



Drug Importation Stakeholder Update Senate Bill 19-005

Presented by:

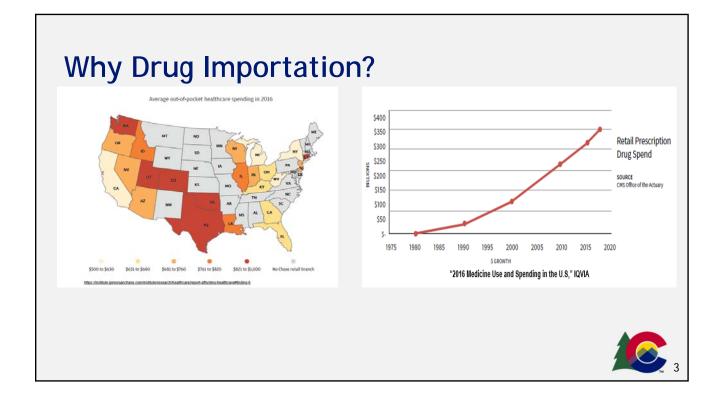
Kelly Swartzendruber, PharmD, Drug Importation, Health Care Policy & Finance



Agenda

- Why Drug Importation?
- Legislative Framework for Drug Importation
- Importation timeline
- Program Feedback Process and Actions Taken
- Overview of the Process
- Key Proposal points
 - o Program Costs/Profits
 - Consumer Savings
 - Quality and Safety
- Key Questions for stakeholders
- Next steps
- Final Questions





Legislative Framework for Drug Importation

Federal Food Drug and Cosmetic Act (FDCA)

- Section 804 permits importation and reimportation of prescription drugs from Canada by a pharmacist or wholesaler, provided the drugs meet certain minimum standards. The Program must:
 - O Pose no additional risk to the public's health and safety
 - O Results in a significant reduction in costs to consumers
 - O HHS must certify/approve a program to proceed

Senate Bill 19-005

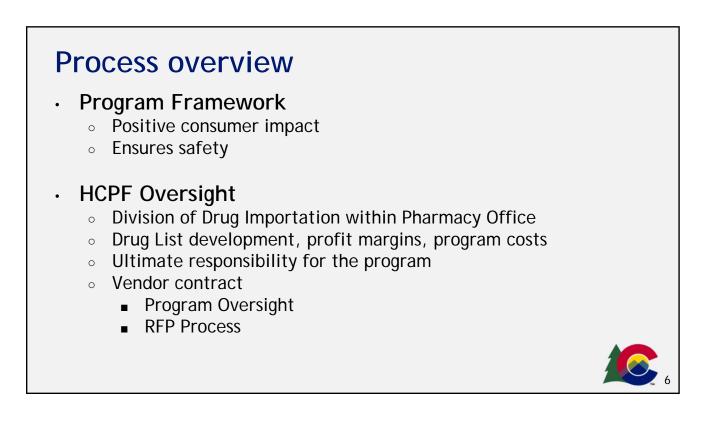
Identify and contract with one/more vendors to develop a drug list, identify/facilitate contracts with participating suppliers and importers that meet safety and quality requirements and conduct safety assurance measures and other oversight processes

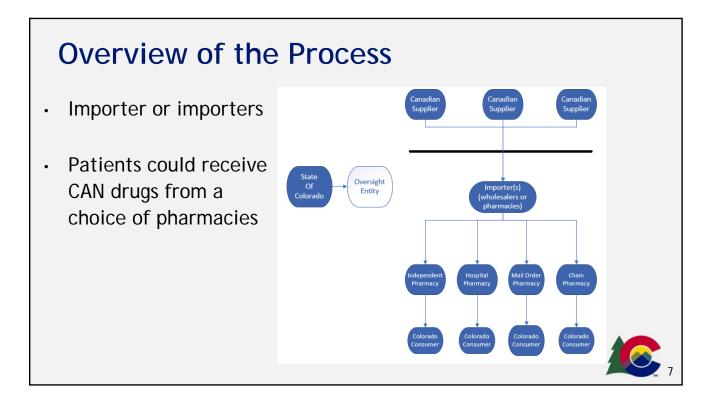
Several States looking at this:

