Oklahoma Health Care Authority

Drug Utilization Review Board
(DUR Board)
Meeting – November 12, 2026 @ 4:00pm
at the
Oklahoma Health Care Authority (OHCA)
4345 N. Lincoln Blvd.
Oklahoma City, Oklahoma 73105

NOTE: ***The DUR Board will meet at 4:00pm at OHCA (see address above). There will be Zoom access to this meeting; however, Zoom access will be set up in view-only mode with no voting, speaking, video, or chat box privileges. Zoom access will allow for viewing of the presentation slides as well as audio of the presentations and discussion during the meeting; however, the DUR Board meeting will not be delayed or rescheduled due to any technical issues that may arise.***

AGENDA

Discussion and action on the following items:

Items to be presented by Dr. Haymore, Chairman:

1. **Call to Order**

A. Roll Call – Dr. Wilcox

DUR Board Members:

Dr. Cassidy Blaiss –	participating in person
Ms. Jennifer Boyett –	participating in person
Dr. Christen Ground –	participating in person
Dr. Bret Haymore –	participating in person
Dr. Bethany Holderread –	participating in person
Dr. Matt John –	participating in person
Dr. Craig Kupiec –	participating in person
Dr. Lee Muñoz –	participating in person
Dr. Edna Patatanian –	participating in person

Viewing Access Only via Zoom:

Please register for the meeting at:
https://oklahoma.zoom.us/webinar/register/WN_eBUt3qLzSkycOdDyUyZx5g
After registering, you will receive a confirmation email containing information about joining the webinar.

Or join by phone:
Dial: +1-602-753-0140 or +1-669-219-2599
Webinar ID: 910 6408 1365
Passcode: 44589980

Public Comment for Meeting:

- Speakers who wish to sign up for public comment at the OHCA DUR Board meeting may do so in writing by visiting the DUR Board page on the OHCA website at www.oklahoma.gov/ohca/about/boards-and-committees/drug-utilization-review/dur-board and completing the Speaker Registration Form. Completed Speaker Registration forms should be submitted to DURPublicComment@okhca.org. Forms must be received after the DUR Board agenda has been posted and no later than 24 hours before the meeting.
- The DUR Board meeting will allow public comment and time will be limited to 40 minutes total for all speakers during the meeting. Each speaker will be given 5 minutes to speak at the public hearing. If more than 8 speakers properly request to speak, time will be divided evenly.
- Only 1 speaker per manufacturer will be allowed.
- Any speakers who sign up for public comment must attend the DUR Board meeting in person at OHCA (see above address). Public comment through Zoom will not be allowed for the DUR Board meeting.
- In lieu of speaking at the DUR Board meeting, written correspondence by members or providers may be submitted to DURPublicComment@okhca.org. Other written correspondence is not permitted.

Items to be presented by Dr. Haymore, Chairman:

2. **Public Comment Forum**
   A. Acknowledgement of Speakers for Public Comment

Items to be presented by Dr. Haymore, Chairman:

3. **Action Item – Approval of DUR Board Meeting Minutes – See Appendix A**
   A. September 9, 2026 DUR Board Meeting Minutes
   B. September 9, 2026 DUR Board Recommendations Memorandum
   C. October 14, 2026 DUR Board Meeting Minutes
   D. October 14. 2026 DUR Board Recommendations Memorandum

Items to be presented by Dr. Haymore, Chairman:

4. **Action Item – Approval of 2027 DUR Board Meeting Dates – See Appendix B**

Non-presentation items reviewed by Dr. Grimes, Dr. Haymore, Chairman:

5. **Update on Medication Coverage Authorization Unit – See Appendix C**
   A. Pharmacy Help Desk Activity for October 2026
   B. Medication Coverage Activity for October 2026

Items to be presented by Dr. Moss, Dr. Haymore, Chairman:

6. **Journavx (Suzetrigine) Utilization Update – See Appendix D**
   A. Introduction

B. Utilization of Journavx
C. Utilization Trends of Journavx in the SoonerCare Population
D. Conclusions
E. College of Pharmacy Recommendations

Items to be presented by Dr. Wilson, Dr. Haymore, Chairman:

7. **Action Item – Vote to Prior Authorize Cetirizine Oral Solution Unit Dose Cups (UDCs) and Update the Approval Criteria for the Antihistamine Medications (Systemic) – See Appendix E**

A. Cost Comparison: Cetirizine Products
B. College of Pharmacy Recommendations

Items to be presented by Dr. DeRemer, Dr. Haymore, Chairman:

8. **Action Item – Vote to Update the Approval Criteria for the Constipation and Diarrhea Medications – See Appendix F**

A. Market News and Updates
B. College of Pharmacy Recommendations

Items to be presented by Dr. O'Halloran, Dr. Haymore, Chairman:

