

The Commonwealth of Massachusetts

PRESENTED BY:

Jason M. Lewis

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act to reduce healthcare costs by promoting provider education through academic detailing.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Jason M. Lewis	31st Middlesex	1/20/2011
Patricia D. Jehlen		2/2/2011
Jonathan Hecht	29th Middlesex	2/3/2011

By Mr. Lewis of Winchester, a petition (accompanied by bill, House, No. 3367) of Jason M. Lewis, Patricia D. Jehlen and Jonathan Hecht for legislation to reduce health care costs by promoting additional education on cost effectiveness to providers. Public Health.

The Commonwealth of Massachusetts

In the Year Two Thousand Eleven

An Act to reduce healthcare costs by promoting provider education through academic detailing.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. Chapter 111 of the General Laws, as appearing in the 2008 Official Edition,
 is hereby amended by striking out section 4N and inserting in place thereof the following
 section:-

4 Section 4N. (a) The department shall, in cooperation with Commonwealth Medicine at 5 the University of Massachusetts medical school, develop, implement and promote an evidence-6 based outreach and education program about the therapeutic and cost-effective utilization of 7 prescription drugs for physicians, pharmacists and other health care professionals authorized to 8 prescribe and dispense prescription drugs. In developing the program, the department shall 9 consult with physicians, pharmacists, private insurers, hospitals, pharmacy benefit managers, the 10 MassHealth drug utilization review board and the University of Massachusetts medical school.

(b) The program shall arrange for physicians, pharmacists and nurses under contract with
 the department to conduct face-to-face visits with prescribers, utilizing evidence-based materials

13 and borrowing methods from behavioral science, educational theory and, where appropriate, 14 pharmaceutical industry data and outreach techniques; provided, however, that to the extent 15 possible, the program shall inform prescribers about therapeutically-equivalent pharmaceutical 16 alternatives or other evidence-based treatment options.

17 The program shall include outreach to: physicians and other health care practitioners who 18 participate in MassHealth, the subsidized catastrophic prescription drug insurance program 19 authorized in section 39 of chapter 19A or the commonwealth care health insurance program; 20 other publicly-funded, contracted or subsidized health care programs; academic medical centers; 21 and other prescribers.

22 The department shall, to the extent possible, utilize or incorporate into its program other 23 independent educational resources or models proven effective in promoting high quality, 24 evidenced-based, cost-effective information regarding the effectiveness and safety of 25 prescription drugs, including, but not limited to: (i) the Pennsylvania PACE/Harvard University 26 Independent Drug Information Service; (ii) the Academic Detailing Program of the University of 27 Vermont College of Medicine Area Health Education Centers; (iii) the Oregon Health and 28 Science University Evidence-based Practice Center's Drug Effectiveness Review project; and 29 (iv) the South Carolina evidence-based peer-to-peer education program outreach program and (v) 30 research on academic detailing to improve prescribing by faculty at Harvard Medical 31 School/Brigham and Women's Hospital.

32 (c) The department may establish and collect fees for subscriptions and contracts with
33 private payers. The department may seek funding from nongovernmental health access
34 foundations and undesignated drug litigation settlement funds associated with pharmaceutical

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35 marketing and pricing practices, as well as other sources to ensure the ongoing support for this36 service.

37 (d) The department shall establish an adequate and sustainable funding source for the 38 academic detailing program. In determining an appropriate amount and source for this funding 39 the department shall review successful academic detailing programs in other states. Sources of 40 funding the department may consider include, but are not limited to, fees charged to 41 manufacturers and labelers doing business in the commonwealth, either as a flat fee or as a fixed 42 percentage of the cost to the state in purchasing drugs from the manufacturer/labeler as is used in 43 the state of Vermont; a pharmaceutical sales representative licensing program as is used in the 44 District of Colombia; a fee charged to health insurers in the commonwealth; or some 45 combination of the above.

46 SECTION 2. The department of public health shall promulgate regulations implementing47 this act no later than 6 months after its passage.