H.391

Introduced by Representative Copeland-Hanzas of Bradford

Referred to Committee on

Date:

Subject: Health; prescription drugs; manufacturers; consumer education

Statement of purpose of bill as introduced: This bill proposes to require state-approved direct-to-consumer information regarding prescription drugs and to increase the fee imposed on prescription drug manufacturers to fund academic detailing activities.

An act relating to evidence-based prescription drug information for Vermont consumers

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. 18 V.S.A. § 4622 is amended to read:

§ 4622. EVIDENCE-BASED EDUCATION PROGRAM

(a)(1) The ~~department of health~~ Department of Health, in collaboration with the ~~attorney general~~ Attorney General, the University of Vermont ~~area health education centers program~~ Area Health Education Centers Program, and the ~~department of Vermont health access~~ Department of Vermont Health Access, shall establish an evidence-based prescription drug education program for health care professionals and consumers designed to provide information

and education on the therapeutic and cost-effective utilization of prescription drugs to physicians, pharmacists, and other health care professionals authorized to prescribe and dispense prescription drugs, as well as to Vermont residents who take or may take prescription drugs. To the extent practicable, the program shall use the evidence-based standards developed by the Blueprint for Health. The ~~department of health~~ Department of Health may collaborate with other states in establishing this program.

(2) The program shall notify prescribers about commonly used brand-name drugs for which the patent has expired within the last 12 months or will expire within the next 12 months. The ~~departments of health and of Vermont health access~~ Departments of Health and of Vermont Health Access shall collaborate in issuing the notices.

(3) The program shall provide evidence-based direct-to-consumer information about prescription drugs, including the benefits of using generic medications when available and appropriate.

(4) To the extent permitted by funding, the program may include population-based medication management.

(b) The ~~department of health~~ Department of Health shall request information and collaboration from physicians, pharmacists, private insurers, hospitals, pharmacy benefit managers, the ~~drug utilization review board~~ Drug Utilization Review Board, medical schools, the ~~attorney general~~ Attorney

General, and any other programs providing an evidence-based education to prescribers ~~on~~ or consumers regarding prescription drugs in developing and maintaining the program.

(c) The ~~department of health~~ Department of Health may contract for technical and clinical support in the development and the administration of the program from entities conducting independent research into the effectiveness of prescription drugs.

(d) The ~~department of health~~ Department of Health and the ~~attorney general~~ Attorney General shall collaborate in reviewing the marketing activities of pharmaceutical manufacturing companies in Vermont and determining appropriate funding sources for the program, including awards from suits brought by the ~~attorney general~~ Attorney General against pharmaceutical manufacturers.

Sec. 2. 33 V.S.A. § 2004 is amended to read:

§ 2004. MANUFACTURER FEE

(a) Annually, each pharmaceutical manufacturer or labeler of prescription drugs that are paid for by the ~~department~~ Department of Vermont ~~health access~~ Health Access for individuals participating in Medicaid, ~~the Vermont Health Access Program,~~ Dr. Dynasaur, or VPharm~~, or VermontRx~~ shall pay a fee to the ~~agency of human services~~ Agency of Human Services. The fee shall be ~~0.5~~ 0.75 percent of the previous calendar year's prescription drug spending by the

~~department~~ Department and shall be assessed based on manufacturer labeler codes as used in the Medicaid rebate program.

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Sec. 3. EFFECTIVE DATE

This act shall take effect on January 1, 2014.