

Humana CareSource has been chosen to provide managed Medicaid services in Kentucky's "Region 3," a 16-county region including Louisville. The Pharmacy & Therapeutics (P&T) Committee meeting invites public comment on the medications and therapeutics covered in the Humana CareSource formulary.

Temporary Assistance for Needy Families (TANF) and Aged, Blind and Disabled (ABD) program enrollees (including individuals dually eligible for Medicare and Medicaid) are covered under the state's managed Medicaid program. Approximately 170,000 eligible Medicaid recipients reside in Region 3, which includes the following counties: Breckinridge, Bullitt, Carroll, Grayson, Hardin, Henry, Jefferson, Larue, Marion, Meade, Nelson, Oldham, Shelby, Spencer, Trimble and Washington. In addition to Humana CareSource, three other entities will also manage Medicaid coverage for recipients in this region.

Our Pharmacy & Therapeutics Committee meeting will take place Oct. 30 from 10 a.m. – noon at the Embassy Suites, 9940 Corporate Campus, Louisville. Because the meeting room has limited capacity, we ask companies to limit the number of people in attendance. This will allow room for all who wish to attend. You can request time on the agenda in advance by completing the attached form.

The meeting will consist of presentation by the P&T pharmacy director as well as other topics relevant to the rollout of this program. We will not entertain questions or comments during that time. If disruption occurs, those individuals may be asked to leave the committee meeting. The agenda follows:

1. Introductions; Jim Gartner, VP Pharmacy
2. Commonwealth of Kentucky Formulary Overview; Jim Gartner, VP Pharmacy
3. Therapy Class review; Owen Neff, Director, Formulary & Medicare; Casey Dennis, Clinical Account Executive
  - a. Antipsychotics
  - b. Asthma medications
  - c. ADHD
  - d. Antidepressants
  - e. Diabetic medications
  - f. Analgesics-Opioid
  - g. Ulcer Medications



## Humana CareSource Pharmacy and Therapeutics Committee Speaker Request Form

Meeting date:		
Speaker Name:		
Company Name:		
Address:		
City:	State:	Zip Code:
Phone Number:	Email address:	
Drug/Topic:		
Disclosure of Conflict of Interest:		

### Presentation Guidelines

Those presenting to the Humana CareSource Pharmacy and Therapeutics Committee will be required to follow the guidelines below:

1. The verbal presentation shall be limited to three (3) minutes.
2. Requests need to be sent to using this form 7 days in advance of the committee meeting.  
Forms should be emailed to Jim Gartner at [james.gartner@caresource.com](mailto:james.gartner@caresource.com)
3. Presentation will be limited to one point of view or product;
  - a. One clinical presentation as applicable to agenda
  - b. One practitioner or health care provider testimonial
  - c. One speaker on behalf of a specific therapy class or disease state
4. Any written materials also need to be provided 7 days prior to the meeting.