GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2021

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SENATE BILL DRS45558-NEa-117

Short Title: Integrity in Prescription Drug Pricing Act. (Public)

Sponsors: Senators Mohammed, Woodard, and Crawford (Primary Sponsors).

Referred to:

A BILL TO BE ENTITLED

AN ACT TO LIMIT AN INSURED'S COPAYMENT FOR INSULIN, TO AUTHORIZE PHARMACISTS TO PROVIDE INFORMATION REGARDING THE AMOUNT AN INDIVIDUAL WOULD PAY FOR A PRESCRIPTION DRUG WITHOUT INSURANCE COVERAGE, AND TO REQUIRE PHARMACISTS TO INFORM INDIVIDUALS REGARDING LOWER COST PRESCRIPTIONS.

The General Assembly of North Carolina enacts:

SECTION 1. Article 3 of Chapter 58 of the General Statutes is amended by adding a new section to read:

"§ 58-3-295. Coverage for insulin.

- (a) An insured's copayment under a health benefit plan that provides coverage for insulin shall not exceed thirty dollars (\$30.00) for a month's supply of insulin, or a proportional copayment for a quantity of insulin other than a month's supply, regardless of the amount or the types of insulin needed.
- (b) The provisions of this section apply to insurers and pharmacy benefits managers, as defined in G.S. 56-56A-1."

SECTION 2. G.S. 58-56A-3(a) reads as rewritten:

"(a) A pharmacy or pharmacist shall have the right to provide provide (i) an insured information regarding the amount of the insured's cost share for a prescription drug drug and (ii) an individual for whom the pharmacy or pharmacist is filling a prescription drug information regarding the amount an individual would pay for the drug without coverage under a health benefit plan. Neither a pharmacy nor a pharmacist shall be penalized by a pharmacy benefits manager for discussing any information described in this section or for selling a lower-priced drug to the insured if one is available."

SECTION 3. Article 4A of Chapter 90 of the General Statutes is amended by adding a new section to read:

"§ 90-85.15C. Duty to provide information regarding lower cost alternative prescriptions.

All pharmacists are required to inform, or to designate an individual under the pharmacist's supervision to inform, all individuals for whom the pharmacist is filling a prescription drug or device about the availability of a therapeutically equivalent brand name drug or device that is the lowest cost alternative to the originally prescribed drug or device and the cost difference between the two prescribed drugs or devices."

SECTION 4. There is appropriated from the General Fund to the Department of Health and Human Services (DHHS) the sum of two hundred fifty thousand dollars (\$250,000) in nonrecurring funds for the 2022-2023 fiscal year to provide funds for staffing and technology



- necessary to equip DHHS with the ability to collect and report data related to this act to the General Assembly and the Council of State.
- SECTION 5. Sections 1, 2, and 3 of this act become effective October 1, 2022, and apply to contracts issued, renewed, or amended on or after that date. Section 4 of this act becomes effective July 1, 2022. The remainder of this act is effective when it becomes law.

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