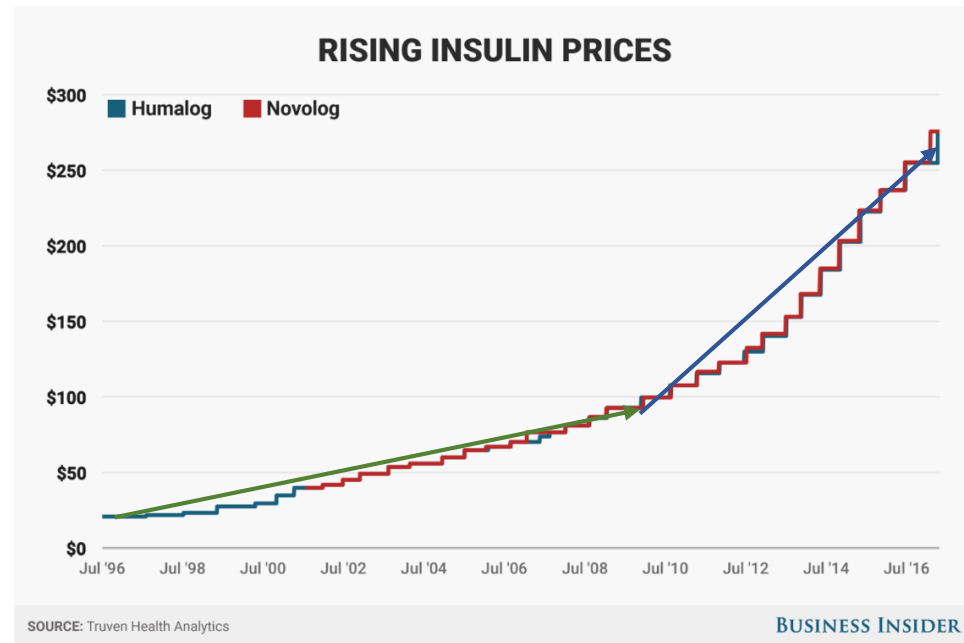


Insulin Working Group

December 18, 2019

Problem

- Insulin affordability and access is an issue across the nation
- Patients & families shared several instances where they have rationed insulin
- The list price of insulin has risen dramatically in last 20 years, most prominently in last 10 years



How We Got Here

- House and Senate designees met with Gov. Walz 10/18
- Agreed to convene a small working group that would include:
 - 3 House and 3 Senate members
 - Commissioner of DHS
 - Administration policy representatives
- Final agreement would include
 - Emergency access provisions
 - Longer-term affordability program
 - Insulin manufacturer participation
 - Must be able to implement quickly
- Working group first met 10/25, several meetings followed

General Areas of agreement

- Continuum of care
 - Patients can apply for assistance before they are in crisis
 - Patients can access insulin immediately if they are facing an emergency.
 - Patients are provided a bridge to long-term affordable insulin coverage.
- Target eligibility at Minnesotans most likely to be in danger of rationing:
 - Uninsured
 - Minnesotans struggling to afford monthly insulin expenses.
 - Does not include patients on public health programs (MA, MinnesotaCare, etc.)
- Prevent fraud and abuse of program
- Insulin manufacturers participation in the program, conditioned on licensure.
- Reporting from MNsure and insulin manufacturers to ensure compliance and evaluate the program
- Health insurers will notify policyholders 90 days before an insured child turns 26
- MNsure will receive \$250,000 for public awareness campaign

Emergency Access

Areas of Agreement:

- Eligible patients have option of securing emergency supply of insulin at their pharmacy.
- Eligible for one fill per year
- Emergency application is forwarded to MNsure

Outstanding Issues:

- Eligibility: Income level, Medicare, Resident Definition
- Scope: 30-90 day supply, co-pay amount
- Contract with PBM to administer
- Role of federally-subsidized hospital/clinics

Long—Term Affordability

Areas of Agreement

- Patients can apply for assistance before they are in crisis
- MNsure administers and is portal into the program
- All patients will be required to confer with an “assister” to complete an exchange application
 - Validate qualifying criteria
 - Screen for public program eligibility
 - Recommend affordable options at open enrollment or is qualified for special enrollment period
- Insulin manufacturers supply free insulin for qualified patients for up to a year

Outstanding Issues

- Delivery method (pharmacy, doctors office, mail-order)
- Eligibility: Same outstanding issues as emergency, but agreement on 400% FPL
- Participation requirements on insulin manufacturers and doctors

Additional Outstanding Issues

- Funding
 - How does Pharma participate?
- Sunset or no-sunset
- Co-pay cap on health insurance plans
- \$250,000 for Assister training
- Penalties for non-compliance

