

March 18, 2015

Dear Manufacturer,

The Ohio Department of Medicaid (ODM) is pleased to announce the start of the **2015 Supplemental Rebate Bid** process for the Medicaid fee-for-service program. The confirmed deadline for supplemental rebate bid submission is **April 14, 2015, by 12 pm EST**. This is also the deadline for submission of clinical information.

Preferred drugs will be selected in each therapeutic class as listed below. These decisions will be made by ODM based on the recommendations made by Ohio Medicaid's Pharmacy and Therapeutics Committee at its meeting on June 10, 2015. The decisions will be effective for the period October 1, 2015, through September 30, 2016.

Attached are the following documents:

- The supplemental rebate bid submission form. Please complete every cell. There are comments in many of the cells for additional guidance. Rebate bids are based on final net cost per unit. Please do not submit bids using any other pricing formula. Your first bid should be your best bid. Please use the comments column on the bid submission form to explain your bid position. Bundled contracts will not be accepted as each product must stand on its own clinical and economic merits. If any questions arise, you will be contacted.
- Instructions on how to view/remove the comments in the supplemental rebate bid submission form
- The Supplemental Rebate Contact Form. Please make sure you have submitted your primary and secondary contacts to us on the Supplemental Rebate Contact Form. A contact form does not need to be provided if there are no changes.
- The CMS approved Ohio Supplemental Rebate Contract Template. **This is for your reference only at this time.** If your bid is accepted after the **June 10<sup>th</sup>, 2015** P&T Meeting then I will send you an accepted contract via email for signature – ***please do not fill out a contract and send to me until that time.*** Please remember that the terms outlined in this contract are what you are agreeing to when a bid is submitted to Xerox.
- The 2007 CMS approval letter for the Ohio Supplemental Rebate Contract.
- State Medicaid Director (SMD) Letter 10-019. This SMD outlines provisions of the Affordable Care Act as it applies to the creation of the Federal Unit Rebate Offset Amount (FUROA).

**In order for a bid to be considered official, please submit all bids via SLFT (Secure Large File Transfer) to [Sandra.Kapur@xerox.com](mailto:Sandra.Kapur@xerox.com) using the following link: <https://slft.acs-inc.com>.** If you have not yet registered or are having trouble with SLFT, please send an email to [ohio.pdl@xerox.com](mailto:ohio.pdl@xerox.com) with your concern or request. Upon sending your offer to me via SLFT, please provide me a separate email with your passphrase so I may access your file. A notification will automatically be generated and sent to me informing me that a file has been sent.

Both the Supplemental Rebate Bid Submission Form and the Supplemental Rebate Contact Form can be requested by sending an email to [ohio.pdl@xerox.com](mailto:ohio.pdl@xerox.com).

**Important Points to Remember:**

1. **Deadline:** The confirmed deadline for supplemental rebate bid submission and clinical information submission is **April 14, 2015, by 12 pm EST**. **Please submit your offer(s) early.** There will be no exceptions to this deadline.

2. **Population:** Supplemental rebates are for the fee-for-service (FFS) population only. ODM Caseload reports are available on the ODM website at <http://medicaid.ohio.gov/RESOURCES/ReportsandResearch/CaseloadReports.aspx>. Average FFS enrollment during state fiscal year 2015 (July 2014 – June 2015) is estimated at 269,000. Approximately 28,000 children in care (foster care/adoption assistance) may move to managed care in state fiscal year 2016.

3. **Reviewed Classes:** The classes below will be reviewed at the **June 10, 2015, P&T Committee meeting**. New subclasses added this year are noted below in **red text** and are marked with an **asterisk (\*)**. Any class that has been removed from the PDL has been listed in black font, but stated to be removed in red font adjacent to the class below. A class list of drugs will be available at:

<http://medicaid.ohio.gov/PROVIDERS/ProviderTypes/TheOhioMedicaidDrugProgram/PharmacyandTherapeuticsCommittee.aspx>.

