



### Agenda

This is a draft agenda and subject to change.

Wednesday, April 15, 2026 – 9 a.m.

Register for meeting: [Zoom link](#)

Table 1 Board agenda details.

Subject	Presenter	Purpose
Call to order and roll call	Chair Shelley Bailey	<i>Informational and vote</i>
Board declarations of conflict of interest and meetings with entities or individuals related to board activities	Chair Shelley Bailey	<i>Informational</i>
Board review of 3/18/2026 minutes	Chair Shelley Bailey	<i>Review</i>
PDAB program update	Sarah Young, executive director	<i>Informational</i>
General public comment: limited to 3 minutes per speaker	Chair Shelley Bailey	<i>Informational</i>
<a href="#"><u>Presentation on data methodology for 2026 drug review</u></a>	PDAB Staff	<i>Informational</i>
The board will take a break around 10:15 a.m.	Chair Shelley Bailey	<i>Break</i>
Presentation on Oregon drug purchasing: ArrayRx, Oregon Prescription Drug Program, and Medicaid	Trevor Douglass and Dee Weston, Oregon Health Authority	<i>Informational</i>
Announcements	Chair Shelley Bailey	<i>Informational</i>
Adjournment	Chair Shelley Bailey	<i>Vote</i>

**Accessibility:** Anyone needing assistance due to a disability or language barrier can contact Melissa Stiles at least 48 hours ahead of the meeting at [pdab@dcbs.oregon.gov](mailto:pdab@dcbs.oregon.gov) or 971-374-3724. American Sign Language will be available during the April 15 board meeting.



**Oregon Prescription Drug Affordability Board Regular Meeting  
Wednesday, March 18, 2026  
Draft Minutes**

**Web link to the meeting video:** <https://youtu.be/ggp9LW277PM>

**Web link to the meeting materials:** <https://dfr.oregon.gov/pdab/Documents/20260318-PDAB-document-package.pdf>

**Call to order:** Chair Shelley Bailey called the meeting to order at 8:03 a.m.

**Roll call:**

Present: Chair Shelley Bailey, Vice Chair Dan Hartung, Lauri Hoagland, Dan Kennedy, Michele Koder, Chris Laman, John Murray

Absent: None

**Board declarations of conflict of interest and meetings with entities or individuals related to board activities:** John Murray, Lauri Hoagland, Shelley Bailey provided statements. View at video minute [00:01:02](#).

**Approval of board minutes:** Chair Bailey approved by consensus the Feb. 18, 2026, minutes as shown on [Pages 2-3](#) of the agenda materials. View at video minute [00:03:07](#).

**PDAB program update:** Sarah Young, PDAB executive director, provided a program update. View the video at minute [00:03:34](#).

**General public comment:** Public comment was received from the following individuals who signed up in advance: Dharia McGrew, PhRMA; Primo Castro, BIO; Katie Chandra, Genentech; Lorren Sandt, Caring Ambassadors; Andrew Kiehlbauch, OSPIRG; and Marris Alden, Regence BlueCross BlueShield of Oregon. The board received 12 written comments, which are posted on the [PDAB website](#). View at video minute [00:14:53](#).

**Vote on final 2025 drug review report with recommendations:** The Board discussed and voted on policy concepts 1) Patient out-of-pocket cap and 2) Point-of-sale rebate pass-through, as presented on [Pages 8-10](#) of the agenda materials. The board voted to approve both policy concepts for inclusion in the 2025 Drug Review Report to the Oregon Legislature. The final [report](#) was posted on the PDAB website after the board meeting. The discussion and vote begin at video minute [00:34:38](#).



