MISSISSIPPI DIVISION OF MEDICAID
DRUG UTILIZATION REVIEW (DUR) BOARD
MINUTES OF THE MARCH 19, 2026 MEETING
COBB CONFERENCE CENTER, SILLERS BUILDING, JACKSON, MS

DUR Board Roster: State Fiscal Year 2026 (July 1, 2025 – June 30, 2026)	**Jun 2025**	**Sep 2025**	**Dec 2025**	**Mar 2026**
Amy Catherine Baggett, PharmD		✓		✓
Terrence Brown, PharmD	✓	✓	✓	✓
Greg Browning, MD	NA	✓	✓	✓
Rachel Burt, PharmD	NA	✓	✓	✓
Steven Clark, MD	NA	✓	✓	✓
Chrysanthia Davis, PharmD	✓	✓	✓	✓
Dena Jackson, MD	✓		✓	✓
Jessica Lavender, MD	✓	✓		✓
Holly Moore, PharmD		✓		✓
Joshua Pierce, PharmD	✓	✓	✓	
Gaylen Sanders, MD	✓	✓	✓	✓
Joshua Trull, DO		✓	✓	✓
TOTAL PRESENT**	**7**	**11**	**9**	**11**

** *Total Present may not be reflected by individual members marked as present above due to members who either resigned or whose terms expired being removed from the list.*

Also Present:

Division of Medicaid (DOM) Staff:
Dennis Smith, RPH, DUR Coordinator; Amy Ly-Ha, PharmD, Pharmacist II;

University of Mississippi School of Pharmacy - MS-DUR Staff:
Eric Pittman, PharmD, PhD, MS-DUR Project Director; Kaustuv Bhattacharya, PhD, Research Assistant Professor; John Bentley, PhD, CPMM Director; Jyotirmoy Sarker, PhD, Research Assistant Professor;

Coordinated Care Organization (CCO) Staff:
Jenni Grantham, PharmD, Director of Pharmacy, Magnolia Health; Jessica Lawson, PharmD, TrueCare;

Gainwell Staff:
Lew Ann Snow, RN, Advisor Business Analyst; Jeremy Campbell, PharmD, PA Pharmacist;

Visitors: Paula Whatley, Novo Nordisk; David Large, Chiesi GRD; Laurie Schneiderhan, Abbvie; Shawn Headley, Gilead; Amanda Ellis, Boehringer Ingelheim; Scott McConnell, Sanofi; Nancy Borden, Sanofi; Jay Milton, Bayer.

Call to Order/Welcome:
The meeting was called to order at 1:02 PM by Dr. Lavender, Co-chair.

OLD BUSINESS:
Dr. Davis moved to approve the minutes from the December 2025 DUR Board Meeting, seconded by Dr. Moore, and unanimously approved by the DUR Board.

Resource Utilization Review
Dr. Pittman presented the resource utilization report for December 2025. Data presented was across all pharmacy programs.

Follow-up from Previous Board Projects
Dr. Ly-Ha presented the Board with an updated version of the calcitonin gene-related peptide prior authorization criteria. Changes were made to the criteria as a result of discussions at the December 2025 DUR Board meeting. Dr. Ly-Ha also shared with the Board about efforts between DOM and MS State Department of Health (MSDH) to improve the uptake of human immunodeficiency virus (HIV) pre-exposure prophylaxis. Dr. Pittman provided updated data on changes in healthcare utilization 12 months pre- and post-initiation of glucagon-like peptide (GLP-1) receptor agonists (RAs) for obesity management.

NEW BUSINESS:

Update on MS-DUR Educational Interventions
Dr. Pittman provided an overview of all DUR mailings and educational notices that occurred between December 2025 and February 2026.

HIV Antiretroviral Therapy (ART) Adherence Trajectory Modeling
Adherence to HIV antiretroviral therapy is key to attaining viral suppression and the long-term goal of eliminating HIV in the U.S. Although group-based trajectory modeling revealed four distinct adherence groups, few factors were identified that predicted members with being in the consistent adherence trajectory group compared to other groups. These findings point to the need for DOM to engage in broad efforts in increase HIV ART adherence among Medicaid members.

