

# Drug Utilization Review Board

## Meeting Minutes

**Thursday, February 8, 2024**

**7:15 a.m. to 8:30 a.m.**

**Google Meet**

### **Board Members Present:**

Colby Hancock, PharmD

James Keddington, DDS

Jennifer Brinton, MD

Judith Turner, DVM, PharmD

Michelle Hofmann, MD

Sharon Weinstein, MD

Eric Cannon, PharmD, FAMCP, Board  
Chair

### **Board Members Excused:**

Susan Seigfried, MD

Katherine Smith, PharmD

### **Dept. of Health/Div. of Health Care Financing Staff Present:**

Bryan Larson, PharmD, P&T Manager

Lisa Angelos, PharmD, BCSCP, CAPP

Luis Moreno, PharmD, CDCES

Ngan Huynh, PharmD, DURB Manager

Stephanie Byrne, PharmD

Andrea Rico, CPhT, CPC

### **University of Utah Drug Regimen Review Center Staff Presenter:**

Lauren Heath, PharmD, MS, BCACP

### **Other Individuals Present:**

Aimee Redhair, Biogen

Alexis Sharabalka

Ashley Peterson, Chryselys

Brielle Dozier, Artia

Georgette Dzwilewski, Indivior

Glenn Cornish, Alkermes

Jacob Crook, Medicaid DRRC

Jason Bott, Eli Lilly

Jeff White, Sumitomo Pharma

Jessica Jay, Indivior

Joseph Bennett

Lauren Heath, Medicaid DRRC

Lynda Finch, Biogen

Matthew Call, U of U

Melissa Abbott, Eisai

Miles Rooney, CHC, Optum

Monet Luloh, Medicaid DRRC

Valarie Gonzalez, Medicaid DRRC

3 joined by phone

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**Meeting conducted by:** Ngan Huynh and Eric Cannon

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1. **Welcome:**

Ngan Huynh opened the meeting and reminded everyone who attended the meeting to identify themselves via meeting chat or by sending an email to [medicaidpharmacy@utah.gov](mailto:medicaidpharmacy@utah.gov). Eric Cannon announced a quorum.

2. **Review and Approval of Choose an item Minutes:**

Eric Cannon motioned to approve the minutes from January 2024. Sharon Weinstein proposed the motion and Michelle Hoffman seconded the motion. Unanimous approval.

3. **Housekeeping:**

Neil Catalano

- 1) Addressed the board and announced his term with the Utah Medicaid Drug Utilization Review Board has concluded and wanted to say goodbye. He further expressed his gratitude for the opportunity to serve and said it has been a pleasure.

Ngan Huynh

- 1) Recruiting for Drug Utilization Review Board positions: consumer representative, pharma representative, child psych physician.

4. **P&T Committee Update:** None

5. **Topic:**

- a. Persistence on Sublocade for Opioid Use Disorder: A Retrospective Review, presented by Lauren Heath, PharmD, MS, BCACP with the Medicaid Drug Regimen Review Center
- b. Public Comment: Jessica Jay with Indivior is available for any questions
- c. Board Discussion: Eric Cannon, asked if there were any questions.

Sharon Weinstein stated that 60% relative treatment adherence with Sublocade seems pretty good due to the complexity of opioid use disorder (OUD). She asked about barriers to care and if the purpose

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of this discussion is about improving access? She further pondered how mental health may impact access.

Ngan Huynh responded that Sublocade is preferred on the Utah Medicaid Preferred Drug List (PDL), the only requirement is that the medication must be given to the provider, rather than the patient, to ensure patient administration. Sublocade does have a refill tolerance of 80%, but even with that, the Utah Medicaid Pharmacy Team is lenient with refill too soon prescription refill requests to ensure appropriate medication access. She further stated that generally any opioid use disorder (OUD) treatment is fully accessible to those who need it.

Ngan Huynh then expressed appreciation to the Medicaid Drug Regimen Review Center for the Sublocade review and explained the purpose of the review was to assist Utah Medicaid Pharmacy Team in investigating potential peer-to-peer outreach opportunities.

Eric Cannon asked about current Managed Care Entity (MCE) partnerships and Fee-for-Service Sublocade processes? He further asked if any pharmacy can fill Sublocade for the state?