**MOTION to approve the 2025 drug review report with Policy 1 patient out-of-pocket cap model as discussed by the board today.**

**Board Vote:**

Motion: John Murray

Second: Lauri Hoagland

Yes: Lauri Hoagland, Chris Laman, John Murray, Vice Chair Dan Hartung, Chair Shelley Bailey

No: Dan Kennedy, Michele Koder

Absent: None

**MOTION PASSED 5-2**

**MOTION to approve the 2025 drug review report with Policy 2 point-of-sale rebate pass through model as discussed by the board today.**

**Board Vote:**

Motion: John Murray

Second: Lauri Hoagland

Yes: Lauri Hoagland, Michele Koder, John Murray, Chair Shelley Bailey

No: Dan Kennedy, Chris Laman, Vice Chair Dan Hartung

Absent: None

**MOTION PASSED 4-3**

**Vote clarification:** Dan Kennedy stated for the record that he is in favor of Policy 1 and Policy 2, although he voted no on both. His understanding was the board would have a third vote combining both policies, which he supports.

**MOTION to approve the 2025 drug review report with Policy 1 and Policy 2 to send to the Oregon Legislature as discussed by the board today.**

**Board Vote:**

Motion: John Murray

Second: Dan Kennedy

Yes: Lauri Hoagland, Dan Kennedy, Michele Koder, Chris Laman, John Murray, Vice Chair Dan Hartung, Chair Shelley Bailey

No: None

Absent: None

**MOTION PASSED 7-0**

**Legislative update:** Jesse O'Brien, policy manager for the Division of Financial Regulation, provided a recap of the 2026 Oregon Legislative session as shown on [Pages 4-7](#) of the agenda materials. View at video minute [01:30:30](#).



**2026 drug review: Select a subset of drugs to prioritize for review under OAR 925-200-0010:**

The board discussed and voted on a subset list of prescription drugs and insulin products for prioritization for the 2026 reviews under OAR-925-200-0010. See [Pages 22-27](#) of the agenda materials for the roadmap, process document, board memo, and web links to the data dashboard and spreadsheets. The drug review information is also posted on the [data page](#) of the PDAB website. The approved subset list of drugs is included in Appendix A and [posted on the PDAB website](#). The discussion and vote begin at video timestamp [01:45:17](#).

**MOTION to approve Ocrevus, Tremfya, Skyrizi, Xolair, Keytruda, Verzenio, Xeljanz, Jardiance, Mounjaro, and Ozempic for the board’s subset list for 2026 affordability reviews.**

**Board Vote:**

Motion: Chris Laman

Second: Dan Kennedy

Yes: Lauri Hoagland, Dan Kennedy, Michele Koder, Chris Laman, John Murray, Vice Chair Dan Hartung, Chair Shelley Bailey

No: None

Absent: None

**MOTION PASSED 7-0**

**MOTION to include Humulin 500, the Kwikpen and the concentrated solution, to the subset list for affordability review.**

**Board Vote:**

Motion: Dan Hartung

Second: Dan Kennedy

Yes: Lauri Hoagland, Dan Kennedy, Michele Koder, Chris Laman, John Murray, Vice Chair Dan Hartung, Chair Shelley Bailey

No: None

Absent: None

**MOTION PASSED 7-0**

**Announcements:** Chair Bailey announced the next board meeting will be April 15, 2026. View at video minute [03:46:38](#).

**Adjournment:** Chair Bailey adjourned the meeting at 12 p.m. with all board members in agreement. View at video minute [03:46:46](#).



Oregon Prescription Drug  
Affordability Board



# Prescription Drug Affordability Board

## 2026 Draft drug review roadmap

April 15, 2026

# Draft drug review & annual report calendar



**2026 Preliminary Rx and insulin subset list**

Board discussion and vote on subset lists



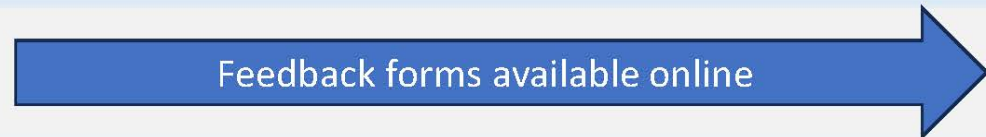
**Data call of Rx subset list**



**Public outreach and events**



**Public online feedback forms**



**Annual report (includes recommendations and generic drug report)**





Oregon Prescription Drug  
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# Prescription Drug Affordability Board

