

The Department of Health requires Drug Utilization Review (DUR) Board members to disclose any financial interest or professional or personal affiliations with any entity that may have a direct interest in matters before the Committee.

A financial interest may include but is not limited to:

- Owning stocks, bonds or other securities (excluding mutual funds)
- Employed by, acting as a consultant or under contract
- Receiving compensation for consultant services or speaker bureaus

A professional or personal affiliation may include but is not limited to:

- Holding a position in an advisory capacity
- Speaking in support of a particular entity or product
- Accepting gratuities for professional or education activities

The existence of such interests or affiliations will not automatically preclude a Board member from attending meetings or participating in other matters for which a conflict does NOT exist. When recusal from voting is warranted, Board members must refrain from deliberations or debate, making recommendations, volunteering advice, voting and participating in any way in the decision making process. Board members are prohibited from accepting any compensation or gifts from pharmaceutical manufacturers or their representatives that would impact the impartiality of the Board's official duties.

Please indicate whether you have anything to disclose (please check one that best applies):

No Disclosure

I do not have a current or recent (within the last 12 months) financial interest or professional or personal affiliation with any entity that has a direct interest in matters before the DUR Board.

Disclosure(s)

I have a current or recent (within the last 12 months) financial interest or professional or personal affiliation with an entity that has a direct interest in matters before the DUR Board. Please specify the financial interest or personal or professional affiliation on the next page.

I have the following disclosure(s) to report:

Entity Name/Description	Financial Interest? (Y or N)	Financial Interest > \$1,000 annually? (Y, N or n/a)	Nature of Interest/Affiliation

Name (please print): _____

Signature: _____

Date: _____

To be completed at least annually or at the time a potential conflict of interest occurs.
To be submitted to the DoH liaison. Annual submission should be prior to the first DUR Board meeting of the calendar year.