

### Pharmacy & Therapeutics Committee

# SPEAKER REQUEST FORM

Requesting Party Name/Title:	
Requesting Party Organization:	
Meeting Date:	
Conflict of Interest Disclosure:	
Drug or Topic to be Presented (must be related to an agenda item):	

#### PUBLIC PRESENTATION GUIDELINES

NOTE: An attempt is made to accommodate all speaker requests. However, due to time constraints, there is no guarantee a speaker will be presenting at a certain time during the meeting or that time will allow for all speakers to speak.

A public presentation at a Pharmacy & Therapeutics meeting shall comply with the following:

- The verbal presentation shall not exceed three (3) minutes in aggregate per drug per manufacturer, with an additional two (2) minutes allowed for questions from the Committee, if necessary, or five (5) minutes by an individual speaking on a particular position.
- A request to make a verbal presentation must be submitted via fax to (502) 585-8370 or via email to dawn.bittner@passporthealthplan.com no later than seven (7) business days in advance of the Pharmacy & Therapeutics meeting.
- An individual may only present new information (package insert changes, new indication or peerreviewed journal articles in the past 6 months) on a product or information on a new product.
- The presentation shall be limited to an agenda item.
- Speaker requests do not carry over to the next review of the agenda item if the agenda item is not presented at the meeting; a new request must be submitted.
- If an agenda item is tabled by the Committee, speakers who have made a presentation on the item will not be permitted to speak again on the item when it is re-reviewed.

## NONVERBAL COMMENTS AND DOCUMENT GUIDELINES

Nonverbal comments and documents (limited to package insert changes, new indication, or peer reviewed journal articles in the past 6 months) shall be:

 Mailed to the following address with a total of Eleven (11) copies so that the information may be distributed to the Pharmacy & Therapeutics members as well as to any other involved parties:

Passport Health Plan, Attn: Dawn Bittner 5100 Commerce Crossings Dr., Louisville, KY 40229

• Must be received no later than seven (7) business days prior to the Pharmacy & Therapeutics meeting.

#### **ELECTRONIC MEDIA GUIDELINES**

In order to allow for a full presentation, electronic media materials (slide presentations):

• Must be submitted via email to dawn.bittner@passporthealthplan.com or mailed (on a CD) to the following address:

Passport Health Plan, Attn: Dawn Bittner 5100 Commerce Crossings Dr., Louisville, KY 40229

- Must be received no later than seven (7) business days prior to the Pharmacy & Therapeutics meeting.
- Will not be returned, if mailed originally.

Nonverbal comments, documents, and/or electronic media (slide presentations) that are not received in the time allowed cannot be distributed to or viewed by Pharmacy & Therapeutics members or any other involved parties.

If you have any questions, please contact Dawn Bittner at dawn.bittner@passporthealthplan.com.