## 2026 Drug Methodology

- Orphan condition drugs
- Data call
- Rubric

April 15, 2026

# Orphan drug methodology

# All Payer All Claims (APAC) Reporting Program overview

- APAC provides one of the foundational information sources the Prescription Drug Affordability Board (PDAB) uses to understand drug spending and utilization trends in Oregon.
  - APAC is essential to PDAB for analyzing gross spend of drugs in the state of Oregon.
- The APAC database contains administrative health data submitted by insurers, including enrollment, medical and pharmacy claims, and provider information.
  - For more information, see the Oregon APAC website at:  
<https://www.oregon.gov/oha/HPA/ANALYTICS/Pages/All-Payer-All-Claims.aspx>



# APAC overview (cont.)

- APAC includes
  - Insurance coverage information
  - Health service costs
  - Medical and pharmacy utilization data
  - Represents 92% of Oregon residents (based on [an analysis of 2018 data](#))
- APAC does not include
  - Uninsured individuals
  - Federal programs (e.g., federal employees, TRICARE, VA, IHS)
  - Small commercial insurers and third-party insurers with fewer than 5,000 lives
  - Some self-insured plans that are not required to report



# Relevant APAC data fields in orphan methodology

## Medical claims

- Data elements used to analyze **medical services** associated with drug administration:
  - Unique OHA ID
  - Birth Year
  - NDC's
  - ICD-10
  - File Year

## Pharmacy claims

- Data elements used to analyze **prescription dispensing and utilization**:
  - Unique OHA ID
  - Birth Year
  - NDC's
  - File Year

## Data Limitations:

1. Medical claims may not always include NDC's for physician-administered drugs
2. Pharmacy claims do not include ICD-10 codes

