



MONTANA PHARMACY TODAY

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STUART DOGGETT STEPPING DOWN AS MPA EXECUTIVE DIRECTOR & LOBBYIST DECEMBER 1

Earlier last month, MPA Executive Director & Lobbyist Stuart Doggett contacted the MPA Board of Directors to inform them that he would not be seeking a new management and lobbying contract with the Montana Pharmacy Association (MPA) after December 1, 2024.

As many of you know, Stuart has been with MPA since 2007, serving as our Executive Director and Lobbyist. Throughout his tenure, he has been a remarkable leader, a steadfast source of guidance, support, and encouragement, and an unwavering advocate for our association and profession. Stuart's leadership

has ushered in numerous improvements to MPA and has led us to significant legislative victories. His efforts were especially pivotal in the recent passing of SB112, leaving a lasting impact on pharmacy statewide.

Stuart has decided to step down, driven by a desire to work less and enjoy more time with his family. His wife, Janice, retired a few years ago, and they both look forward to traveling and spending quality time with their grandchildren. We wholeheartedly support and applaud Stuart's decision to embrace this new chapter of his life. ■

GOOD NEWS - DEEDEE GRUBBS HIRED AS MPA EXECUTIVE DIRECTOR

The MPA Board of Directors will be collaborating closely with Stuart and his firm to complete all traditional association and lobbying tasks until his departure, ensuring a smooth transition for our members. We are pleased to announce that Deedee Grubbs, our current MPA Association Coordinator, has established her own association management business and has been hired by MPA to provide association management services starting December 1st. Deedee's services will encompass all administrative and meeting

management responsibilities, excluding lobbying.

Consequently, MPA leadership has developed a Request for Proposals (RFP) to secure lobbying services for the upcoming 2025 session. We anticipate significant interest from individuals and lobbying firms. To facilitate the selection process, we have formed a Search and Selection Committee comprised of a diverse range of peers who will review the proposals in the coming months. ■

MPA LOBBYING RFP – SHARE WITH INTERESTED PARTIES

To learn more about the MPA Lobbying RFP, please email Deedee Grubbs dgrubbs@montana.com for a copy of the RFP. Feel free to share it with any individuals or firms that might be interested. The deadline for applications is 5:00 pm on Friday, August 23rd. Any questions on the RFP can be directed to MPA Chair, Kristin Dimond at kdimond@billingsclinic.org. ■

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UM HIRES FORMER CHICAGO STATE DEAN OF HEALTH & PHARMACY AS NEW DEAN FOR COLLEGE OF HEALTH

The University of Montana has hired Dr. Matthew G. Fete as the next dean of its growing College of Health. He started his new position on June 17th.

Fete brings a wealth of experience and expertise to the role, serving most recently as a professor of pharmaceutical sciences at Chicago State University and dean of its College of Health Sciences and Pharmacy.

“I am extremely excited and honored by the opportunity to serve as the College of Health’s next dean,” Fete said. “I thoroughly enjoyed my visit to the University of Montana. The hospitality extended, the unified commitment to the mission and the University’s strong presence in Missoula heightened my enthusiasm for joining the community.”

Fete received his bachelor’s degree in chemistry from St. Joseph’s University in Philadelphia and his Ph.D. in chemistry and biochemistry from the University of Colorado Boulder. He worked as a research scientist during his career, studying areas such as bacterial resistance, antipsychotic drugs and holographic storage.

Fete has held various leadership positions, including interim chair of the Department of Pharmaceutical Sciences and interim dean of the School of Pharmacy at Regis University in Colorado. He has been recognized for his dedication to teaching and mentoring, and

his effort to include students in scholarly activities has resulted in numerous student-authored presentations and publications, culminating with three students earning recognition as prestigious Walmart Scholars by the American Association of Colleges of Pharmacy.

“We are thrilled to welcome Dr. Fete to the University of Montana community,” UM Provost Adrea Lawrence said. “His proven leadership, scholarly achievements and commitment to student success make him an exceptional fit to lead the College of Health into its next chapter.”

In his new role, Fete will continue building upon the College of Health’s strong foundation, supporting Provost Lawrence’s vision for academic affairs and President Seth Bodnar’s call for the delivery of inclusive prosperity.

“My family and I are thrilled to be Grizzlies!” Fete said. “We are so grateful to have this opportunity to contribute – professionally and to the community – in a place where we can play hard in nature.”

Lawrence said, “Dr. Fete’s appointment signals an exciting new chapter for the College of Health at the University of Montana, as the institution continues its commitment to excellence in health education, research, and community engagement.” ■



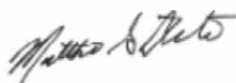
INTRODUCTION FROM NEW DEAN OF UM COLLEGE OF HEALTH

Thank you for the opportunity to introduce myself to the Montana Pharmacy community. I look forward to collaborating with the Montana Pharmacy Association to advocate for the interest of pharmacy professionals across big sky and across the nation. I'm proud to be in a position to support the education of the most accessible health professionals and I'm thrilled to be in the beautiful state of Montana. I am excited to partner with the Montana Pharmacy Association to advance public health and maximize patient outcomes through innovation, leadership, and advocacy for all pharmacy professionals.