The following therapeutic classes will be reviewed:

**Analgesic Agents:**

Gastroprotective NSAIDs  
Gout Agents<sup>ST</sup>  
Opioids<sup>ST</sup>  
**Topical NSAIDs\*<sup>ST</sup>**

**Blood Formation, Coagulation, and Thrombosis Agents:**

Hematopoietic Agents  
Heparin Related Preparations<sup>ST</sup>  
Oral Anticoagulants<sup>ST</sup>

**Cardiovascular Agents:**

ACE Inhibitors<sup>ST</sup>  
Alpha-beta Adrenergic Blockers<sup>ST</sup>  
Angiotensin Receptor Antagonists<sup>ST</sup>  
Antiarrhythmic Agents<sup>ST</sup>  
Antianginal Agents  
Beta-Blockers<sup>ST</sup>  
Calcium Channel Blockers<sup>ST</sup>  
Direct Renin Inhibitors  
Lipotropics<sup>ST</sup>  
Lipotropic/Hypertension Combination  
Pulmonary Arterial Hypertension Agents

**Central Nervous System Agents:**

Alzheimer's Agents<sup>ST</sup>  
Anticonvulsants  
Anti-Migraine Agents – Serotonin 5-HT<sub>1</sub> Receptor Agonists<sup>ST</sup>  
Antidepressants<sup>ST</sup>  
Antipsychotics, Second Generation, Oral<sup>ST</sup>  
Antipsychotics, Second Generation, Injectable Depot Formulations  
Antipsychotics, Second Generation and SSRI Combination  
Attention Deficit Hyperactivity Disorder Agents<sup>ST</sup>  
Fibromyalgia Agents

Medication Assisted Treatment Agents  
Multiple Sclerosis Agents  
Neuropathic Pain Agents  
Parkinson's Agents<sup>ST</sup>  
Restless Leg Syndrome Agents<sup>ST</sup>  
Sedative-Hypnotics, Non-Barbiturate<sup>ST</sup>  
Skeletal Muscle Relaxants, Non-Benzodiazepine<sup>ST</sup>  
Smoking Deterrents<sup>ST</sup>

**Endocrine Agents:**

Diabetes – Amylin Analogs  
Diabetes – Incretin Mimetics  
Diabetes – Insulins  
Diabetes – Oral Hypoglycemics<sup>ST</sup>  
Estrogenic Agents<sup>ST</sup>  
Growth Hormones  
Osteoporosis – Bone Ossification Enhancers<sup>ST</sup>

**Gastrointestinal Agents:**

Anti-emetic Agents<sup>ST</sup>  
Chronic Constipation Agents  
H. Pylori Agents- *This class has been removed from the PDL*  
Pancreatic Enzymes  
Proton Pump Inhibitors<sup>ST</sup>  
Ulcerative Colitis Agents<sup>ST</sup>

**Genitourinary Agents:**

Benign Prostatic Hyperplasia Agents<sup>ST</sup>  
Electrolyte Depletor Agents<sup>ST</sup>  
Urinary Antispasmodics<sup>ST</sup>

**Immunomodulators:**

- Immunomodulators for Systemic Inflammatory Agents (formerly known as Injectable Antirheumatic Agents)
- **Oral Immunosuppressants\*<sup>ST</sup>**

**Infectious Disease Agents:**

Agents for Onychomycosis & Systemic Infections<sup>ST</sup>  
Antibiotics

- Cephalosporins – Oral<sup>ST</sup>
- **Inhaled Antibiotics\***
- Macrolides – Oral<sup>ST</sup>
- Quinolones – Oral<sup>ST</sup>

Anti-virals – Hepatitis C

Anti-virals – Herpes<sup>ST</sup>

Anti-virals for Human Immunodeficiency Virus (HIV)

