

# HOUSE RESEARCH

## Bill Summary

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**Subject:** Drug Price Comparisons; Reporting on Health Care Costs and Volume

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### Overview

This bill requires the commissioner of health to establish an interactive Web site to which pharmacies would voluntarily report retail prices and available discounts for commonly dispensed prescription drugs. The bill also provides funding to the commissioner of health to expand public reporting on average costs and volume information for certain procedures, tests, and services.

#### Section

#### **1 Prescription drug price reporting.** Adds § 144.7011.

**Subd. 1. Definitions.** Defines the following terms: available discount, retail pharmacy, and retail price.

**Subd. 2. Prescription drug price information reporting.** Requires the commissioner of health, by July 1, 2017, to establish an online, interactive Web site that allows retail pharmacies to voluntarily list retail prices and available discounts for one or more of the 150 mostly commonly dispensed prescription drugs. Specifies criteria for the Web site. Requires the commissioner of health to annually consult with the commissioner of human services to determine the 150 most commonly filled drugs, based on MA and MinnesotaCare drug utilization.

**Subd. 3. Pharmacy duties.** Beginning July 1, 2017, and each month thereafter, requires participating pharmacies to submit retail prices and available discounts to the commissioner. Requires pharmacies to provide 60-days' notice when opting out of the reporting system.

**Section**

**Subd. 4. External vendors.** Allows the commissioner to contract with an outside vendor to collect data from pharmacies, and to develop and host the interactive application.

**Subd. 5. Grounds for disciplinary action.** If a pharmacy has reported false or inaccurate information under this section, allows the commissioner to report this to the Minnesota Board of Pharmacy as a grounds for disciplinary action.

**2 Reporting on health care costs and volume.** Appropriates money from the general fund for fiscal year 2017 to the commissioner of health, to expand public reporting on average costs and volume by health care providers for those procedures, tests, and services that most impact quality of care and patient outcomes. Allows the commissioner to contract with an outside vendor. Adds the appropriation to the base budget of the Department of Health.