

Arkansas Medicaid PAD Subcommittee Meeting Minutes

Date / Time:	March 11, 2026 12:00-1:00 PM Central	Location:	Teams webinar	
Chair:	Cindi Pearson, Pharm.D.	Reports:	Brooke Owens, Pharm.D. Prime Therapeutics	
Attendance	Panelist (voting members)		Panelist (non-voting members)	Organization
	X Ashley Crawley, Pharm.D.	X	Barry Fielder, Pharm.D.	ATC
	X Gabriella Douglass, Pharm.D.		Lora Ertmoed, Pharm.D.	Empower
	X William Golden, M.D.	X	Lauren Jimerson, Pharm.D.	Summit
	X Melissa Max, Pharm.D.	X	Jessica Lawson, Pharm.D.	CareSource
	Christopher Smith, M.D.		Ifeyinwa Onowu, Pharm.D.	CareSource
	Panelist (non-voting) Prime Therapeutics	X	Cindi Pearson, Pharm.D.	DHS, DUR Chair
	X Karen Evans, P.D.		Cynthia Neuhofel, Pharm.D.	DHS pharmacy
	X Jeniffer Martin, Pharm.D.	X	Elizabeth Pitman, J.D.	DHS DMS director
	X Lesley Irons, Pharm.D.	X	Shane David, Pharm.D.	ADH advisor
	X Linsey Gillam, Pharm.D.			
	X Alyson Greenwood, Pharm.D.			
	X Brooke Owens, Pharm.D.			
X Allison Sweeney, Pharm.D.				
Call to order	Meeting held virtually by Teams webinar. A quorum was present, and the chair called the meeting to order at 12:08 pm. No members had any conflicts of interest on agenda items. Dr. Pearson and Dr. Owens do not have any conflicts.			
Public Comments	1. Andrew Delgado, PharmD, PhD with Bristol Myers Squibb on Opdivo Qvantig			
Minutes	Motion to approve the December 2025 DUR Subcommittee meeting minutes as presented was made by Dr. Crawley; second by Dr. Golden. All voting members present voted for approval of the minutes as written. Motion passed.			
Announcements	<ul style="list-style-type: none"> Dr. Pearson notified the Subcommittee that the DUR Board voted to approve the recommendations from the December 2025 meeting and updates were effective on that date, January 21, 2026. Monographs were posted that day. Dr. Owens presented the monographs for discussion. 			
Monographs	<p>1. Keytruda (pembrolizumab) and Keytruda Qlex (pembrolizumab and berahyaluronidase) Dr. Owens recommended the following changes to the current monograph:</p> <ul style="list-style-type: none"> Remove small cell lung cancer as an FDA indication Add ovarian cancer as an FDA indication Modify the prescriber of the medication to “a fellowship trained oncologist” Modify the indication for urothelial carcinoma to match the package insert Add ovarian cancer indication language that matches the package insert <p>DISCUSSION: Dr. Crawley stated that the recommendations are all consistent with the package insert.</p> <p>ACTION: Motion to approve the presented changes was made by Dr. Crawley; second by Dr. Max. All voting members present voted for approval. Motion passed.</p> <p>2. Opdivo Qvantig (nivolumab and hyaluronidase) Dr. Owens recommended the following changes to the current monograph:</p> <ul style="list-style-type: none"> Remove small cell lung cancer as an FDA indication Modify the prescriber of the medication to “a fellowship trained oncologist” Modify the minimum age to ≥12 years and minimum weight to ≥30 kg for the melanoma and colorectal cancer criteria <p>DISCUSSION: None</p>			

ACTION:

Motion to approve the presented changes was made by Dr. Golden; second by Dr. Crawley. All voting members present voted for approval. Motion passed.

3. Vyvgart (efgartigimod alfa) and Vyvgart Hytrulo (efgartigimod alfa and hyaluronidase)

Dr. Owens recommended the following changes to the current monograph:

- Add Vyvgart Hytrulo with generalized myasthenia gravis (gMG) and chronic inflammatory demyelinating polyneuropathy (CIDP) indications to the Vyvgart monograph
- Modify the current gMG Vyvgart criteria to more closely match the pharmacy prior authorization criteria for Vyvgart Hytrulo for consistency
- The prescriber for gMG was modified to “a fellowship trained neurologist or rheumatologist”
- Add CIDP criteria language for Vyvgart Hytrulo to be consistent with pharmacy prior authorization criteria
- Add Vyvgart Hytrulo dosing schedule
- Update prior authorization approval duration for both gMG and CIDP
- Add renewal requirements for CIDP

DISCUSSION:

None

ACTION:

Motion to approve the presented changes was made by Dr. Golden; second by Dr. Crawley. All voting members present voted for approval. Motion passed.

4. Rybrevant (amivantamab) and Rybrevant Faspro (amivantamab and hyaluronidase)

Dr. Owens recommended the following changes to the current monograph:

- Add Rybrevant Faspro to the Rybrevant monograph
- Update the indication language to more closely match the package insert for all indications
- Add a bullet to require a current ECOG performance status of 0 to 2

DISCUSSION:

Dr. Crawley asked if the indications would include the other required drugs that should be given in each therapy. Dr. Owens confirmed that the complete regimen is included in the monograph. The information mentioned above was only the changes.

ACTION:

Motion to approve the presented changes was made by Dr. Golden; second by Dr. Douglass. All voting members present voted for approval. Motion passed.

5. Cerezyme (imiglucerase)

Dr. Owens recommended the following changes to the current monograph:

- Updated the indication to read “Non-central nervous system (CNS) manifestations of Type 1 or Type 3 Gaucher disease in adult and pediatric patients.”
- Remove the minimum age requirement
- Add Type 3 Gaucher disease in the approval criteria

DISCUSSION:

None

ACTION:

Motion to approve the presented changes was made by Dr. Golden; second by Dr. Crawley. All voting members present voted for approval. Motion passed.

Board comments

Dr. Pearson shared the future meeting dates.

Adjourn

Meeting was adjourned at 12:32pm.