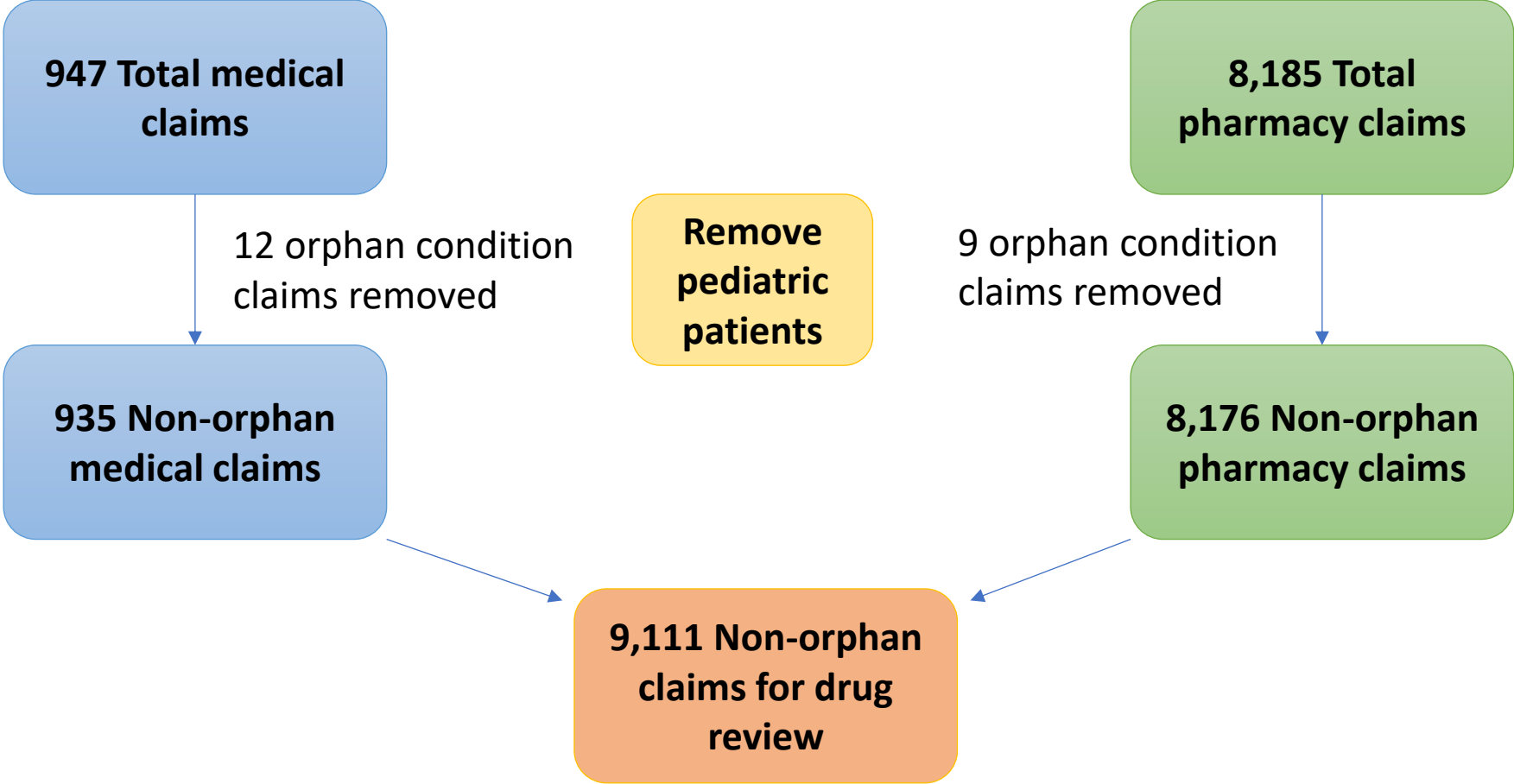


# Skyrizi: Method to identify orphan vs. non-orphan utilization

- Skyrizi has one orphan designation (treatment of Crohn's disease in pediatric patients). However, most of its use is for non-orphan conditions (e.g., psoriasis, psoriatic arthritis in adult patients).
- Orphan Skyrizi claims were identified using birth year.
  - Any Skyrizi claims with patients born on 1/1/2007 or later in file year 2024 are removed
  - 21 APAC claims to be removed from review
  - 11 unique patients with at least one claim
- Non-orphan Skyrizi claims represent all other Skyrizi utilization not linked to the orphan indication.
  - 9,111 claims for review
  - 2,595 unique patients with at least one claim



# Methodology: Isolating non-orphan Skyrizi utilization for 2024 claims



# Keytruda: Method to identify orphan vs. non-orphan utilization

## 1. Physician administered drug (paid through medical benefit)

- Majority of claims include ICD-10 diagnosis codes
- Enables condition-level identification

## 3. Analytic purpose

- Separate orphan designated use from non-orphan utilization
- Focus affordability analysis on broader population impact

## 2. Method: Orphan condition identification

- Mapped FDA orphan designations to corresponding ICD-10 codes
- Flagged claims associated with:
  - Advanced melanoma (C43\*)
  - Head and neck cancer (C44\*)
  - Hodgkin lymphoma (C81\*)
  - Primary mediastinal large B-cell lymphoma (C85.2\*)
  - Gastric, esophageal, liver cancers, etc.

\* Represents all codes containing the characters before the asterisk.  
Example: C43\* includes C43.01, C43.02, C43.03, etc.



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# Keytruda: Method to identify orphan vs. non-orphan utilization

## Orphan condition identification

- Stage IIB through IV malignant melanoma
  - C43\*
- Head and neck squamous cell cancer
  - C44.02, C44.12\*, C44.22\*, C44.32\*, C44.42\*
- Classical Hodgkin lymphoma
  - C81\*
- Primary mediastinal large b-cell lymphoma
  - C85.2
- Gastric cancer
  - C16\*
- Esophageal cancer
  - C15\*
- Hepatocellular carcinoma
  - C22.0
- Merkel cell carcinoma
  - C4A\*

\* Represents all codes containing the characters before the asterisk.  
Example: C43\* includes C43.01, C43.02, C43.03, etc.