9. **Action Item – Vote to Update the Approval Criteria for the Anticoagulants and Platelet Aggregation Inhibitors – See Appendix G**

A. College of Pharmacy Recommendations

Items to be presented by Dr. Moss, Dr. Haymore, Chairman:

10. **Action Item – Vote to Prior Authorize Epioxa HD/Epioxa (Riboflavin 5'-Phosphate Ophthalmic Solution) and Lumvoa (Veligrotug-vvze) and Update the Approval Criteria for the Various Ophthalmic Medications – See Appendix H**

A. Market News and Updates
B. Lumvoa (Veligrotug-vvze) Product Summary
C. College of Pharmacy Recommendations

Items to be presented by Dr. Sinko, Dr. Haymore, Chairman:

11. **Action Item – Vote to Prior Authorize Beizray (Docetaxel), Beizray Kit (Docetaxel/Albumin), Docivyx (Docetaxel), Inluriyo (Imlunestrant), and Veppanu (Vepdegestrant) and Update the Approval Criteria for the Breast Cancer Medications – See Appendix I**

A. Market News and Updates
B. Product Summaries
C. Cost Comparison: Trastuzumab Products
D. College of Pharmacy Recommendations

Items to be presented by Dr. Sinko, Dr. Haymore, Chairman:

12. **Action Item – Vote to Prior Authorize Decnupaz (Pivekimab Sunirine-pvzy), Jakafi XR [Ruxolitinib Extended-Release (ER)], and Mimrylo (Rusfertide)**

and Update the Approval Criteria for the Myeloproliferative Neoplasm (MPN) Medications – See Appendix J

A. Market News and Updates
B. Product Summaries
C. College of Pharmacy Recommendations

Items to be presented by Dr. Wilson, Dr. Haymore, Chairman:

13. **Action Item – Vote to Prior Authorize Icotyde (Icotrokinra), Immgolis (Golimumab-sldi), Immgolis Intri (Golimumab-sldi), Lisraya (Brepocitinib), and Zimrixby (Rituximab-cdxx) and Update the Approval Criteria for the Targeted Immunomodulator Agents – See Appendix K**

A. Market News and Updates
B. Product Summaries
C. Cost Comparison: Rituximab Products
D. College of Pharmacy Recommendations

Items to be presented by Dr. Moss, Dr. Haymore, Chairman:

14. **Action Item – Vote to Prior Authorize Tonmya [Cyclobenzaprine Sublingual (SL) Tablet] and Update the Approval Criteria for the Fibromyalgia Medications – See Appendix L**

A. Market News and Updates
B. Tonmya (Cyclobenzaprine SL Tablet) Product Summary
C. College of Pharmacy Recommendations

Items to be presented by Dr. O'Halloran, Dr. Haymore, Chairman:

15. **Action Item – Vote to Prior Authorize Aqvesme (Mitapivat) and Update the Approval Criteria for the Anemia Medications – See Appendix M**

A. Market News and Updates
B. Aqvesme (Mitapivat) Product Summary
C. College of Pharmacy Recommendations

Items to be presented by Dr. O'Halloran, Dr. Haymore, Chairman:

16. **Action Item – Annual Review of Rhapsido (Remibrutinib) – See Appendix N**

A. Current Prior Authorization Criteria
B. Utilization of Rhapsido (Remibrutinib)
C. Prior Authorization of Rhapsido (Remibrutinib)
D. Market News and Updates
E. College of Pharmacy Recommendations
F. Utilization Details of Rhapsido (Remibrutinib)

Items to be presented by Dr. Sinko, Dr. Haymore, Chairman:

17. **Annual Review of Multiple Myeloma Medications and 30-Day Notice to Prior Authorize Sarclisa Escena (Isatuximab-irfc) and Zenbexus (Iberdomide) – See Appendix O**

A. Current Prior Authorization Criteria

B. Utilization of Multiple Myeloma Medications
C. Prior Authorization of Multiple Myeloma Medications
D. Market News and Updates
E. Product Summaries
F. College of Pharmacy Recommendations
G. Utilization Details of Multiple Myeloma Medications

Items to be presented by Dr. Wilson, Dr. Haymore, Chairman:

18. Annual Review of Atopic Dermatitis (AD) Medications and 30-Day Notice to Prior Authorize Adquey (Difamilast 1% Ointment) – See Appendix P

A. Current Prior Authorization Criteria
B. Utilization of AD Medications
C. Prior Authorization of AD Medications
D. Market News and Updates
E. Adquey (Difamilast 1% Ointment) Product Summary
F. Cost Comparison: Topical Products
G. College of Pharmacy Recommendations
H. Utilization Details of AD Medications

Items to be presented by Dr. DeRemer, Dr. Haymore, Chairman:

