

**NOTICE OF NEW HAMPSHIRE MEDICAID FEE FOR SERVICE
DRUG UTILIZATION REVIEW BOARD
PUBLIC HEARING
March 12, 2019**

The New Hampshire Drug Utilization Review (DUR) Board invites you to attend a public hearing at 2:00 p.m., on March 12, 2019 at the Philbrook Building, 121 South Fruit Street , Concord, NH. The DUR meeting will immediately follow this public hearing.

The purpose of the public hearing is to solicit information and provide an opportunity for the public to present its views regarding the NH Medicaid Fee for Service pharmacy prior authorization criteria and preferred drug list (PDL).

The public hearing will begin at 2:00 p.m. and end no later than 3:00 p.m. The DUR meeting will begin at or before 3:00 p.m., upon completion of public comments. The public is invited to present oral comments regarding the proposed prior authorization criteria and PDL. Members of the public shall notify the Department of Health and Human Services (DHHS) at least 48 hours in advance of the public hearing of their intent to comment at the public hearing. Comments will be limited to no longer than five (5) minutes per person and will be limited to the items on the agenda as they relate to the prior authorization criteria and PDL.

Written material may also be submitted by the public for DUR Board consideration if received by DHHS at least 48 hours in advance of the meeting and may not exceed five (5) pages in length.

If accommodations are needed for communication access such as interpreters, CART (captioning), assistive listening devices, or other auxiliary aids and/or services, please contact Nancy Plourde at 603-271-9422 by March 5, 2019. At least 5 business days advance notice is requested in order to assure availability; requests made fewer than 5 days prior to the event will attempt to be accommodated but cannot be guaranteed.

**DRUG UTILIZATION REVIEW BOARD MEETING
March 12, 2019
Meeting Agenda**

- I. Introductions and Welcome to Board Members
- II. Old Business
 - A. Minutes – 9/27/18 review
- III. New Business

- A. DUR Business Operations
 - 1. Overview of Drug Utilization Patterns for the New Hampshire Medicaid Fee-for Service Program
 - a. Prospective DUR Reports
 - b. Utilization Reports
 - c. Retrospective DUR Reports

- B. Review of Current Clinical Prior Authorization Criteria with Proposed Changes
 - 1. Allergen Extract Criteria
 - 2. Anti-fungal for Onychomycosis
 - 3. Hematopoietic Agents
 - 4. Hepatitis C
 - 5. Long-acting Opioids
 - 6. Lyrica
 - 7. Morphine Milligram Equivalent (MME)
 - 8. Pulmonary Arterial Hypertension (Phosphodiesterase Type 5 (PDE05) Inhibitors Only)
 - 9. Short Acting Fentanyl Analgesics
 - 10. Systemic Immunomodulators

- C. Review of Current Clinical Prior Authorization Criteria with No Proposed Changes
 - 1. Antiobesity
 - 2. Asthma/Allergy Immunomodulators
 - 3. Atopic Dermatitis
 - 4. Brand Name Multiple Source Prescription Drugs
 - 5. Direct Renin Inhibitors & Combinations
 - 6. Huntington's Disease
 - 7. Legend Topical NSAIDs
 - 8. New Drug Product
 - 9. Oral NSAIDs Legend
 - 10. Proton Pump Inhibitors
 - 11. Spinraza
 - 12. Syndros

- D. Proposal of New Preferred Drug List Therapeutic Class
 - 1. Ophthalmics, Glaucoma Agents
 - a. Rho Kinase inhibitor
 - 2. Antimigraine Agents
 - a. Calcitonin gene-related peptide (CGRP) inhibitors

- E. Proposal of New Clinical Prior Authorization Criteria
 - 1. Carisoprodol & combination
 - 2. Rho kinase Inhibitor (Rhopressa)
 - 3. Calcitonin Gene-Related Peptide (CGRP) Inhibitors (Aimovig, Ajovy, Emgality)

IV. Adjourn

Further information regarding the agenda items may be obtained after February 27, 2019. Notice of intent to testify at the public hearing, and/or submittal of written comments, should be directed to Nancy Plourde, NH Department of Health and Human Services, 129 Pleasant Street, Concord, NH, 03301, (603) 271-9422, or e-mail at: nancy.plourde@dhhs.nh.gov