

**NOTICE OF NEW HAMPSHIRE MEDICAID FEE FOR SERVICE  
DRUG UTILIZATION REVIEW BOARD  
PUBLIC HEARING  
September 22, 2026**

The New Hampshire Drug Utilization Review (DUR) Board invites you to attend a public hearing at 1:00 p.m., on September 22, 2026 in the **Brown Building Conference Room 468** and via Teams Webinar. The DUR meeting will immediately follow this public hearing. The Teams Webinar information will be available 1 week prior to the DUR meeting at <https://nh.primetherapeutics.com/>. **The meeting location may require a change due to ongoing construction in the Brown Building. If you plan to attend in person, verify the official meeting location with the DUR announcement on the main page at <https://nh.primetherapeutics.com/> 1 week prior to the meeting.**

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.

The public hearing will begin at 1:00 p.m. and end no later than 2:00 p.m. The DUR meeting will begin at or before 2:00 p.m., upon completion of public comments. The public is invited to present oral comments regarding the proposed prior authorization criteria. 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. The public comment hearing is scheduled for an hour; therefore speakers will be limited to 3 – 5 minutes depending on the number of preregistered speakers. Speaking material will be limited to the items on the agenda.

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 Margaret ‘Peg’ Clifford at (603) 271-9098 by September 8, 2026. 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  
September 22, 2026  
Meeting Agenda**

- I. Introductions and Welcome to Board Members
- II. Old Business
  - A. Minutes 04/21/2026 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. Adenosine Triphosphate Citrate-Lyase Inhibitor | 7. Dupixent® (dupilumab)          |
| 2. Asthma/Allergy Immunomodulator                 | 8. Human Growth Hormones          |
| 3. Bowel Disorders/GI Motility, Chronic           | 9. Imcivree™ (setmelanotide)      |
| 4. Brand Name Multisource Drug                    | 10. MACE-Wegovy®                  |
| 5. Casgevy® (exagamglogene autotemcel)            | 11. MASH                          |
| 6. CNS Stimulants (ADHD.ADD)                      | 12. Oral Isotretinoin             |
|                                                   | 13. Primary Biliary Cholangitis   |
|                                                   | 14. Spinal Muscular Atrophy (SMA) |
|                                                   | 15. Systemic Immunomodulators     |

C. Review of Current Clinical Prior Authorization Criteria with No Proposed Changes

- |                                                    |                                                          |
|----------------------------------------------------|----------------------------------------------------------|
| 1. Benign Prostatic Hyperplasia (BPH)              | 8. Niemann-Pick                                          |
| 2. Buprenorphine/Naloxone and Buprenorphine (Oral) | 9. Psychoactive Meds for Children under 5                |
| 3. Carisoprodol and Combination Medication         | 10. Psychotropic Meds Duplicate Therapy Peds 6 and Above |
| 4. Kebilidi™ (eladocogene exuparvovec-tneq)        | 11. Roctavian® (valoctocogene roxaparvovec-rvox)         |
| 5. Methadone                                       | 12. Spravato® (esketamine)                               |
| 6. Morphine Milligram Equivalent (MME)             | 13. Verquvo® (vericiguat)                                |
| 7. New Drug Product                                | 14. Vuity® (pilocarpine)                                 |

D. Proposal of Criteria to Retire

1. Familial Chylomicronemia Syndrome
2. Second-Line Antifungal

E. Proposal of New Clinical Prior Authorization Criteria

1. Apolipoprotein C-III Targeted (APOC3)
2. Loargys (pegzilarginase-nbln)
3. Nereus™ (tradipitant)

IV. Adjourn

Further information regarding the agenda items may be obtained after September 8, 2026. Notice of intent to testify at the public hearing, and/or submittal of written comments, should be directed to Margaret 'Peg' Clifford, NH Department of Health and Human Services, 129 Pleasant Street, Concord, NH, 03301, (603) 271-9098, or e-mail at: [margaret.clifford@dhhs.nh.gov](mailto:margaret.clifford@dhhs.nh.gov).