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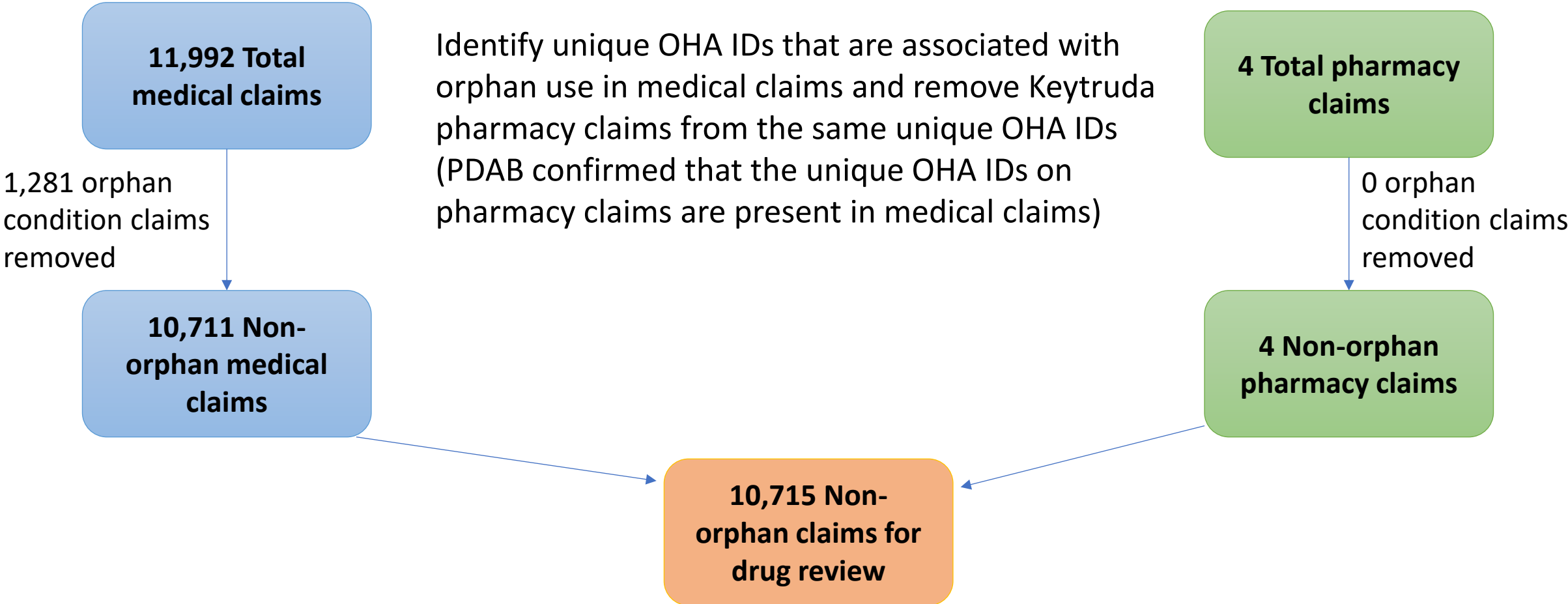


# Keytruda: Method to identify orphan vs. non-orphan utilization

- Orphan Keytruda claims were identified using ICD-10-CM codes.
  - Any Keytruda medical claim with any of the ICD-10's associated with an orphan designation is removed from the total claims
  - Any Keytruda pharmacy claim with the same OHA unique person ID of the medical claims with orphan ICD-10's is removed from the total claims.
  - 1,281 claims with orphan conditions removed
  - 202 unique patients with at least one claim
- Non-orphan Keytruda claims represent all other Keytruda utilization not linked to a designated orphan indication.
  - 10,715 claims for review
  - 1,595 unique patients with at least one claim



# Methodology: Isolating non-orphan Keytruda utilization for 2024 claims



**Data call**

# Collections tabs

- Pharmacy claims
- Medical claims
- Orphan pharmacy claims
- Orphan medical claims
- Plan design
- Pharmacy drug pricing
- Medical drug pricing
- Therapeutic alternative pharmacy drug pricing
- Therapeutic alternative medical drug pricing



# Rubric

# Rubric structure

- Domains with scores (0 to 3)

- Utilization
- Price evaluation
- Price concessions
- System and payer spending
- Enrollee burden

- Domains with Yes/No

- Equity
- Access restrictions
- Expansive therapeutic alternatives
- Stakeholder input
- Exclusivity expiration date
- Excluded from CMS price negotiation list



# DO YOU THINK YOUR PRESCRIPTION DRUGS COST TOO MUCH?

Oregon Prescription Drug Affordability Board helps to protect Oregonians and the health care system from the high cost of prescription drugs. The board wants to reduce financial burdens for patients.