As Dean of the only School of Pharmacy in the great state of Montana, I am excited to enhance the visibility of the many opportunities our graduates have to contribute to the health of their communities. The University of Montana Skaggs School of Pharmacy's outstanding faculty and staff promote student success and train students to practice at the top of licenses; prepare future practitioners for the full spectrum of patient care and discovery, from chronic disease management, medical therapy management, and telehealth to precision medicine and careers in the pharmaceutical sciences. UM pharmacists work on interprofessional teams to provide the best patient outcomes, to contribute to solutions to public health crises, to engage in research that transforms care, and to implement health policy to serve the common good.

My own career in Pharmacy education has been very fulfilling. I am a synthetic chemist by training and an early opportunity in my career was focused on drug re-formulation for direct administration to the cerebral cortex. The company was spun out of the University of Colorado School of Pharmacy; however, the funding didn't last long for our work. When the company closed the Chief Science Officer (a pharmacy faculty member) told me they were looking for a medicinal chemist for a new school that would open in Denver. I became a founding faculty member of Regis University's School of Pharmacy and had the privilege of serving as faculty, interim chairperson, and interim dean over nearly 10 years of service. In 2019 I transitioned to Chicago State University where I served as Dean of the College of Pharmacy until 2022, and then as Dean of the newly formed College of Health Sciences and Pharmacy until joining the University of Montana this June.

I have a beautiful and brilliant wife of 23 years and we have a 24-year-old son and a 19-year-old daughter. We love the outdoors and are so happy to be joining the Montana community where we can have purposeful work, contribute to community, and play in the great outdoors! ■




MONTANA PHARMACY ASSOCIATION LIKE US ON FACEBOOK

The Montana Pharmacy Association has a Facebook page, available through the Association's website at www.rxmt.org. This MPA feature serves as a popular and easy way for members and anyone interested in Montana pharmacy related issues to stay connected. We hope you will join us!



Protect your Tomorrow



Our businessowners policy (BOP) protects your tomorrow with:

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MONTANA PHARMACY TODAY



NEW DISPENSE AS WRITTEN (DAW) CODE REVEALED

By Trenton Thiede, PharmD, MBA, President at PAAS National®, expert third party audit assistance, FWA/HIPAA and USP 800 compliance.

Chances are you have come across a claim or two (or several thousand!) with a DAW code of 1, 2, or 9. Pharmacy staff are usually knowledgeable about when to use these DAW codes – that a DAW 1 may be appropriate to use when the prescriber does not authorize generic substitution on a multi-source brand, a DAW 2 when the patient requested the brand name, and a DAW 9 when the plan explicitly indicates the brand name product is preferred. The same DAW guidance applies for biologic reference products (e.g., Lantus®) with an interchangeable biosimilar (i.e., Semglee®).

While those three DAW scenarios are fairly straightforward, real-world claim adjudication can be a bit more complex and a single numeric DAW code may not accurately convey the true billing situation. Take for instance a patient with a commercial plan for their primary coverage and Medicaid as their secondary. Sometimes, one payor may prefer the brand while the other prefers the generic. Then what?!

The National Council for Prescription Drug Programs (NCPDP) has added its first non-numeric DAW code. The first alpha code, **DAW A**, can now be found in the NCPDP Telecommunication Version D and Above Questions, Answers and Editorial Updates¹ Version 65, updated May 2024.

DAW A is utilized on multi-payor claims (i.e., when the same prescription is processed by at least two payors) and can be used on either the claim to the primary payor or on the coordinate of benefits claim to the secondary payor. It is only used to indicate to one payor that the other payor is requiring the multi-source brand or reference product (with an interchangeable biosimilar) be dispensed.

- A DAW 9 will be used on the claim to the payor requiring the multi-source brand/reference product to be dispensed (as long as the prescriber did not require the brand/reference product). It does not matter if this is the primary payor or secondary.
- A DAW A should be submitted on the claim to the other payor that is not requiring the multi-source brand/reference product to be dispensed. Again, it does not matter if this is the primary payor or secondary.

Utilizing a DAW A code allows the payor that is not requiring the multi-source brand/reference product to accept the claim with the associated brand pricing rules or reject the claim as 70: Product/Service Not Covered – Plan/Benefit Exclusion.