Ngan Huynh responded that Sublocade coverage is carved to the state, so there is no MCE involvement.

Bryan Larson responded that Utah Medicaid Pharmacy does not have any requirements on where Sublocade can be filled.

Eric Cannon asked for any further comments. None.

d. Board Action:

Eric Cannon stated he thinks it is a good idea for the Utah Medicaid Pharmacy Team to further investigate ways to conduct peer-to-peer outreach on Sublocade utilization.

Sharon Weinstein mentioned Adam Gordon, a physician with the

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University of Utah, who could possibly be consulted regarding outreach to patients as this is an area of specialty.

### 6. Topic:

- a. Zulresso (brexanolone) and Zurzuvae (zuranolone) PA Draft, presented by Stephanie Byrne

#### Criteria for Approval (All criteria must be met)

- The patient is 15 years of age or older for Zulresso or 18 years of age or older for Zurzuvae
- The medication is being prescribed by or in consultation with a psychiatrist or a mental health specialist qualified in the diagnosis and treatment of psychiatric disease
- The patient has a diagnosis of moderate to severe postpartum depression shown with a validated depression assessment scale score **AND** requires immediate use of medication (scale name, score): \_\_\_\_\_
- The patient is **NOT** currently pregnant
- The patient is less than 12 months post-partum. Delivery date: \_\_\_\_\_
- The provider has documented depression treatment plan, including psychotherapy, following treatment

#### Note:

- ❖ **Boxed warning for Zurzuvae:** The patient is advised not to drive or engage in other potentially hazardous activities until at least 12 hours after zuranolone (Zurzuvae) administration for the duration of the 14-day treatment course.
- ❖ Use appropriate HCPCS code for billing Coverage and Reimbursement code look up:  
<https://health.utah.gov/stplan/lookup/CoverageLookup.php> HCPCS NDC Crosswalk:  
<https://health.utah.gov/stplan/lookup/FeeScheduleDownload.php>

**Authorization:** One (1) infusion per delivery for Zulresso, up to 14 days per delivery for Zurzuvae

- b. Public Comment: Lynda Finch, Biogen

- c. Board Discussion:

Sharon Weinstein is wondering if the prior authorization criteria requiring a mental health specialist as prescriber is too restrictive. She asked for thoughts from others?

Michelle Hofmann agreed and asked Stephanie Byrne where this specific recommendation came from?

Stephanie Byrne responded that this recommendation came from a discussion with the psychiatrist on staff.

Jennifer Brinton also agreed that psychiatry should not be a required

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step through for Zulresso and Zurzuvae.

**d. Board Action:**

Sharon Weinstein motioned that we retain all criteria on the Zulresso and Zurzuvae prior authorization draft, with the exception of the requirement that the medication be prescribed by a mental health provider, which should be removed. Jennifer Brinton seconded the motion. Unanimous approval.

**7. Meeting Chat Transcript:**

00:46:25.150,00:46:28.150

Monet Luloh (UofU CoP, DRRC): To answer the previous question regarding types of malignancies in the donislecel clinical trials (UIH-001 and UIH-002), it is reported that that malignancies included 12 skin cancers, 1 post-transplant lymphorproliferative disease, 1 breast cancer, and 1 thyroid cancer.

00:46:47.446,00:46:50.446

Eric Cannon: thank you!

00:47:10.030,00:47:13.030

Neal Catalano: Thank you Monet!

00:47:18.657,00:47:21.657

Sharon M Weinstein MD: thanks!

00:55:34.565,00:55:37.565

Sharon M Weinstein MD: thank you all

**8. The next meeting scheduled for:**

March 14, 2024. Topic: To Be Determined

**9. Public Meeting Adjourned:**

Michelle Hofmann motioned to adjourn the meeting. Sharon Weinstein and Judith Turner seconded the motion. Unanimous approval.

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Audio recordings of DUR meetings are available online at:

[https://www.youtube.com/watch?v=FEnS34V2KmA&list=PLDnbxUh8egJ\\_3S1LwAaip10IYvP5Gf84Y](https://www.youtube.com/watch?v=FEnS34V2KmA&list=PLDnbxUh8egJ_3S1LwAaip10IYvP5Gf84Y)