## Help us identify solutions to high drug costs.

Please come share your story at a community forum with board staff about how prescription drug prices and medication costs have affected you.



### In-person forums

**Salem** – Tuesday, May 5, 5 to 6:30 p.m.  
Salem Public Library  
585 Liberty St. SE  
Salem

**Redmond** – Wednesday, May 6, 5 to 6:30 p.m.  
Redmond Public Library  
827 SW Deschutes Ave.  
Redmond

**Portland** – Tuesday, May 12, 6 to 7:30 p.m.  
Asian Health & Service Center  
9035 SE Foster Road  
Portland

**Beaverton** – Monday, May 18, 5 to 6:30 p.m.  
Beaverton City Library  
12375 SW Fifth St.  
Beaverton



Oregon Prescription Drug  
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### Online forums

Join any ZoomGov meeting at the scheduled time at [zoomgov.com/join](https://zoomgov.com/join)

Enter the meeting ID and passcode

**Passcode: OregonPDAB**

**Dial in by phone: 669-254-5252**

**Tuesday, April 28, 7 to 8:30 p.m.**

Join ZoomGov Meeting

Meeting ID: 161 635 9753

**Monday, May 11, noon to 1:30 p.m.**

Join ZoomGov Meeting

Meeting ID: 160 556 2737

**Wednesday, May 13, 6:30 to 8:30 p.m.**

Join ZoomGov Meeting

Meeting ID: 160 948 4958

[En Español](#)

**PDAB board meeting:**

**Wednesday, May 20, 8 a.m. to noon**

Join ZoomGov Meeting

Meeting ID: 161 233 0328



Share your story in the online feedback form:  
[dfr.oregon.gov/pdab/](https://dfr.oregon.gov/pdab/)

# ¿CREE USTED QUE EL COSTO DE SUS MEDICAMENTOS RECETADOS ES MUY ALTO?

La Junta de Asequibilidad de Medicamentos Recetados ayuda a proteger a los habitantes de Oregon y al sistema del cuidado de la salud de los altos precios de medicamentos recetados. La junta quiere reducir las cargas financieras para los pacientes.

## **Ayúdenos a identificar soluciones al alto costo de los medicamentos**

Por favor, comparta su historia en un foro comunitario con el personal de la junta acerca de cómo los precios de los medicamentos recetados y los costos de los medicamentos le han afectado.



### **Foros en línea**

Únase a cualquier reunión en [zoomgov.com/join](https://zoomgov.com/join) durante el tiempo agendado  
Ingrese el código de identificación de la reunión y la clave

**Código de acceso: OregonPDAB**  
**Llame por teléfono: 669-254-5252**

**Martes, 28 de abril, 7 - 8:30 p.m.**  
Interpretación en español disponible  
Únase a la reunión en Zoomgov  
Código de identificación para la reunión:  
161 635 9753

**Lunes, 11 de mayo, 12 - 1:30 p.m.**  
Interpretación en español disponible  
Únase a la reunión en Zoomgov  
Código de identificación para la reunión:  
160 556 2737

**Miércoles 13 de mayo, 6:30 - 8:30 p.m.**

En Español  
Únase a la reunión en Zoomgov  
Código de identificación para la reunión:  
160 948 4958

**Reunión de la Junta de PDAB**  
**Miércoles, 20 de mayo, 8 a.m. - 12:00 p.m.**

Interpretación en español disponible  
Únase a la reunión en Zoomgov  
Código de identificación para la reunión:  
161 233 0328



Oregon Prescription Drug  
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**Comparta su historia en el formulario de comentarios en línea:**  
[dfr.oregon.gov/pdab/](https://dfr.oregon.gov/pdab/)