria for lettering:

- Criterion number 7983: Antipsychotics (all types) in children 0 - 17
- Criterion number 22466: Opioid claims in the last 180 days and no claims for naloxone in the last 2 years
- Criterion number 7751: Aripiprazole without a diagnosis for an FDA approved use_180 days look back for diagnosis

Next DUR Meeting

March 10, 2022

Dr. Morgan motioned to adjourn the meeting. Dr. Thomas seconded the motion.
Meeting adjourned at 4:05 pm.