THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE RESOLUTION

No. 70   Session of 2013

INTRODUCED BY MENSCH, ERICKSON, YUDICHAK, VULAKOVICH, GREENLEAF, BAKER, BREWSTER, DINNIMAN, VOGEL, SOLOBAY, LEACH, McILHINNEY, HUGHES, BROWNE, ARGALL, SCHWANK, TOMLINSON, STACK AND WASHINGTON, MARCH 26, 2013

AS AMENDED, OCTOBER 21, 2013

A RESOLUTION

1 Directing the Legislative Budget and Finance Committee to study
2   the issue of specialty tier prescription drug pricing in
3   Pennsylvania.

4   WHEREAS, Traditional prescription drug benefit plans include

5 a multitiered drug formulary structure; for example, generic

6 drugs are in the first tier, preferred brand name drugs are in

7 tier two, nonpreferred brand drugs are in tier three and

8 specialty tiers are typically the fourth or greater tier; and

9   WHEREAS, Specialty tier drugs are commonly prescription drugs

10 used to treat conditions such as hemophilia, human

11 immunodeficiency virus (HIV), hepatitis, multiple sclerosis,

12 lupus, some cancers, rheumatoid arthritis and others; and

13   WHEREAS, The specialty tier changes the patient's cost from a

14 fixed copayment to a coinsurance as a percent of the cost of the

15 drug; and

16   WHEREAS, A patient may pay a copayment which is increased

17 with each tier but is a fixed amount for medications on the

1 lower tiers of an insurance formulary; and

2   WHEREAS, The specialty tiers require the patient to pay a

3 coinsurance or percentage, 20% to 30% or more, of the drug cost;

4 and

5   WHEREAS, The number of specialty drugs is expected to grow

6 more than 25% per year, both in increased utilization and

7 increased unit cost; therefore be it

8   RESOLVED, That the Legislative Budget and Finance Committee

9 conduct a study of specialty tier prescription drugs to

10 determine the impact on access and patient care; and be it

11 further

12   RESOLVED, That the committee report its findings and

13 recommendations to the Senate no later than ~~January 30, 2014~~   **<--**

14 JULY 15, 2014.   **<--**