

SB 9 A STAFF MEASURE SUMMARY

House Committee On Health Care

Prepared By: Oliver Droppers, LPRO Analyst

Meeting Dates: 4/16, 4/25

WHAT THE MEASURE DOES:

Permits pharmacists to prescribe and dispense emergency refills of insulin and associated insulin-related devices and supplies. Defines "insulin" and "insulin-related devices and supplies." Limits emergency prescription to lesser of 30-day supply or smallest available package. Limits person to three emergency refills per calendar year. Establishes training, assessment, documentation, and information requirements for pharmacists dispensing emergency refills. Requires State Board of Pharmacy to adopt rules. Requires health benefit plans and medical assistance programs to provide payment or reimbursement for emergency refills of insulin and associated insulin-related devices and supplies. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Individuals with diabetes; high-cost of insulin, patients having to ration
- Lack of access to insulin; avoidable emergency department visits
- Granting pharmacists prescribing authority to ensure access to insulin on emergency basis
- Price of insulin, diabetic supplies, insurer costs, manufacturer discounts and rebates
- Ability for pharmacists to confirm insurance eligibility and coverage; patient co-pay at point of service
- Pharmacist's ability to conduct a clinical assessment prior to dispensing insulin; coverage of and reimbursement for assessment by the insurer
- Insulin available as an over-the-counter medication

EFFECT OF AMENDMENT:

No amendment.

BACKGROUND:

In its 2015 Oregon Diabetes Report, the Oregon Health Authority's (OHA) Public Health Division estimated that diabetes affects approximately 287,000 adult Oregonians, or nearly 1 in 10. The prevalence of diabetes has also steadily increased, more than doubling since 1990 and accounting for 3.5 percent of deaths in Oregon in 2012. Insulin therapy is used in the treatment of diabetes to help keep a person's blood sugar within the target range. Failure to appropriately manage blood sugar levels can have serious health consequences, including impacting the heart, kidneys, and eyes. Once diagnosed, diabetes requires self-management, including medications, testing, and monitoring blood glucose levels. Treatment requires patient education, special equipment, and supplies, and may become costly, especially for diabetics with health plans that require out-of-pocket costs (e.g., high deductible health plans). In 2012, diabetes was responsible for over 4,000 hospitalizations in Oregon at a cost of \$44 million with an average cost of approximately \$10,000 per hospitalization (OHA report, 2015).

Several states have adopted legislation authorizing pharmacists to prescribe and dispense insulin for diabetic patients in emergency situations, often limited to a 30-day supply (or less). Oregon House Bill 2397 (2017) directed the State Board of Pharmacy to establish, by rule, the formulary for drugs and devices that pharmacists may prescribe and dispense to patients under specific circumstances, including diabetic testing supplies and emergency refills of insulin. As part of the rulemaking process, the Board can choose to allow pharmacists to use their professional judgement in permitting them to give emergency refills of prescription drugs (OAR

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855-041-1120).

Senate Bill 9-A allows pharmacists to dispense emergency refills of insulin, insulin-related devices, and supplies for limited circumstances.

1st Chamber vote (Senate): Ayes, 30.