GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2015

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HOUSE BILL 839

	Short Title:	Pharm. Drug Cost/Utilization Reporting.	(Public)		
	Sponsors:	Representatives Collins, Saine, J. Bell, and Hanes (Primary Sponsors). For a complete list of Sponsors, refer to the North Carolina General Assembly Web	Site.		
	Referred to:	Health, if favorable, Insurance.			
	April 15, 2015				
1	A BILL TO BE ENTITLED				
2	AN ACT TO REQUIRE MANUFACTURERS OF PHARMACEUTICAL DRUGS TO				
3	REPORT COST AND UTILIZATION INFORMATION.				
4	The General Assembly of North Carolina enacts:				
5	SECTION 1. Article 50 of Chapter 58 is amended by adding a new Part to read:				
6	"Part 8. Pharmacy Cost Reporting.				
7	" <u>§ 58-50-300. Purpose.</u>				
8	It is the intent of the General Assembly to make information available to the public about				
9	the cost and utilization of pharmaceutical drugs. To fulfill this goal, the General Assembly				
10	finds that there should be annual reporting of drug costs and use that would be of use by				
11	policymakers, government agencies and others to understand pharmacy cost trends.				
12	" <u>§ 58-50-305. Pharmacy cost reporting.</u>				
13		ach manufacturer of a brand medication that is made available in North C	<u>arolina</u>		
14		port on pharmaceutical costs as outlined in this section.			
15		he report shall include the following for each drug required in subsection	<u>n (c) of</u>		
16	this section:				
17	<u>(1</u>)				
18	<u>(2</u>	Average wholesale cost of the drug as filed with the Federal Food an	d Drug		
19		Administration and, for each drug, a five-year history of average wh	olesale		
20		price expressed as a percentage and the month each increase took effe	<u>ct.</u>		
21	<u>(3</u>	<u>Total research and development costs paid by the manufacturer</u>	in the		
22		production of the drug.			
23	<u>(4</u>) Total administrative costs, marketing and advertising costs for the pro	motion		
24		of the drug, and costs associated with direct-to-consumer coupo	ns and		
25		amount redeemed.			
26	<u>(5</u>)	() Total profit as represented in total dollars and a percentage of total co	mpany		
27		profit derived from the sale of the drug.			
28	(6	5) Total amount of financial assistance the manufacturer has provided t	hrough		
29		patient prescription assistance programs if such programs are available			
30	<u>(c)</u> <u>Th</u>	he annual report required in subsection (a) of this section shall inclu	ide the		
31		following branded pharmaceutical drugs:			
32	(1)		ow the		
33	<u> </u>	growth of cancerous cells.			
34	<u>(2</u>)		nent of		
35	<u></u>	pain.			



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1	(3)	Each orally administered medication used for the treatment of depression,	
2		including Selective serotonin reuptake inhibitors (SSRIs), commonly	
3		referred to as antidepressants.	
4	<u>(4)</u>	Each orally administered bronchodilator, anticholinergics, anti-inflammatory	
5		drug such as inhaled corticosteroids or mast cell stabilizers, used for the	
6		treatment of asthma, allergies, and other respiratory problems.	
7	<u>(5)</u>	Each orally administered statin drug used to lower the level of cholesterol in	
8		the blood.	
9	<u>(6)</u>	Each medication administered by injection, including insulin.	
10	<u>(7)</u>	Each biologic medication as defined under section 351 of the federal Public	
11		Health Services Act (42 U.S.C. § 262).	
12	(d) Information required in subsections (b) and (c) of this section shall be filed annually		
13	with the Department on a form prescribed by the Commissioner and shall be submitted no later		
14	than May 1 of each year.		
15		Commissioner shall issue annually a report outlining the information submitted	
16	under this section. The report shall be submitted to the General Assembly and shall be posted		
17	on the Department's Web site."		
18		FION 2. The Commissioner of Insurance shall convene an advisory	
19	workgroup to make recommendations regarding the report form required under G.S. 58-50-305,		
20	as enacted by this act. The workgroup shall include representatives from the pharmaceutical		
21	industry, health insurance plans, pharmacy benefit managers, State agencies, consumer		
22	advocates, and physicians.		
23	SECTION 3. This act is effective when it becomes law.		