Minutes
Drug Utilization Review Board Meeting
DATE: June 11, 2025

Meeting Purpose: Quarterly Drug Utilization Board Meeting
Meeting opened at 6:00 p.m. by Laura Spring, MD

The meeting was conducted under Massachusetts Public Meeting Law requirements.

Attendance: Diane Bruessow; Mehmet Furkan Burbak, MD; Melissa Coyle, PharmD; Timothy Fensky, RPh; Colleen Labelle, MSN, RN-BC, CARN; Jaqueline Gagnon, RPh; Lori Lewicki, RPh; Mirembe Reed, Pharm.D.; Laura Spring, MD; Karen Ryle, MS, RPh; Christy Stine, MD, PhD

Absent:

Agenda Items:
- Welcome and Introductory Remarks
- Sickle Cell Disease Medication Therapy Management Quality Assurance Analysis
- Antipsychotic Clinical Management Update
- MHDL Update
- DUR Operational Update
- MassHealth Update
- Open Forum
- Intravenous Iron Agents and Chelators Quality Assurance Analysis

Agenda Item	Discussion	Conclusions/Follow-up
Sickle Cell Disease Medication Therapy Management Quality Assurance (QA)	**Sickle Cell Disease Medication Therapy Management (MTM) Quality Assurance Analysis by Dr. Megan Granahan and Dr. Edward Pudim** This analysis evaluated the implementation of, and the outcomes related to, a medication therapy management program focused on sickle cell disease.	**Follow-up** Informational/Advisory
Action	Discussion • Provided background information on sickle cell disease • Reviewed sickle cell disease consensus guideline recommendations and sickle cell disease medication treatment efficacy	**Conclusion** The board reviewed and accepted the presentation.

Agenda Item	Discussion	Conclusions/Follow-up
	• Described the MassHealth MTM program goals, enrollment process, and workflow • Assessed enrollment and operations data from the first nine months of the MTM program • Summarized member action items and provider recommendations identified and implemented during the first nine months of the MTM program • Discussed ongoing efforts to improve the program improvement and report outcomes Conclusions • Sickle cell disease is a group of inherited blood disorders of varying clinical severity based on the disease genotype, patient age, complications experienced, comorbid conditions, and the patient's psychosocial health. • Hydroxyurea is still the first-line treatment for patients who require sickle cell disease pharmacologic treatment in addition to the preventive care recommended for all patients with sickle cell disease. • The MassHealth MTM program aims to educate members about their medications; resolve drug-related problems; collaborate with providers to optimize medication regimens; and improve health outcomes by achieving these goals. • To date, the MTM program has enrolled 353 unique members and completed comprehensive medication reviews (CMRs) with 99 of those members.	

Agenda Item	Discussion	Conclusions/Follow-up
Antipsychotic Clinical Management Update	**<u>Antipsychotic Clinical Management Update by Dr. Amy Dionne</u>** This was an overview of an evaluation of current medical literature, and provided a brief preview of upcoming management changes to the therapeutic class.	**<u>Follow-up</u>** Informational/Advisory

Agenda Item	Discussion	Conclusions/Follow-up
Action	Discussion • Discussed the antipsychotic availability and FDA-approved indications • Discussed the overview of clinical guidelines for adult patients • Assessed current management strategy • Discussed current utilization trends • Discussed the overview of changes Conclusions • A wide variety of antipsychotics are available without prior authorization. • Clinical guidelines vary in providing recommendations for use of specific agents and generally do not recommend one agent over another. • Utilization demonstrates significant generic utilization, but overall spending remains higher for branded agents. • By encouraging the utilization of less costly agents that are supported by clinical guidelines and demonstrate similar efficacy and tolerability, MassHealth can promote cost-effective use of antipsychotics.	**Conclusion** The board reviewed and accepted the presentation.

Agenda Item	Discussion	Conclusions/Follow-up
MassHealth Drug List (MHDL) Update	**MHDL Update by Dr. Bon Van** MHDL overview included new additions, changes in PA status, and related attachment updates to be implemented with a recent publication rollout.	**Follow-up** Informational/Advisory

Action	Discussion
	• Effective July 1, 2025:
	  ○ There were 14 additions to the MHDL; and
	  ○ There were two changes in PA status.
	• There were several changes to Coverage Status for Brand Name Preferred Over Generic List; 90-day Initiative; and Updates and Changes to the MHDL.
		Conclusion
		The board reviewed and accepted the presentation.

Agenda Item	Discussion	Conclusions/Follow-up
MassHealth Update	**MassHealth Update by Dr. Kimberly Lenz** MassHealth Update is a summary of recent developments in MassHealth in the context of pharmacy, managed care, or public health.	**Follow-up** Informational/Advisory
Action	Discussion • Reviewed current clinical program initiatives • Provided direct negotiation status update • Discussed operational updates	**Conclusion** The board reviewed and accepted the presentation.

Agenda Item	Discussion	Conclusions/Follow-up
Open Forum	**Open Forum**	**Follow-up** Informational/Advisory

Agenda Item	Discussion	Conclusions/Follow-up
Intravenous Iron Agents and Chelators Quality Assurance (QA)	**Intravenous Iron Agents and Chelators Quality Assurance Analysis by Dr. Edward Pudim** This was an overview of an evaluation of current medical literature and provided a brief overview of upcoming management changes to the therapeutic class.	**Follow-up** Informational/Advisory
Action	Discussion • Summarized recent updates to relevant clinical consensus guidelines • Described current class management • Evaluated the utilization, amount spent, and PAs for agents in this class • Reviewed various subanalyses completed as part of this QA analysis • Discussed recommended changes to MassHealth management of this class	**Conclusion** The board reviewed and accepted the presentation.

Agenda Item	Discussion	Conclusions/Follow-up

	Conclusions
	• Selection between an oral or IV iron agent should be based on several varied factors, including cost, individual preference, tolerability, efficacy, and the dosing schedule.
	• Recent updates to clinical consensus guidelines continue to support treatment with either oral or IV iron agents, although IV iron agents that can be administered as a single total dose infusion may be preferred in some cases.
	• There is significant utilization of iron agents though the medical and pharmacy benefits; trends are consistent with the assessment from last year.
	• Subanalyses were completed to review potential changes needed to address IV iron agent use during pregnancy and Venofer® (iron sucrose) shortages.
	• Recommended changes to MassHealth management of this class include:
	  ○ Removing the PA requirement for Feraheme® (ferumoxytol), Injectafer® (ferric carboxymaltose), and Monoferric® (ferric derisomaltose); and
	  ○ Adding a PA requirement for Exjade® (deferasirox) tablets and Jadenu® (deferasirox) granule packets.	

Meeting adjourned at 8:00 p.m.

Respectfully submitted by Mylissa Price

Date: _____