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 AND ARGALL, MARCH 26, 2013

REFERRED TO PUBLIC HEALTH AND WELFARE, MARCH 26, 2013

A RESOLUTION

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

18 lower tiers of an insurance formulary; and

WHEREAS, The specialty tiers require the patient to pay a
 coinsurance or percentage, 20% to 30% or more, of the drug cost;
 and

WHEREAS, The number of specialty drugs is expected to grow
more than 25% per year, both in increased utilization and
increased unit cost; therefore be it

7 RESOLVED, That the Legislative Budget and Finance Committee 8 conduct a study of specialty tier prescription drugs to 9 determine the impact on access and patient care; and be it 10 further

11 RESOLVED, That the committee report its findings and

12 recommendations to the Senate no later than January 30, 2014.