



Physician Assistant Policy Committee Minutes
August 9, 2016

The meeting was called to order at approximately 1:36 p.m. on Tuesday, August 9, 2016 by Chairman, Robert Zaayer, P.A.

Committee members present: Robert Zaayer, P.A.; Irina Petty, P.A.; Nancy Ivansek, P.A.; Anita M. Steinbergh, D.O.; Curtis Gingrich, M.D.; Jennifer Rudell, RPh; Megan Keller, Pharm. D.

Staff members present: Sallie Debolt

Guests: Elizabeth Adamson, OAPA

I. Review of the July 12, 2016 minutes:

Dr. Steinbergh moved to approve the minutes from the July 12, 2016 meeting. Ms. Petty seconded the motion, which passed unanimously.

II. Introduction of new members:

Ms. Rudell, Pharmacy Board member, and Ms. Ivansek introduced themselves. They were welcomed by the other attendees.

III. Rules:

Ms. Debolt reported that proposed rules 4730-2-01, 4730-2-07, 4730-2-08, and 4730-2-09 were included in the agenda to inform PAPC of the status of the rules. They are being presented to the Medical Board on Wednesday, August 10, for approval to file the proposed rules with the Common Sense Initiative Office. No PAPC action is necessary.

IV. Review Formulary:

It was noted that the formulary on the website appears not to have been updated after the July meeting.

Upon a motion made by Dr. Steinbergh, and seconded by Ms. Ivansek, the committee unanimously approved the following amendments to the formulary for new drug approvals:

For addition to the "CPT May Prescribe" category of the formulary:

- Axumin, a radioactive agent for PET scan imaging;
- Netspot, a radioactive agent for PET scan imaging.

For addition to the "Physician-Initiated" category of the formulary

- Taltz, a biologic response modulator that treats adults with moderate to severe plaque psoriasis;
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- Cingair, an add-on type medication for severe asthma administered as an IV infusion every four weeks, placed in this category due to serious side-effects;
- Inflectra, an immune-suppressant;
- Nuplazid, a psychotherapeutic agent for Parkinson's patients who have hallucinations and delusions;
- Ocaliva;
- Briviact, an anticonvulsant controlled substance;
- Epclusa, a medication for treating hepatitis C infection, placed in this category because the patient's genotype must be known before it is prescribed.

For addition to the "CPT May Not Prescribe" category:

- Anthim, a serum toxoid treatment for inhalational anthrax which is administered as a single-dose IV infusion;
- Defitelio, an anti-thrombotic agent used specifically for hepatic veno-occlusive disease;
- Venclexta, an anti-neoplastic agent, placed in this category because it is an anti-neoplastic agent and has side-effects of tumor lysis syndrome;
- Zinbryta, an immunomodulatory for relaxing multiple sclerosis, placed in this category because it is only available through a Risk Evaluation and Mitigation Strategies (REMS) program.

The committee then addressed the request from Kathryn Dunlap, P.A., of the Cleveland Clinic, concerning three impotence drugs: phentolamine and papaverine for erectile dysfunction, and phenylephrine for reducing erections. Pavaverine is currently on the formulary under "may not." After discussion, Dr. Steinbergh moved to approve all three drugs in injection form as "physician initiated." Ms. Ivansek seconded the motion, which passed without dissent.

It was suggested that at the next meeting the agenda should include discussion of the possibility of moving to a negative formulary.

V. Adjournment:

Dr. Steinbergh moved to adjourn. The motion was seconded by several members, upon which Mr. Zaayer adjourned the meeting.

I hereby attest that these are the true and accurate minutes of the Physician Assistant Policy Committee of the State Medical Board of Ohio, meeting on August 9, 2016.

Robert Zaayer, PA-C, Chair