**Ophthalmic Agents:**

Antibiotics<sup>ST</sup>

Antihistamine/Mast Cell Stabilizers<sup>ST</sup>

Miotics<sup>ST</sup>

NSAIDs<sup>ST</sup>

**Otic Agents:**

Antibiotics<sup>ST</sup>

**Respiratory Agents:**

Antihistamines – Second Generation<sup>ST</sup>

Beta-adrenergic Agents – Inhaled<sup>ST</sup>

Beta-adrenergic Combinations

COPD Anticholinergic Agents<sup>ST</sup>

Glucocorticoid Agents – Inhaled

**Hereditary Angioedema Agents (HAE)\***

Leukotriene Receptor Modifiers and Inhibitors<sup>ST</sup>

Nasal Preparations<sup>ST</sup>

Self-Injectable Epinephrine Agents

**Topical Agents:**

Androgenic Agents

Acne Agents<sup>ST</sup>

Antifungal Agents<sup>ST</sup>

Corticosteroids<sup>ST</sup>

Immunomodulators

Parasitics<sup>ST</sup>

**\* New Class**

<sup>ST</sup> Class will be considered for generic step through

4. **Clinical Information Submission(s):** Only new clinical information should be submitted to [ohio.pdl@xerox.com](mailto:ohio.pdl@xerox.com). Do not submit any information that is already identified on the reference document. *Clinical submissions must be provided as PDF documents.* A comprehensive list of drugs along with complete references can be accessed at <http://medicaid.ohio.gov/PROVIDERS/ProviderTypes/TheOhioMedicaidDrugProgram/PharmacyandTherapeuticsCommittee.aspx> by the end of March.
5. **Supplemental Rebate Submission(s):** Rebate bids are based on a guaranteed net unit price (GNUP), also known as a final net cost per unit, as defined per the CMS approved supplemental rebate contract in Addendum A. Please do not submit bids using any other pricing formula. In addition to the Federal Rebate Unit Amount, we are also requesting the Federal Unit Rebate Offset Amount to be provided. An explanation of the Federal Unit Rebate Offset Amount is attached in State Medicaid Director Letter 10-019.
6. **Forms:** Both the Supplemental Rebate Bid Submission Form and the Supplemental Rebate Contact Form can be requested by sending an email to [ohio.pdl@xerox.com](mailto:ohio.pdl@xerox.com).
7. **Step Edits/Limits:** Current restrictions such as step edits and quantity limits will remain in place. The State will continue to evaluate a step through a generic in a number of different classes. These classes are indicated by "ST" in the class list above. On the supplemental rebate bid form, please indicate whether your company will allow a generic step. There is a column provided for this on the form. Also, ODM will entertain any differential offers from manufacturers who wish to position their product after all step edits are considered. Changes to utilization management policies will be discussed at the P&T Committee meeting on April 8, 2015.
8. **SLFT:** All bids should be submitted to me via SLFT (<https://slft.acs-inc.com>). If you are having trouble with SLFT or have not yet registered, please submit an email to [ohio.pdl@xerox.com](mailto:ohio.pdl@xerox.com).

9. **P&T Committee Meeting & Manufacturer Presentations:** The Ohio P&T Committee meeting will be held on **June 10, 2015**. More information regarding this meeting will be available at <http://medicaid.ohio.gov/PROVIDERS/ProviderTypes/TheOhioMedicaidDrugProgram/PharmacyandTherapeuticsCommittee.aspx> by the end of **March**. Manufacturers may request to present clinical information at sessions to be held on the same date, **June 10<sup>th</sup>**. The "intent to present" form, posted at the website above, **MUST** be returned to ODM by **May 1<sup>st</sup>** as indicated on the form.
  
10. **Terms of Supplemental Rebate Agreement:** The terms of agreement for the contract period will be **October 1, 2015** through **September 30, 2016**.

Please direct any questions to the Ohio Medicaid e-mail address at [ohio.pdl@xerox.com](mailto:ohio.pdl@xerox.com).

Please utilize the attached Supplemental Rebate Bid form and the Supplemental Rebate Contact form for submissions.

Thank you for your participation.

Regards,

*Sandy Kapur, PharmD  
Manager, Trade Relations  
RX Delivery Services  
Xerox State & Local Solutions, Inc*