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PERMANENT ADMINISTRATIVE RULES

Oregon Health Authority, Division of Medical Assistance
Programs

410

Agency and Division

Administrative Rules Chapter Number

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RULE CAPTION

Amending PDL January 29, 2015 DUR/P&T Action

Not more than 15 words

RULEMAKING ACTION

ADOPT:

AMEND: 410-121-0030

REPEAL: 410-121-0030 (T)

RENUMBER:

AMEND & RENUMBER:

Stat. Auth.: ORS 413.032, 413.042, 414.065, 414.325, 414.330 to 414.414, 414.312, and 414.316

Other Auth.:

Stats. Implemented: ORS 414.065; 414.325, 414.334, 414.361, 414.369, 414.371, 414.353, and 414.354

RULE SUMMARY

The Pharmaceutical Services program administrative rules (Division 121) govern Division payments for services provided to certain clients. The Division needs to amend rules as follows:

410-121-0030:

Preferred:

Guaifenesin/Codeine Phosphate Syrup
nitroglycerin Capsule ER
Lovenox Â®- Brand Only Vial
Cholestyramine(with Sugar) Powd Pack
Cholestyramine/Aspartame Powd Pack
Aspirin Tab Chew
Aspirin Tablet DR
Spinosad Suspension
Insulin Detemir * INSULN PEN
Humulin70-30 â„¢
Humulin 70/30 KWIKPEN â„¢
Humalog mix 50-50 â„¢
Humalog mix 75-25 â„¢
Humulin R â„¢
Humulin N â„¢
Oxybutynin Patch TDSW
Etanercept (Enbrel â„¢) vial
Galantamine HBR Cap24H Pel
Memantine HCL Tab Ds Pk
Polymyxin B Sulf/Trimethoprim Drops
Dorzolamide/Timolol/PF
Neomycin/Polymyxin B Sulf/HC Drop/Susp
Buprenorpine Naloxone (Zubsolvâ„¢)
Proventil HFA
Calcium Acetate Capsule
Bupropion HCL Tab ER 24H
Escitalopram Oxalate Solution
Fluphenazine decanoate vial
Haloperidol decanoate ampul
Haloperidol decanoate vial
Haloperidol lactate ampul
Haloperidol lactate vial
TBO- Filgrastim syringe
Ledipasvir/ Sofosbuvir (Harvoniâ„¢)
Gentamicin/ Prednisol AC Drops Susp
Gentamicin/ Prednisol AC Oint. (G)
Neo/ Polymyx B Sulf/ Dexameth Oint. (G)
Cefuroxime Axetil Susp Recon

Non-Preferred:

Salsalate
Oxycodone/acetaminophen Capsules
BenicarÂ®
Benicar HCTÂ®
isosorbide dinitrate capsule ER
Hydrochlorothiazide Solution
triamterene

Estrogens, Conj., Synthetic A
Metformin HCL Tab ER 24
Estrogens, conjugated Cream (G)
Lipase/Protease/Amylase
Cimetidine
Neomy sulf/bacitrac zn/poly/HC
Pilocarpine HCL Gel (Gram)
chlorpromazine, Multiple products
Fluphenazine, Multiple products
Haloperidol, Multiple products
Loxapine, Multiple products
Perphenazine, Multiple products
Promazine, Multiple products
Thioridazine, Multiple products
Thiothixene, Multiple products
Trifluoperazine, Multiple products

Rhonda Busek

Rhonda Busek

10/25/15

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410-121-0030

Practitioner-Managed Prescription Drug Plan

(1) The Practitioner-Managed Prescription Drug Plan (PMPDP) is a plan that ensures OHP fee-for-service clients have access to the most effective prescription drugs appropriate for their clinical conditions at the best possible price:

- (a) Licensed health care practitioners who are informed by the latest peer reviewed research make decisions concerning the clinical effectiveness of the prescription drugs;
- (b) Licensed health care practitioners also consider the client's health condition, personal characteristics, and the client's gender, race, or ethnicity.

(2) PMPDP Preferred Drug List (PDL):

- (a) The PDL is the primary tool the Division uses to inform licensed health care practitioners about the results of the latest peer-reviewed research and cost effectiveness of prescription drugs;
- (b) The PDL contains a list of prescription drugs that the Division, in consultation with the Drug Use Review (DUR)/Pharmacy & Therapeutics Committee (P&T), has determined represent the most effective drugs available at the best possible price;
- (c) The PDL shall include drugs that are Medicaid reimbursable and the Food and Drug Administration (FDA) has determined to be safe and effective.

(3) PMPDP PDL Selection Process:

- (a) The Division shall utilize the recommendations made by the P&T that result from an evidence-based evaluation process as the basis for selecting the most effective drugs;
- (b) The Division shall ensure the drugs selected in section (3)(a) that are available for the best possible price and shall consider any input from the P&T about other FDA-approved drugs in the same class that are available for a lesser relative price. The Division shall determine relative price using the methodology described in section (4);
- (c) The Division shall evaluate selected drugs for the drug classes periodically:
 - (A) The Division may evaluate more frequently if new safety information or the release of new drugs in a class or other information makes an evaluation advisable;
 - (B) New drugs in classes already evaluated for the PDL shall be non-preferred until the new drug has been reviewed by the P&T;

(C) The Division shall make all revisions to the PDL using the rulemaking process and shall publish the changes on the Division's Pharmaceutical Services provider rules website.

(4) Relative cost and best possible price determination:

(a) The Division shall determine the relative cost of all drugs in each selected class that are Medicaid reimbursable and that the FDA has determined to be safe and effective;

(b) The Division may also consider dosing issues, patterns of use, and compliance issues. The Division shall weigh these factors with any advice provided by the P&T in reaching a final decision.

(5) Pharmacy providers shall dispense prescriptions in the generic form unless:

(a) The practitioner requests otherwise pursuant to OAR 410-121-0155;

(b) The brand name medication is listed as preferred on the PDL.

(6) The exception process for obtaining non-preferred physical health drugs that are not on the PDL drugs shall be as follows:

(a) If the prescribing practitioner in their professional judgment wishes to prescribe a physical health drug not on the PDL, they may request an exception subject to the requirements of OAR 410-121-0040;

(b) The prescribing practitioner must request an exception for physical health drugs not listed in the PDL subject to the requirements of OAR 410-121-0060;

(c) Exceptions shall be granted when:

(A) The prescriber in their professional judgment determines the non-preferred drug is medically appropriate after consulting with the Division or the Oregon Pharmacy Help Desk; or

(B) The prescriber requests an exception subject to the requirement of section (6)(b) and fails to receive a report of PA status within 24 hours, subject to OAR 410-121-0060.

(7) Table 121-0030-1, PMPDP PDL dated April 18, 2015 is adopted and incorporated by reference and is found at: www.orpdl.org.

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