PAAS TIPS:

- As with any DAW code other than 0, ensure there is appropriate documentation on the hardcopy or within the prescription record to indicate which plan required brand and which did not
- The most common scenario is when Medicaid is the secondary payor and they are requiring the brand/reference product, but the primary payor is not. The pharmacy would follow these steps:
 1. Submit the claim for the generic drug using DAW 0 to primary for a paid claim with non-\$0 patient copay
 2. Continue billing and submit the claim for the generic drug using DAW 0 to Medicaid (secondary)
 3. Medicaid would reject the claim as 606-Brand Drug/Specific Labeler Code Required
 4. Reverse the claim and resubmit the multi-source brand/reference product to the primary with DAW 9; they should reject with 22: M/I DAW Code and if the pharmacy would continue and bill to Medicaid (secondary), Medicaid may reject the claim as 6E: M/I Other Payor Reject Code
 5. The pharmacy would then bill the claim to primary for the multi-source brand/reference product with a DAW A (Multi-Payor Brand/Reference Product Formulary Conflict) and the primary payor should accept the claim and apply brand pricing
 6. The pharmacy would then continue to bill the multi-source brand/reference product to Medicaid as the secondary payor with DAW 9
- Be aware of DAW A utilization and remain conscientious .
 - o Watch for DAW code updates from your software vendor

DAW CODE continued on page 7



Well-being Index For Pharmacy Personnel

State Report for NABP District Seven States

July 2024

pharmacist.com

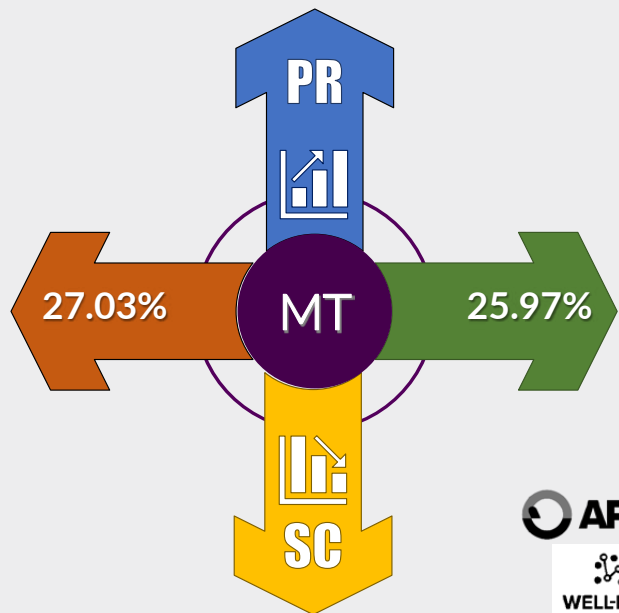
For Every Pharmacist. For All of Pharmacy.

WELL-BEING INDEX FOR PHARMACY PERSONNEL STATE DISTRESS PERCENT*

JULY 2024
As of July 2024, the Montana distress percent was 25.97% (ranked 47/52) with 61 assessors.

JUNE 2024
As of June 2024, the Montana distress percent was 27.03% (ranked tied at 44/52) with 58 assessors.

STATE COMPARISON
As of July 2024
Puerto Rico is the highest at 51.22% (n=35)
South Carolina has the lowest 21.01% (n=616)



*Distress Percent is the percentage of individuals with a Well-Being Index (WBI) score ≥5. It measures the percent of individuals that are at a high level of distress.

MONTANA PHARMACY LAW REMINDER

FROM FAQ ON BOARD OF PHARMACY WEBSITE

HOW LONG DOES AN INTERN HAVE TO COMPLETE REQUIREMENTS FOR A PHARMACIST LICENSE?

The Intern license shall expire not later than 12 months after the date of graduation or at the time of professional licensure, whichever comes first.

HOW LONG DOES A PHARMACIST HAVE TO PRACTICE TO BE APPROVED AS A PRECEPTOR?

A pharmacist has to be actively engaged in the practice of pharmacy for one year, unless approved by the Board. A form is provided on the website. Proof of completion of a training course is required.

WHAT IS THE RATIO OF PHARMACY TECHNICIANS TO SUPERVISING PHARMACISTS?

There is NO pharmacist to pharmacy technician ratio; the ratio is to be determined by the pharmacist-in-charge. Also, pharmacist interns do not count against the ratio. See ARM 24.174.711 for requirements of the pharmacist-in-charge to ensure that the number of pharmacy technicians on duty can be satisfactorily supervised by the pharmacist(s) on duty to ensure patient safety and a safe work environment. ■

DAW CODE *continued from page 5*

- o While NCPDP billing guidance has been updated to account for this new DAW code, there may be a divergence between NCPDP standards and actual implementation by payors much like the DAW 9 versus DAW 0 situation for a multi-source brand/reference product with an interchangeable biologic in the marketplace
- PAAS has additional resources and charts available to help understand DAW best practices, biologic terminology and substitutability. ■

References:

1. <https://member.ncdp.org/Member/media/pdf/VersionDQuestions.pdf>

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Executive Director: Marcie Bough, PharmD
mbough@mt.gov

Calendar of Events

September 18 & 19: MPA Board Meeting and
Student Meet and Greet

October 1: MPA Dues Renewal

January 17-19, 2025: MPA Winter CE, Fairmont
Resort

May 29-June 1, 2025: NW Convention, Coeur
d'Alene Resort

[2025 Continuing Education Offerings](#)

MPA Winter CE, Fairmont Resort
January 17-19

NW Convention, Coeur d'Alene, ID
May 29-June 1