HOUSE DOCKET, NO. 3049 FILED ON: 1/16/2015

HOUSE . . . . . No. 3465

The Commonwealth of Massachusetts

PRESENTED BY:

Brian M. Ashe

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 relative to patient access.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Brian M. Ashe	*2nd Hampden*	*1/16/2015*
Chris Walsh	*6th Middlesex*	*8/15/2019*
Michael O. Moore	*Second Worcester*	*4/9/2015*
Walter F. Timilty	*7th Norfolk*	*4/10/2015*

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HOUSE . . . . . No. 3465

By Mr. Ashe of Longmeadow, a petition (accompanied by bill, House, No. 3465) of Brian M. Ashe and others relative to analyzing the impact on health care costs as relates to the use of co-pay assistance programs. Public Health.

The Commonwealth of Massachusetts

In the One Hundred and Eighty-Ninth General Court
(2015-2016)

An Act relative to patient access.

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. Section 131 of chapter 139 of the acts of 2012 is hereby repealed.

SECTION 2. Section 226 of said chapter 139 is hereby repealed.

SECTION 3. Notwithstanding any special or general law to the contrary, the health policy commission, in consultation with the department of public health, shall conduct and complete an analysis of the impact on health care costs of the use of co-pay assistance programs, including without limitation discounts, rebates, product vouchers or other reductions in an individual's out of pocket expenses for biological products and prescription drugs authorized under section 3 of chapter 175H of the General Laws from August 1, 2012 to July 31, 2017. The health policy commission shall file a report of its findings with the clerks of the senate and house of representatives, the house and senate committees on ways and means and the joint committee on health care financing on or before December 31, 2017. The report shall include, but not be limited to: (i) the total number of purchase transactions for biological products and prescription

drugs for which out-of-pocket expenses were reduced by 1 or more co-pay assistance programs,; (ii) the total value of the savings in such out-of-pocket expenses derived by purchasers as a result of co-pay assistance programs; (iii) an analysis of the types of biological products and prescription drugs for which co-pay assistance programs were most frequently utilized; (iv) a comparison of any change in utilization of generic versus brand name prescription drugs associated with the utilization of co-pay assistance programs; (v) an analysis of the effect of co-pay assistance programs on patient adherence to prescribed drugs; and (vi) an analysis of the availability of co-pay assistance programs upon renewals. To conduct its evaluation, the health policy commission may: (1) contract with an outside organization with expertise in the analysis of health care financing; and (2) require that manufacturers of biological products and prescription drugs report on the number and types of co-pay assistance programs that such manufacturers have utilized in the commonwealth.