



## Division of Medical Services Pharmacy Program

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**AGENDA**  
**ARKANSAS MEDICAID DUR BOARD QUARTERLY DRUG UPDATE**  
**OCTOBER 17, 2018, 9:00 A.M. – 12:00 P.M.**  
**LOCATION OF MEETING IS MAGELLAN MEDICAID ADMINISTRATION OFFICE**  
**#1 Allied Drive, Suite 1120**  
**BUILDING #1**  
**Little Rock, AR 72202**

**I. OUTSIDE SPEAKERS**

*DUR Board Bylaws, Section 7.02, allows **Outside speakers** at the meeting-- Outside speakers may request to speak on a topic that is posted on the upcoming DUR Board meeting agenda. **Speakers must submit the request in writing to the Chair of the DUR Board to speak at the meeting on a specific topic.** All speakers are required to **submit an emailed copy** of the public comments to the Chair of the DUR Board that he/she will present the day of the meeting. The public comments must be received by the Chair of the DUR Board **at least 2 weeks prior to the DUR Board meeting date.** Public comments at the DUR Board meeting are **limited to a total comment time of five (5) minutes per drug.** If there is more than one speaker for the same drug, the speakers must **split the total comment time of five (5) minutes on that drug.***

**II. UNFINISHED / OLD BUSINESS AND GENERAL ORDERS / AND PROPOSALS TO REVISE PREVIOUS CRITERIA**

- A. ANNOUNCEMENTS
- B. APPROVAL OF THE MINUTES FROM THE PREVIOUS MEETING.
- C. UPDATE ON SYSTEM EDITS, IMPLEMENTATIONS, OR FOLLOW-UP ITEMS.
  - 1) Follow-up items from JULY 18, 2018 DUR Board Quarterly Drug Update: None
  - 2) Implementation information from JULY 18, 2018 DUR Board Quarterly Drug Update and AUGUST 8, 2018 Preferred Drug List (PDL) Drug Review Update
- D. PROPOSED CHANGES TO EXISTING CRITERIA and EDITS, INCLUDING POINT OF SALE (POS) CRITERIA, MANUAL REVIEW PA CRITERIA, OR CLAIM EDITS:
  - 1) Manual Review Criteria Proposal for non-preferred drug SPIRIVA® (tiotropium bromide) RESPIMAT® METERED INHALATION SPRAY for ASTHMA

**III. NEW BUSINESS**

- A. PROPOSED NEW CLINICAL POINT OF SALE EDITS WITH OR WITHOUT ADDITIONAL CLAIM EDITS  
NONE
- B. NEW MANUAL REVIEW EDITS WITH OR WITHOUT ADDITIONAL CLAIM EDITS:
  - 1) ORLISSA™ (elagolix) 150 mg and 200 mg TABLET
  - 2) DOPTELET® (avatrombopag) TABLET 20 mg & MULPLETA® (lusutrombopag) 3 mg TABLET, film coated
  - 3) SIKLOS® (hydroxyurea) 100 mg TABLET
  - 4) MEKTOVI® (binimetinib) 15 mg TABLET & BRAFTOVI™ (encorafenib) 50 mg and 75 mg CAPSULE
  - 5) LOKELMA™ (sodium zirconium cyclosilicate) 5 gm and 10 gm POWDER PACK
- C. PROPOSED NEW CLAIM EDITS (QUANTITY, DAILY DOSE, ACCUMULATION, GENDER, AGE):  
NONE
- D. ProDUR Report UPDATE
- E. RDUR Report UPDATE