District of Columbia Department of Health Care Finance

Medicaid Pharmacy & Therapeutics (P&T) Committee

Meeting Guidelines for Receiving Written and Oral Testimony: Evaluation of Therapeutic Classes

Conflict of Interest Disclosure Form

All presenters are requested to complete the *Medicaid Pharmacy and Therapeutics (P&T) Committee Disclosure Declaration Form* and submit the completed form with the written testimony at least seven (7) days before delivering the oral testimony. The form is available on the P&T Committee website, http://dc.fhsc.com, and at each scheduled meeting.

At each meeting the P&T Committee may note for the record whether the *Medicaid Pharmacy* and *Therapeutics (P&T) Committee Disclosure Declaration Form* was completed for each person submitting written or oral testimony, and if the form was submitted, the nature of the disclosures made.

Written Testimony

Interested persons who wish to submit written testimony on any agenda item must submit copies of their testimony as specified, and by the deadline stated in the official agenda. Testimony may be submitted electronically or in hard copy.

Oral Testimony

- 1. Public testimony will be received prior to the presentation of clinical information.
- 2. Presenters will only be allowed to address drug classes specified on the agenda.
- 3. Persons will be allowed to present testimony in the order in which they are called upon by the Chairman.
- 4. Persons who sign up to present testimony will be asked to indicate: Name; agency affiliation; drug and/or drug class.
- 5. Presenters will be allowed three minutes to speak.
- 6. Persons will not be able to present oral testimony without submitting written testimony prior to the meeting.

Recommendations to the Department of Health Care Finance

Decisions made by a majority vote of the members present shall constitute recommendations, on each therapeutic class, to be forwarded to the Deputy Director of the Department of Health Care Finance for a final decision as to the drugs' status relative to the Preferred Drug List.