

**SB 9 A STAFF MEASURE SUMMARY****Carrier:** Rep. Drazan, Rep. Prusak**House Committee On Health Care****Action Date:** 04/25/19**Action:** Do Pass the A-Eng bill.**Vote:** 11-0-0-0**Yeas:** 11 - Alonso Leon, Boles, Drazan, Greenlick, Hayden, Keny-Guyer, Mitchell, Noble, Nosse, Prusak, Salinas**Fiscal:** Fiscal impact issued**Revenue:** No revenue impact**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. Limits emergency amount to lesser of 30-day supply or smallest available package. Limits recipient 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. Defines terms. Declares emergency, effective on passage.

**ISSUES DISCUSSED:**

- Individuals with diabetes; high cost of insulin; patients having to ration insulin
- 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 as an over-the-counter medication

**EFFECT OF AMENDMENT:**

No amendment.

**BACKGROUND:**

In 2015, 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 a 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 high-deductible health plans who must cover out-of-pocket costs. 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.

Several states have enacted legislation authorizing pharmacists to prescribe and dispense insulin for diabetic patients in emergency situations, often limited to a 30-day supply (or less). In Oregon, House Bill 2397 (2017) directed the State Board of Pharmacy to establish parameters by rule, for pharmacists to prescribe and dispense

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drugs and devices to patients under specific circumstances, including diabetic testing supplies and emergency refills of insulin. As part of its rulemaking process, the Board may choose to allow pharmacists to exercise discretion, rather than mandate parameters.

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