Ohio Association of Rheumatology
Advocacy Newsletter
January 30, 2017

STATE UPDATES

2017 Legislative Issues

The OAR will be riding momentum into 2017 that was generated by helping advocate biosimilar substitution and prior authorization legislation into law. While stakeholders fell short with step therapy, the bill's sponsor will be reintroducing the exact same legislation this year. With two of the major priorities out of the way advocates will be permitted to spend more time speaking to elected officials about the harmful effects of a fail first policy.

Possible Legislation for 2017:

- Step Therapy – Bill to be filed soon.
- High Out of Pocket Costs – Being Drafted
- Non-Medical Switching – Possible issue
- Prescription Drug Costs – Ohio Fair Ballot Initiative

OAR Government Relations will continue to monitor legislation as it is filed and will update membership as needed.

Prior Authorization Law Now in Effect

The Ohio State Medical Association (OSMA) has provided a guide for implementation of the new prior authorization law in Ohio. Provisions in the legislation partly take effect in 2017 with the rest of the bill becoming fully implemented in January 2018.

January 2017 Provisions Include:

- Insurers must disclose all PA rules to participating providers, including specific information or documentation that a provider must submit in order for the PA request to be considered complete.
- Insurers must disclose to all participating providers all new prior authorization requirements at least 30 days prior to the effective date of the new requirement.
- Enrollees of the health plan must receive basic information about which drugs and services will require prior authorization.
- A provision prohibiting retroactive denials when, on the date the provider renders the prior approved service: The patient is eligible; the patient's condition hasn't changed; the provider submits an accurate claim that matches the information submitted by the provider in the approved PA request.
- A provision allowing a retrospective review of a claim where a PA was required but not obtained when the service in question meets all of the following: The service is related to another service for which a PA has already been obtained and has already been performed; The service was not known to be needed at the time the original prior authorized service was performed; The need for the new service was revealed at the time the original authorized service was performed.
- Insurers must allow for a 12-month PA for medications to treat a chronic disease under certain circumstances.

OSMA GUIDE

FEDERAL UPDATES

OAR Leads Downcoding Discussion with CGS

CGS Administrators, the Medicare Contractor for Ohio and Kentucky, issued a report that seems to justify downcoding complex drugs to simple coding by explaining that classifying these biologics as complex in the first place was erroneous under the Current Procedural Terminology Professional Edition.

The OAR believes that arbitrarily moving the administrative coding for provider-administered biologics from complex to simple is unacceptable. In response, the OAR along with the Kentuckiana Rheumatology Alliance (KRA) and the American College of Rheumatology (ACR) held a meeting with CGS Medical Director Dr. Earl Berman to discuss the issue in detail. Dr. Berman and his team continued to express CGS's position that they believe current definitions for complex coding in the Current Procedural Terminology Professional Edition do not meet the specifications for coding Orenica, IIaris, Cimzia, Prolia, Simponi, Xolair, Arcalyst, Actemra and Stelera as complex.

The OAR along with the KRA and ACR are combating this belief with a follow-up comment letter expressing how the CPT Guide definition for coding complex meets the standards for these biological drugs.

HOW CAN YOU HELP?

Email CGS and OPPOSE the downcode.

FDA Announced Final Guidance on "Nonproprietary Naming of Biological Products"

The FDA announced the release of the final guidance on the "Nonproprietary Naming of Biological Products." The agency has decided on a naming convention that supports a distinguishable randomized, four-letter suffix, devoid of any meaning for biosimilars. However, the FDA is still continuing to consider the appropriate suffix format for interchangeable biological products. Please select the button below for the full guidance.

The Federal Register alert mentions the open comment period; exact dates are not set yet, but would likely be February 13.

FULL REPORT

Register Now for Arthritis Access & Advocacy Day!

This complimentary event presented by the Ohio Association of Rheumatology and Arthritis Foundation is a great opportunity for you to join physicians, nurses, practice managers, patients and advocates from across the state in educating your Ohio State Senators and Representatives on the needs of individuals with rheumatic diseases and our legislative priorities.

REGISTRATION ***MEETING INFO***

For more information, please visit the **Ohio Association of Rheumatology website**.