The Board suggested DOM examine prescribers and pharmacies associated with members who are consistently adherent to determine if that may impact adherence. The Board affirmed the recommendations made at the December 2025 DUR Board meeting.

1. DOM should collaborate with Mississippi State Department of Health, infectious disease practice groups, and state medical/pharmacy/nursing associations on strategies to improve ART adherence among Medicaid members.

2. DOM should conduct targeted outreach to providers with members who have low ART adherence.

Appropriate Prescribing of Antipsychotics for Medicaid Members in Long-term Care (LTC)
While antipsychotic medications are vital for the treatment of several conditions, the use of these medications should be monitored to reduce side effects and ensure appropriateness of care, particularly among individuals residing in long-term care facilities. This project demonstrated that most Medicaid members taking antipsychotics while enrolled in long-term care were not concurrently prescribed multiple antipsychotics, had an appropriate diagnosis in claims data supporting the use of these medications, and had timely metabolic monitoring. In compliance with CMS's new requirements for reporting, monitoring of antipsychotic medication use in the long-term care population will continue.

Dr. Burt made a motion to approve the following recommendations:

1. *MS-DUR will begin quarterly monitoring of the appropriateness of antipsychotic medication use among adults in LTC facilities.*
2. *DOM should conduct quarterly provider education targeting these three measures utilizing a report card-type mailing.*

The motion was seconded by Dr. Brown and unanimously approved by the Board.

Updated Compliance Measurements for Initiators of GLP-1 RA Anti-obesity Medications (AOMs)

This real-world analysis of Mississippi Medicaid members initiating GLP-1 RA AOMs demonstrated that adherence and persistence improved substantially among individuals who began therapy in 2025 compared with those who initiated treatment in 2023. Despite these improvements, adherence and persistence rates among MS Medicaid members remain lower than those reported in recently published literature. Although national product shortages during 2023 and 2024 likely contributed to treatment interruptions, they do not fully explain the relatively low adherence and persistence rates observed. Additional factors may include medication-related adverse events, barriers to consistent medication access, and gaps in care coordination or ongoing clinical management. Further research is needed to better understand these barriers and to identify strategies that may improve sustained use of GLP-1 RA AOMs among Medicaid members.

The Board held extensive discussions around potential reasons for low adherence and persistence. Several providers on the Boad voiced the need for more flexible dose escalation requirements due tolerability issues.

Following the discussion, Dr. Clark made a motion to approve the following recommendation:

1. *Mississippi Medicaid should explore opportunities to identify barriers to adherence and persistence with GLP-1 RA anti-obesity medications and develop strategies to support sustained use among Medicaid members.*

The motion was seconded by Dr. Jackson and unanimously approved by the Board.

FDA Drug Safety Updates:
The FDA issued one drug safety update between December 2025 and February 2026.

Pharmacy Program Update:
Mr. Smith expressed appreciation to the Board for their commitment to the meetings and their engagement.

Next Meeting Information:
June 11, 2026

Dr. Lavender adjourned the meeting at 2:42 pm.

Submitted,

Eric Pittman, PharmD, PhD
Evidence-Based DUR Initiative, MS-DUR

DUR Board Meeting Resources

Members

The DUR Board is composed of twelve participating Medicaid providers who are in good standing with their representative organizations.

- DUR Board Member List

Meetings

Meetings will be held on the following dates at 1:00 p.m. in the Cobb Conference Room at 550 High St, Jackson, MS (**see map**).

- March 19, 2026
- June 11, 2026
- September 10, 2026
- December 10, 2026

The March 19 meeting may be viewed virtually by clicking on the following link: Click Here for MS Medicaid DUR Live Broadcast on March 19, 2026, at 1:00 p.m.

Please note: This link will only be live during the meeting and will not be archived for future viewing.