

1.1 Senator moves to amend H.F. No. 2128, in conference committee, as
1.2 follows:

1.3 On R23-A3, Senate language, (UEH2128-1)

1.4 Page 81, before line 17, insert:

1.5 "Sec. 8. Minnesota Statutes 2020, section 62J.84, subdivision 3, is amended to read:

1.6 Subd. 3. **Prescription drug price increases reporting.** (a) Beginning ~~October 1, 2021~~
1.7 January 1, 2022, a drug manufacturer must submit to the commissioner the information
1.8 described in paragraph (b) for each prescription drug for which the price was \$100 or greater
1.9 for a 30-day supply or for a course of treatment lasting less than 30 days and:

1.10 (1) for brand name drugs where there is an increase of ten percent or greater in the price
1.11 over the previous 12-month period or an increase of 16 percent or greater in the price over
1.12 the previous 24-month period; and

1.13 (2) for generic drugs where there is an increase of 50 percent or greater in the price over
1.14 the previous 12-month period.

1.15 (b) For each of the drugs described in paragraph (a), the manufacturer shall submit to
1.16 the commissioner no later than 60 days after the price increase goes into effect, in the form
1.17 and manner prescribed by the commissioner, the following information, if applicable:

1.18 (1) the name and price of the drug and the net increase, expressed as a percentage;

1.19 (2) the factors that contributed to the price increase;

1.20 (3) the name of any generic version of the prescription drug available on the market;

1.21 (4) the introductory price of the prescription drug when it was approved for marketing
1.22 by the Food and Drug Administration and the net yearly increase, by calendar year, in the
1.23 price of the prescription drug during the previous five years;

1.24 (5) the direct costs incurred by the manufacturer that are associated with the prescription
1.25 drug, listed separately:

1.26 (i) to manufacture the prescription drug;

1.27 (ii) to market the prescription drug, including advertising costs; and

1.28 (iii) to distribute the prescription drug;

1.29 (6) the total sales revenue for the prescription drug during the previous 12-month period;

2.1 (7) the manufacturer's net profit attributable to the prescription drug during the previous
2.2 12-month period;

2.3 (8) the total amount of financial assistance the manufacturer has provided through patient
2.4 prescription assistance programs, if applicable;

2.5 (9) any agreement between a manufacturer and another entity contingent upon any delay
2.6 in offering to market a generic version of the prescription drug;

2.7 (10) the patent expiration date of the prescription drug if it is under patent;

2.8 (11) the name and location of the company that manufactured the drug; and

2.9 (12) if a brand name prescription drug, the ten highest prices paid for the prescription
2.10 drug during the previous calendar year in any country other than the United States.

2.11 (c) The manufacturer may submit any documentation necessary to support the information
2.12 reported under this subdivision.

2.13 Sec. 9. Minnesota Statutes 2020, section 62J.84, subdivision 4, is amended to read:

2.14 Subd. 4. **New prescription drug price reporting.** (a) Beginning ~~October 1, 2021~~ January
2.15 1, 2022, no later than 60 days after a manufacturer introduces a new prescription drug for
2.16 sale in the United States that is a new brand name drug with a price that is greater than the
2.17 tier threshold established by the Centers for Medicare and Medicaid Services for specialty
2.18 drugs in the Medicare Part D program for a 30-day supply or a new generic or biosimilar
2.19 drug with a price that is greater than the tier threshold established by the Centers for Medicare
2.20 and Medicaid Services for specialty drugs in the Medicare Part D program for a 30-day
2.21 supply and is not at least 15 percent lower than the referenced brand name drug when the
2.22 generic or biosimilar drug is launched, the manufacturer must submit to the commissioner,
2.23 in the form and manner prescribed by the commissioner, the following information, if
2.24 applicable:

2.25 (1) the price of the prescription drug;

2.26 (2) whether the Food and Drug Administration granted the new prescription drug a
2.27 breakthrough therapy designation or a priority review;

2.28 (3) the direct costs incurred by the manufacturer that are associated with the prescription
2.29 drug, listed separately:

2.30 (i) to manufacture the prescription drug;

2.31 (ii) to market the prescription drug, including advertising costs; and

3.1 (iii) to distribute the prescription drug; and

3.2 (4) the patent expiration date of the drug if it is under patent.

3.3 (b) The manufacturer may submit documentation necessary to support the information
3.4 reported under this subdivision.

3.5 Sec. 10. Minnesota Statutes 2020, section 62J.84, subdivision 5, is amended to read:

3.6 Subd. 5. **Newly acquired prescription drug price reporting.** (a) Beginning ~~October~~
3.7 ~~1, 2021~~ January 1, 2022, the acquiring drug manufacturer must submit to the commissioner
3.8 the information described in paragraph (b) for each newly acquired prescription drug for
3.9 which the price was \$100 or greater for a 30-day supply or for a course of treatment lasting
3.10 less than 30 days and:

3.11 (1) for a newly acquired brand name drug where there is an increase of ten percent or
3.12 greater in the price over the previous 12-month period or an increase of 16 percent or greater
3.13 in price over the previous 24-month period; and

3.14 (2) for a newly acquired generic drug where there is an increase of 50 percent or greater
3.15 in the price over the previous 12-month period.

3.16 (b) For each of the drugs described in paragraph (a), the acquiring manufacturer shall
3.17 submit to the commissioner no later than 60 days after the acquiring manufacturer begins
3.18 to sell the newly acquired drug, in the form and manner prescribed by the commissioner,
3.19 the following information, if applicable:

3.20 (1) the price of the prescription drug at the time of acquisition and in the calendar year
3.21 prior to acquisition;

3.22 (2) the name of the company from which the prescription drug was acquired, the date
3.23 acquired, and the purchase price;

3.24 (3) the year the prescription drug was introduced to market and the price of the
3.25 prescription drug at the time of introduction;

3.26 (4) the price of the prescription drug for the previous five years;

3.27 (5) any agreement between a manufacturer and another entity contingent upon any delay
3.28 in offering to market a generic version of the manufacturer's drug; and

3.29 (6) the patent expiration date of the drug if it is under patent.

3.30 (c) The manufacturer may submit any documentation necessary to support the information
3.31 reported under this subdivision."

4.1 On R24-A3, Senate language, (UEH2128-1)

4.2 Page 82, after line 18, insert:

4.3 "Sec. 12. Minnesota Statutes 2020, section 62J.84, subdivision 9, is amended to read:

4.4 Subd. 9. **Legislative report.** (a) No later than ~~January 15 of each year, beginning January~~
4.5 ~~15, 2022~~ May 15, 2022, and by January 15 of each year thereafter, the commissioner shall
4.6 report to the chairs and ranking minority members of the legislative committees with
4.7 jurisdiction over commerce and health and human services policy and finance on the
4.8 implementation of this section, including but not limited to the effectiveness in addressing
4.9 the following goals:

4.10 (1) promoting transparency in pharmaceutical pricing for the state and other payers;

4.11 (2) enhancing the understanding on pharmaceutical spending trends; and

4.12 (3) assisting the state and other payers in the management of pharmaceutical costs.

4.13 (b) The report must include a summary of the information submitted to the commissioner
4.14 under subdivisions 3, 4, and 5."

4.15 Renumber the sections in sequence and correct the internal references

4.16 Amend the title accordingly