

OHPB Sustainable Drug Cost Committee

I. Authority

The Oregon Sustainable Drug Costs Committee is chartered by the Oregon Health Policy Board (Board) under its authority in ORS 413.016.

The committee is formed by the Board with the specific and guiding goal to reduce the cost of pharmacy services in Oregon. In order to pursue this goal, the committee has flexibility to research and recommend policies and actions for Board consideration which reduce costs associated with and related to high cost drugs and the overall pharmacy costs in the state, as well as ways to address prescription drug price gouging and misleading marketing and education related to prescription drugs and drug effectiveness, and transparency.

The Board may change the scope or authority of the committee. This charter will be reviewed periodically to ensure that the work of the Committee is aligned with the Oregon Health Policy Board's strategic direction. The charter for the committee expires December 31, 2019 at which point the committee shall have completed its work.

II. Deliverables

The Board voted unanimously to charge the committee with the deliverables below at its November 7, 2017 meeting. The committee has flexibility to increase or decrease the scope of work pending Board approval.

The committee, in collaboration with Oregon's Coordinated Care Organizations (CCOs), will report recommendations regarding the policy of a single or aligned Preferred Drug List (PDL) before December 2018. In coordination with the OHA, the Committee should seek and review an independent and expert analysis of the potential costs, savings, and benefits of a single / aligned PDL. If the committee recommends implementation of a single or aligned PDL the report shall contain further recommendations for implementation.

The committee will consider ways to broaden participation in the Oregon Prescription Drug Program (OPDP). This should include increasing participation by local governments as well as other state agencies that would realize savings compared to current purchasing arrangements.

The committee will compile a workplan to accomplish the above deliverables and submit them for OHPB approval prior to May 1, 2018.

III. Dependencies

The Committee will collaborate with other public and private groups, including Coordinated Care Organizations, the Health Evidence Review Committee, the Department of Consumer and Business Affairs, CCO Pharmacy Directors, other state agencies or divisions of the OHA, and other committees or workgroups that may be relevant.

The committee may analyze and make recommendations regarding other state initiatives dealing with pharmacy-related issues as directed by the OHPB or deemed necessary by the committee (such as ongoing multi-agency work to address Oregon's opioid crisis).

The committee may make recommendations, in consultation with the Mental Health Clinical Advisory Group, regarding Oregon's 7-11 drug carve out list.

The committee may make recommendations concerning Oregon's position and policy with the Centers For Medicare and Medicaid Services (CMS) regarding Oregon's ability to pay for high cost drugs if their efficacy is not evidence based and/or the cost is likely to have a significant impact on the state Medicaid budget.

IV. Membership

The Committee will be made of 11 members selected and approved by the Oregon Health Policy Board. Members shall represent a cross section of experts and consumers including:

1. Oregon Health Plan Member
 2. Oregon Health Plan Consumer or Representative
 3. Drug Policy Economist or Expert
 4. Public Payer Pharmacy Director or Representative
 5. Large Employer w/ self-funded health plan
 6. CCO Pharmacy Director
 7. CCO Pharmacy Director
 8. HERC Representative
 9. Pharmacy & Therapeutics Representative
 10. Mental Health Clinical Advisory Group Representative
 11. Private Payer Pharmacy Director
- OHA Medical Director (ex-officio)
OHA Pharmacy Director (ex-officio)

The Committee shall elect its chair and vice-chair through a public vote. Members will be required to follow Conflict of Interest policies and procedures.

V. Resources

The Committee will be staffed by OHA; the OHA Medical Director shall serve as ex-officio member and Executive Sponsor of the group. The OHA Pharmacy Unit, OHA Health Policy Unit and OHA Health Policy & Analytics Division will support the group. Relevant pharmacy staff in other OHA divisions such as the Oregon State Hospital and the Division of Public Health may also be utilized when possible.

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