



March 31, 2022

Web Announcement 2752

Drug Use Review (DUR) Board Approves Changes Effective March 21, 2022

The Nevada Medicaid Drug Use Review (DUR) Board met on October 26, 2021, and voted to adopt the following changes effective March 21, 2022:

Drug Class/Program	Changes
Miscellaneous Heart Failure Agents	Updated prior authorization criteria for Entresto®.
Immunomodulator Drugs	Updated prior authorization criteria for Humira®. Added Skyrizi® to the criteria.
Growth Hormones	Growth Hormones criteria was reviewed. No changes were made.
Functional Gastrointestinal Disorder Agents	Added new prior authorization criteria for Gimoti®.
Alzheimer's Disease	Added new prior authorization criteria for Aduhelm®.
Calcitonin Gene-Related Peptide (CGRP) Receptor Inhibitor Agents	Updated prior authorization to include Nurtec® in episodic migraine indication.

Prior authorization forms may be found on the Pharmacy Forms webpage at:

<https://www.medicaid.nv.gov/providers/rx/rxforms.aspx>