



## New York State Medicaid Drug Utilization Board Meeting Agenda

The Drug Utilization (DUR) Board will meet September 17, 2015, from 9:00 a.m. to 4:00 p.m., Meeting Room 6, Concourse, Empire State Plaza, Albany, New York

### Agenda Items

#### A. Preferred Drug Program (PDP) Reviews

The DUR Board will review therapeutic classes listed below, as they pertain to the PDP.

- The DUR Board will review clinical and financial information, to recommend preferred and non-preferred drugs.
- For therapeutic classes currently subject to the PDP\*, the DUR Board will only consider clinical information which is new since the previous review of the therapeutic class and then consider financial information.

New clinical information may include a new drug or drug product information, new indications, new safety information or new published clinical trials (comparative evidence is preferred, or placebo controlled when no head-to-head trials are available). Information in abstract form alone, posters, or unpublished data are poor quality evidence for the purpose of re-review and submission is discouraged.

- Those wishing to submit clinical information must do so in an electronic format by September 3, 2015 or the DUR Board may not have ample time to review the information.

\*The current preferred and non-preferred status of drugs subject to the Preferred Drug List (PDL) may be viewed at

[https://newyork.fhsc.com/downloads/providers/NYRx\\_PDP\\_PDL.pdf](https://newyork.fhsc.com/downloads/providers/NYRx_PDP_PDL.pdf)

#### 1. Inhaled Antibiotics

(Initial Review)

Bethkis (tobramycin inhalation), Cayston (aztreonam), Kitabis Pak (tobramycin inhalation), TOBI/TOBI Podhaler (tobramycin inhalation), tobramycin solution

#### 2. Antipsychotics - Second Generation

(Previous review date: April 24, 2014)

Abilify (aripiprazole), aripiprazole, clozapine/clozapine ODT, Clozaril (clozapine), Fanapt (iloperidone), FazaClo (clozapine), Geodon (ziprasidone), Invega (paliperidone), Latuda (lurasidone), olanzapine/olanzapine ODT, quetiapine, Rexulti (brexpiprazole), Risperdal (risperidone), risperidone, Saphris (asenapine), Seroquel (quetiapine), Seroquel XR (quetiapine), Versacloz (clozapine), ziprasidone, Zyprexa (olanzapine)

### **3. Anabolic Steroids – Topical**

(Previous review date: June 15, 2012)

Androderm (testosterone), Androgel (testosterone), Axiron (testosterone), Fortesta (testosterone), Natesto (testosterone), Testim (testosterone), testosterone gel, Vogelxo (testosterone)

### **4. Insulin- Rapid Acting**

(Previous review date: November 4, 2010)

Afrezza (insulin regular, human), Apidra (insulin glulisine), Humalog (insulin lispro), Novolog (insulin aspart)

### **5. Platelet Inhibitors**

(Previous review date: April 24, 2014)

Aggrenox (dipyridamole ER/aspirin), Brilinta (ticagrelor), clopidogrel, dipyridamole, dipyridamole ER/aspirin, Effient (prasugrel), Persantine (dipyridamole), Plavix (clopidogrel), ticlopidine, Zontivity (vorapaxar)

### **6. Agents for Actinic Keratosis**

(Initial Review)

Aldara (imiquimod), Carac (fluorouracil), diclofenac 3% gel, Efudex (fluorouracil), fluorouracil cream, imiquimod cream, Picato (ingenol mebutate), Solaraze (diclofenac sodium), Zyclara (imiquimod)

## **B. Drug Utilization Reviews (DUR)**

The Board will review the following pharmacotherapies and recommend clinical criteria and/or interventions to ensure appropriate utilization:

1. Topical Compounded Prescriptions
2. Palivizumab
3. Proprotein Convertase Subtilisin Kexin 9 (PCSK9) Inhibitors

## **C. DUR Program Updates**

1. Evaluation of Long-Acting Opioid Editing

**Agenda Timeline** (subject to change based on meeting proceedings)

9:00 - 9:15	Welcome & Introductions
9:15 - 10:15	Public Comment Period
10:15 - 11:30	PDP Clinical reviews
11:30 - 1:00	Lunch/Executive Session (financial reviews)
1:00 - 1:30	PDP Recommendations
1:30 - 3:00	Drug Utilization Reviews
3:00 - 3:45	DUR Program Updates
3:45 - 4:00	Final Comments and Adjournment

Interested parties must notify the Department of Health (DoH) by September 9, 2015 of their request to address the DUR Board during the public comment period. Requests may be made by calling 518-486-3209 or e-mailing [dur@health.ny.gov](mailto:dur@health.ny.gov). (please reference DUR Board Speaker Request).

Public comments are limited to the agenda items listed above. In addition, public comments for therapeutic classes currently subject to the PDP are limited to new clinical information since the previous review. Comments must be brief (2 minutes) and the total comment period will not exceed sixty (60) minutes. DoH reserves the right to limit the number of interested parties providing public comment in order to meet timelines and accomplish meeting objectives.

All written statements, must be received in an electronic format by September 9, 2015. Written statements should summarize key points and may not exceed two (2) pages in length. Any studies cited should be referenced, with the primary source of funding included.

All clinical information must be received in an electronic format by September 3, 2015, or the DUR Board may not have ample time to review the information. For the therapeutic classes currently subject to the PDP, submitted clinical information must be new since the previous review of the therapeutic class.

Any information regarding the DUR Board meeting must be sent to the DoH to ensure distribution to all DUR Board members. Interested parties should not contact or send any information directly to DUR Board members.