19. Annual Review of Bone Density Regulators and 30-Day Notice to Prior Authorize Aukelso (Denosumab-kyqq), Bosaya (Denosumab-kyqq), Enoby (Denosumab-qbde), Jubereq (Denosumab-desu), Osvyrti (Denosumab-desu), and Xtrenbo (Denosumab-qbde) – See Appendix Q

A. Current Prior Authorization Criteria
B. Utilization of Bone Density Regulators
C. Prior Authorization of Bone Density Regulators
D. Market News and Updates
E. College of Pharmacy Recommendations
F. Utilization Details of Bone Density Regulators

Items to be presented by Dr. Moss, Dr. Haymore, Chairman:

20. Annual Review of Ophthalmic Anti-Inflammatory Products and 30-Day Notice to Prior Authorize Byqlovi (Clobetasol 0.05% Suspension) – See Appendix R

A. Current Prior Authorization Criteria
B. Utilization of Ophthalmic Anti-Inflammatory Products
C. Prior Authorization of Ophthalmic Anti-Inflammatory Products
D. Market News and Updates
E. Byqlovi (Clobetasol 0.05% Suspension) Product Summary
F. College of Pharmacy Recommendations
G. Utilization Details of Ophthalmic Anti-Inflammatory Products

Items to be presented by Dr. O'Halloran, Dr. Haymore, Chairman:

21. **Annual Review of Asthma and Chronic Obstructive Pulmonary Disease (COPD) Maintenance Medications and 30-Day Notice to Prior Authorize Beclomethasone Dipropionate HFA, Exdensur (Depemokimab-ulaa), and Trimbow (Beclomethasone/Formoterol/Glycopyrrolate) – See Appendix S**
    A. Current Prior Authorization Criteria
    B. Utilization of Asthma and COPD Maintenance Medications
    C. Prior Authorization of Asthma and COPD Maintenance Medications
    D. Market News and Updates
    E. Exdensur (Depemokimab-ulaa) Product Summary
    F. College of Pharmacy Recommendations
    G. Utilization Details of Asthma and COPD Maintenance Medications

Items to be presented by Dr. Wilson, Dr. Haymore, Chairman:

22. **Annual Review of Gonadotropin-Releasing Hormone (GnRH) Medications (Non-Oncology) and 30-Day Notice to Prior Authorize Vobrig (Leuprolide) – See Appendix T**
    A. Current Prior Authorization Criteria
    B. Utilization of GnRH Medications
    C. Prior Authorization of GnRH Medications
    D. Market News and Updates
    E. Vobrig (Leuprolide) Product Summary
    F. College of Pharmacy Recommendations
    G. Utilization Details of GnRH Medications

Non-presentation items reviewed by Dr. O'Halloran, Dr. Haymore, Chairman:

23. **Annual Review of Brinsupri (Brensocatib) – See Appendix U**
    A. Current Prior Authorization Criteria
    B. Utilization of Brinsupri (Brensocatib)
    C. Prior Authorization of Brinsupri (Brensocatib)
    D. Market News and Updates
    E. College of Pharmacy Recommendations
    F. Utilization Details of Brinsupri (Brensocatib)

Non-presentation items reviewed by Dr. Grimes, Dr. Haymore, Chairman:

24. **U.S. Food and Drug Administration (FDA) and Drug Enforcement Administration (DEA) Updates – See Appendix V**

Non-presentation items reviewed by Dr. Adams, Dr. Haymore, Chairman:

25. **Future Business* (Upcoming Product and Class Reviews)**
    A. Antidepressants
    B. Antifungal Medications (Systemic)
    C. Antihyperlipidemics
    D. Complement Inhibitors and Miscellaneous Immunomodulatory Agents
    E. Glycogen and Lysosomal Storage Disease Medications

F. Skin Cancer Medications

*Future product and class reviews subject to change.

26. Adjournment

NOTE: An analysis of the atypical [Aged, Blind, and Disabled (ABD)] patient subgroup of the Oklahoma Medicaid population has been performed pertaining to all recommendations included in this DUR Board meeting packet to ensure fair and knowledgeable deliberation of the potential impact of the recommendations on this patient population.

NOTE: Oklahoma Medicaid transitioned from a fee-for-service (FFS) pharmacy benefit to a managed care pharmacy benefit for most members on April 1, 2024. At that time, the majority of SoonerCare members were transitioned to one of the three managed care SoonerSelect plans: Aetna, Humana, or Oklahoma Complete Health. SoonerSelect data has been provided to the College of Pharmacy and has been used in analyses throughout this DUR Board meeting packet. The data included in this DUR Board meeting packet combines FFS and managed care utilization data. The managed care utilization and prior authorization (PA) data reported in this packet is based solely on the data provided by the SoonerSelect plans.