

Iowa Medicaid Drug Utilization Review (DUR) Commission

August 7, 2024

**Location†: Grimes State Office Building
Room B100
400 E 14th Street
Des Moines, IA 50319
No Virtual Option**

Time: 9:30 a.m. – 1:30 p.m. CT

Tentative Agenda

1. Welcome & Introductions
 - a) Commission Members and Staff
2. Commission Business
 - a) Approval of the May 1, 2024 Meeting Minutes
 - b) May 2024 DUR Recommendation Letter to DHHS
 - c) Annual Chair and Vice Chair Elections
 - d) Annual Conflict of Interest Disclosure
 - e) Follow-Up from Previous Meeting(s)
3. Iowa Medicaid Pharmacy Update
4. Prevalence Report Summaries
 - a) Iowa Total Care
 - b) Wellpoint Iowa
 - c) Molina Healthcare of Iowa
 - d) Fee-for-Service
 - e) Comparative Summary
5. Public Comment* (**See attached Conflict of Interest Disclosure**)
 - Verbal - Must **pre-register** to provide verbal public comment and submit a completed conflict of interest disclosure. Five (5) minute maximum limit.
 - Written – Must submit written comments and a completed conflict of interest disclosure.
 - **All submissions must be received no later than 4:30 p.m. CST July 31, 2024.**
 - Email to pba_iadur@optum.com
6. Retrospective DUR
 - a) Data Presentation(s)
 - i. Stimulant Medication Utilization without Supporting Diagnosis
 - ii. Non-Selective Beta-Blockers in Asthma
 - b) Proposal(s)
 - i. Monitoring Prescribing of Antipsychotic Medications in Adults
 - ii. Triple Therapy – Opioid, Benzodiazepine, and Muscle Relaxant
 - c) Commission Recommendations for Retrospective DUR Agenda Topics
7. Break (10 minutes)

8. Prior Authorization

- a) Biologicals for Inflammatory Bowel Disease – Initial Review
- b) Incretin Mimetics for Non-Diabetes Indications – Initial Review
- c) Janus Kinase Inhibitors – Initial Review
- d) Maralixibat (Livmarli) – Initial Review
- e) Omalizumab (Xolair) – Initial Review
- f) Oral Glucocorticoids for Duchenne Muscular Dystrophy – Initial Review
- g) Tralokinumab (Adbry) - Initial Review
- h) Zuranolone (Zurzuvae) – Initial Review
- i) Antidiabetic Non-Insulin Agents – Second review
- j) Biologicals for Axial Spondyloarthritis – Second Review
- k) Biologicals for Plaque Psoriasis – Second Review

9. Miscellaneous

- a) DUR Digest Vol. 36, No. 2 – Second Review

10. MedWatch

[FDA Approves New Treatment for Uncomplicated Urinary Tract Infections](#)

[FDA alerts health care professionals of pregnancy problems associated with thiopurines](#)

11. Adjournment

*Individuals attending meetings of the DUR Commission shall have an opportunity to address the Commission. This opportunity will be granted once during the open portion of the meeting. In order to accommodate all interested parties, all speakers are requested to limit their comments to **5 minutes or less**. If you represent a drug manufacturer as an employee, as a contractor, as a member of the manufacturer's Speaker Bureau, or by any other means, we expect you to cover your individual product or entire product line in that five-minute time frame. Speakers who represent multiple manufacturers will share their 5 minutes with the other manufacturer representative(s) whose product they are speaking on. Any individual speaking, presenting, or providing written comment for virtual meetings must complete a conflict of interest disclosure. Completed forms must be provided to DUR staff at least one week prior to the scheduled meeting at pba_iadur@optum.com. Speakers who fail to submit or turn in their conflict-of-interest disclosure form late will have their request to speak denied or will not have their comments shared.

‡ Always check the DUR website for updates regarding meeting location, as this can change after the initial posting of the agenda.

www.iadur.org

For more information, contact the DUR Project Coordinator, Pamela Smith, R.Ph., at pba_iadur@optum.com or (515) 974-3131.

Next Meeting
November 6, 2024
Location: TBD

Iowa Medicaid Drug Utilization Review (DUR) Commission
Public Comment Conflict of Interest Disclosure

The Iowa Medicaid Drug Utilization Review (DUR) Commission and persons speaking or providing written comment to the Iowa Medicaid DUR Commission are asked to disclose any financial or other affiliation with organizations that may have a direct or indirect interest in the business in front of the Commission. Those persons providing public comment to the DUR Commission are asked to disclose potential conflicts on this form. DUR Commission members disclose potential conflicts each year on a separate form.

A financial interest may include, but is not limited to, being a shareholder in the organization, being on retainer with the organization, having research or honoraria paid by the organization, or receiving other forms of remuneration from an organization. An affiliation may include holding a position on an advisory committee or some other role or benefit to a supporting organization.

The existence of such financial relationships or affiliation does not necessarily constitute a conflict of interest and will not preclude an individual from participating or addressing the DUR Commission. This policy is intended to openly identify any potential conflicts so that the DUR Commission members and the public are able to form their own judgments.

Please indicate type of public comment:☐ **Verbal Comment**☐ **Written Comment**

Your responses below will be read out loud before your verbal presentation or supplied with your written public comment to the DUR Commission.

Please check the box of the statement that best applies.

☐ **Statement of No Conflicts**

I do not have a current or recent (within the last 12 months) financial arrangement or affiliation with any organization that may have a direct interest in the business before the Iowa Medicaid DUR Commission.

☐ **Disclosures**

I do have a financial interest, affiliation or am employed by an organization that may have a direct interest in the business before the Iowa Medicaid DUR Commission.

☐ **I refuse to state my affiliation(s)**

Organization (List additional on the back of the form.)	Role/Relationship (List additional on the back of the form.)

(print name)

(signature)

(date)