

H.F. 485

First Engrossment

Subject Insulin Assistance Program

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Overview

This bill directs the Commissioner of Human Services to implement an insulin assistance program by July 1, 2020. The bill also requires insulin manufacturers to pay an insulin registration fee to the Board of Pharmacy. Money from the fee is deposited into the insulin assistance account and appropriated to the commissioner to fund the insulin assistance program. The bill also requires the Board of Pharmacy to develop a web page with links to resources that would assist consumers in purchasing drugs at a lower cost, and encourages specified health boards to encourage their licensees to provide information to their patients related to lowering drug costs, including a link to the Board of Pharmacy's web page.

Summary

Section Description Citation. States that this act may be cited as "The Alec Smith Emergency Insulin Act."

2 Information provision; pharmaceutical assistance programs.

Amends § 147.37. Requires the Board of Medical Practice, at least annually, to encourage its licensees who prescribe drugs to make available to patients information on sources of lower cost prescription drugs, and to provide these licensees with the address for the web page established by the Board of Pharmacy under § 151.06, subd. 3. (This provision replaces an existing requirement to provide information on prescription drug manufacturer assistance programs.)

3 Information provision; pharmaceutical assistance programs.

Adds § 148.192. Requires the Board of Nursing, at least annually, to encourage its licensees who prescribe drugs to make available to patients information on sources of lower cost prescription drugs, and to provide these licensees with the address for the web page established by the Board of Pharmacy under § 151.06, subd. 3.

Section Description

4 Information provision; sources of lower cost prescription drugs.

Amends § 151.06, by adding subd. 3. (a) Requires the Board of Pharmacy to publish a page on its website that provide regularly updated information on:

- (1) drug manufacturer patient assistance programs;
- (2) the prescription drug assistance program established by the Board on Aging;
- (3) the emergency insulin assistance program under § 256.937;
- (4) websites on eligibility and enrollment in government-funded programs that help pay for health care costs;
- (5) the 340B drug program; and
- (6) any other resources the board deems is useful for individuals attempting to purchase drugs at lower costs.
- (b) Requires the board to prepare educational documents and materials on the information provided under paragraph (a). Specifies related requirements.
- (c) Requires the board, at least annually, to encourage licensed pharmacists and pharmacies to make available to patients information on sources of lower cost prescription drugs, and provide these licensees with the address for the web page established under paragraph (a).

5 Requirements.

Amends § 151.252, subd. 1. Requires a manufacturer of insulin to pay to the Board of Pharmacy the applicable insulin registration fee specified in § 151.254, by June 1 of each year, beginning June 1, 2020. Allows the board to assess a late fee, and requires the board to deposit fees into the insulin assistance account.

6 Insulin registration fee.

Adds § 151.77.

- Subd. 1. Definition. Defines "manufacturer" and "wholesaler."
- **Subd. 2. Reporting requirements.** (a) By March 1 of each year, beginning March 1, 2020, requires manufacturers and wholesale drug distributors to report to the board every sale, delivery, or other distribution within or into the state of insulin that occurred during the previous calendar year in a manner specified by the board. Allows the board to assess an administrative penalty of \$100 per day for noncompliance.
- (b) By March 1 of each year, beginning March 1, 2020, requires owners of pharmacies with at least one location in the state to report to the board the

Section Description

intracompany delivery or distribution into the state of insulin, if this is not reported by a licensed wholesale drug distributor. Requires reporting to be done as specified by the board, for deliveries and distributions for the previous calendar year.

- **Subd. 3. Determination of the manufacturer's registration fee.** (a) Requires the board to annually assess manufacturers a fee that in the aggregate equals the total cost of the insulin assistance program, including administrative costs, and to determine each manufacturer's annual registration on a pro-rated basis based on the manufacturer's percentage of the total number of units reported. Requires the commissioner of human services to notify the board of the estimated costs of the program for the first fiscal year.
- (b) Requires the board to notify each manufacturer, by April 1 of each year beginning April 1, 2020, of the annual fee amount that must be paid.
- (c) Allows a manufacturer to dispute the registration fee within 30 days after notification, and specifies the procedures to be used. Requires a manufacturer disputing the fee to still remit the fee.

7 Insulin assistance program.

Adds § 256.937.

- **Subd. 1. Establishment.** (a) Requires the commissioner of human services to implement an insulin assistance program by July 1, 2020. Requires the commissioner to:
- (1) pay participating pharmacies for insulin dispensed to an eligible individual;
- (2) maintain an up-to-date list of eligible individuals and make the list available to participating pharmacies; and
- (3) ensure pharmacy participation in all areas of the state and maintain an up to date list of participating pharmacies on the department's website.
- **Subd. 2. Eligible individual.** (a) Requires individuals to submit a signed application to the commissioner. To be eligible, an individual must:
- (1) be a resident of Minnesota;
- (2) not be eligible for Medicare, MA, or MinnesotaCare;
- (3) have a family income that does not exceed 400 percent of FPG; and
- (4) be uninsured, have no prescription drug coverage, or be covered by an individual or group health plan with an out-of-pocket limit of \$5,000 or greater.

Section Description

- (b) Requires the commissioner to develop an application form and make this form available. States that applicants must include their income and insurance status with the application. Provides that the commissioner may require the applicant to submit additional information if necessary to verify eligibility.
- (c) Requires the commissioner to determine eligibility for the program, upon receipt of the application and any additional information, and issue persons determined eligible with an identification card. Provides that the card is valid for 90 days and may be used at any participating pharmacy. States that an individual is not eligible for renewal until 12 months from the card's expiration date, at which time a new application must be submitted.
- **Subd. 3. Pharmacy participation.** (a) States that pharmacy participation is voluntary. In order to participate, requires pharmacies to register with the commissioner and agree to reimbursement and contract terms. Allows a pharmacy to withdraw from participation by providing written notice.
- (b) Requires pharmacies to dispense insulin to eligible individuals who present a valid prescription and an identification card.
- (c) Requires eligible individuals to pay to the pharmacy a copayment equal to the MinnesotaCare prescription drug copayment (currently \$6 generic/\$20 brand name).
- (d) For persons with coverage through a health plan, requires the pharmacy to process the insulin according to the health plan.
- (e) Requires pharmacies, when dispensing insulin to an eligible individual, to provide the address for the web page established under section 151.06, subdivision 3, paragraph (a).

8 Insulin assistance account.

Adds § 256.938.

- **Subd. 1. Establishment.** Establishes the insulin account in the special revenue fund in the state treasury. Requires insulin registration fees collected by the Board of Pharmacy to be deposited into the account.
- **Subd. 2. Use of account funds.** For FY 2021 and subsequent fiscal years, appropriates money in the account to the Commissioner of Human Services to fund the insulin assistance program.



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