



PHYSICIAN ASSISTANT POLICY COMMITTEE MINUTES
February 12, 2018

The meeting was called to order at approximately 8:31 a.m. on Monday February 12, 2018

Committee members present: Jessica Thurman, P.A.-C; Kindra Engle, D.O.; Joshua Cox, R.Ph.; Scott Cackler, P.A.-C; Robert Zaayer, P.A.-C; and Curtis Gingrich, M. D.

Staff members present: Nate Smith, Sallie Debolt, and Cathy Hacker.

Guests: Beth Adamson, OAPA.

I. Review of the January 8, 2018 minutes:

Mr. Cackler moved to approve the minutes. Dr. Engle seconded the motion. all members voted aye. The motion carried.

II. Formulary Review

Mr. Cackler stated that there are not any NSAIDS that fall into the inhaled respiratory agents and recommended removing the NSAID line from the anti-inflammatory agent section.

Mr. Zaayer moved to approve this change. Dr. Engle seconded the motion. All members voted aye. The motion carried.

The committee recommended reviewing the anti-viral agent section at the March 2018 meeting.

The committee then reviewed the new drugs to the market for November 2017-December 2017 as follows:

Vyzulta was added to the formulary under the PI category for Ophthalmology/Misc. EENT Agents Preparations/Anti-glaucoma agents.

Mr. Zaayer moved to approve this change. Dr. Engle seconded the motion. All members voted aye. The motion carried.

Prevymis was added to formulary as PI category under Anti-Infective Agents/Misc antivirals

Mr. Zaayer moved to approve this change. Dr. Engle seconded the motion. All members voted aye. The motion carried.

Ozempic was put in the CTP may prescribe category under hormones and synthetic substitutes/anti-diabetes agents

Mr. Zaayer moved to approve this change. Mr. Cackler seconded the motion. All members voted aye. The motion carried.

Xepi was put in the CTP may prescribe category under Anti-infective agents/anti-bacterial agents.

Mr. Zaayer moved to approve this change. Mr. Cackler seconded the motion. All members voted aye. The motion carried.

Rhopressa was put in the PI category under Ophthalmology/Misc EENT Preparations/Anti-glaucoma agents.

Mr. Zaayer moved to approve this change. Mr. Cackler seconded the motion. All members voted aye. The motion carried.

Steglatro was put in the CTP may prescribe category under Hormones and synthetic substitutes/Sodium Glucose cotransporter inhibitors.

While reviewing this medication it was recommended that all Sodium Glucose cotransporter inhibitors be moved to the CTP May prescribe category except Invokana.

Ms. Thurman moved to approve these changes. Dr. Engle seconded the motion. All members voted aye.

Steglujan was put in the CTP may prescribe category under Hormones and synthetic substitutes/Sodium Glucose cotransporter inhibitors.

Mr. Zaayer moved to approve this change. Dr. Engle seconded the motion. All members voted aye. The motion carried.

Segluromet was put in the CTP may prescribe category under Hormones and synthetic substitutes/Sodium Glucose cotransporter inhibitors.

Mr. Zaayer moved to approve this change. Ms. Thurman seconded the motion. All members voted aye. The motion carried.

Giapreza was put in the CTP may not prescribe category under Cardiovascular/Renin-angiotensin aldosterone system inhibitors. It was stated that this is a new category of medicine and that the committee will re-review it in 6 months.

Dr. Engle moved to approve this change. Mr. Cackler seconded the motion. All members voted aye. The motion carried.

III. Review rules

Light based medical device:

Mr. Smith explained to the committee that the light based medical device rules were being presented to the committee for their comments. Dr. Engle inquired about continuing education requirements for those that have not practiced for some time. Mr. Zaayer expressed concern that this would require a special services type approval and that would be a step backward from where we are currently with PA's ability to perform services that are within their supervising physicians practice.

Mr. Smith indicated that he will continue to consider comments and adjust these rules accordingly.

Treatment of opioid addiction rules:

Ms. Debolt explained that the proposed rules for physician assistants are virtually the same as those being proposed for physician, but the physician assistant rule states that they may only prescribe for the office based treatment of opioid addiction if such prescribing is part of the supervising physician's routine course of practice.

Concerning draft rule 4730-3-01(F)(6), Mr. Cackler pointed out that the ARC-PA no longer accredits PA training programs as required for a physician assistant to be recognized as a qualified behavioral healthcare provider for purposes of medication-assisted treatment.

The Physician Assistant Policy Committee meeting was adjourned by Dr. Gingrich at approximately 9:49a.m. on Monday February 12, 2018.

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 February 12, 2018.

Curtis Gingrich, M.D., Chair, PAPC