Colorado, Florida, Maine, Vermont, Utah









Key Proposal Points: Program Costs/Profits

- SB19-005 Requirements:
 - Profit margin on imported drugs can't be more than profit margin of the US versions of the same drugs
 - Program costs can include a fee but that fee can't significantly reduce consumer savings
- Supply chain mark-up of 45% (from Canadian acquisition costs)
 - Repackaging/Relabeling
 - Testing
 - Records/Recall Management/Profit to supply chain
 - Wholesalers
 - Pharmacies

Key Proposal Points: Consumer Savings Drug List Details

- Excluded drugs from Importation include:
 - o Generic products that would violate U.S. patent laws
 - o Controlled substances
 - o Biologics (will include insulin starting in March 2020)
 - o Infused drugs
 - o Intravenously injected drugs
 - o Drugs inhaled during surgery
 - o Parenteral drug
- Suggested drugs types for importation include:
 - o High cost brand name drugs
 - o High volume drugs
 - o Drugs with US shortages



Key Proposal Points: Consumer Savings Drug List Details, Cont.

Initial Drug List Parameters

 \circ Total cost of the drug (copay and plan)

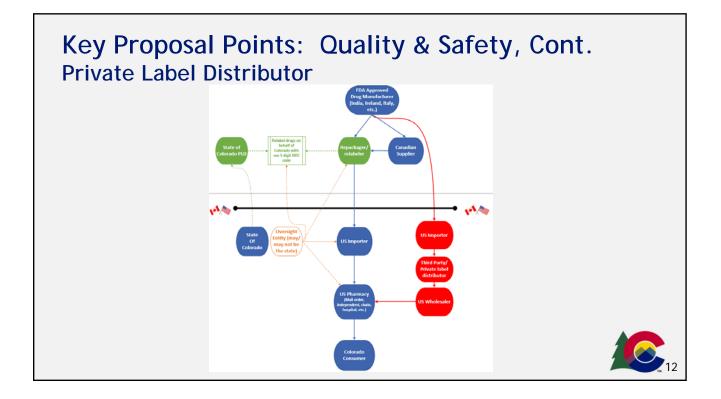
- Total charge for ages 19-64
- Total member liability (all ages)
- Volume of Prescriptions number of patients
- Patent law rules

Drug List Examples - DRAFT

- o Asthma (Breo Ellipta, Dulera, Advair Diskus, Ventolin HFA)
- HIV (Atripla, Triumeq, Truvada)
- Epi-Pen & Epi-Pen Jr.
- o Hormones (Estring, Premarin Cream, Synthroid)
- o Misc.: Invokana, Ibrance, Gilenya

Key Proposal Points: Quality & Safety Program Requirements

- Compliance with DSCSA
 - Track and Trace requirements from manufacturer to dispenser of the medication
 - Requires serialization once enacted
- Private Label Distributor Concept
 - State of Colorado to become a Private Label Distributor
 - o No manufacturing/processing
 - o Markets and Distributes under it's own trade name
 - Labels drug to be compliant with FDA requirements
 - o Can be state OR a contractor hired by the state



Next Steps: Drug Importation

- Collate feedback
- Use feedback to add detail to the program at all levels
- Create Initial Application to HHS
 - Send to HHS by 1/15/20
- For more information:
 - https://www.colorado.gov/hcpf/drug-importation
 - In-box for questions
 - Sign-up form for updates about the program

References

- <u>https://institute.jpmorganchase.com/institute/research/healthcare/report-affording-healthcare#finding-6</u>
- "2016 Medicine Use and Spending in the U.S.," IQVIA
- Federal Food Drug and Cosmetic Act (FDCA), Section 804
- Colorado Senate Bill 19-005 <u>https://leg.colorado.gov/sites/default/files/2019a_005_signed.pdf</u>
- https://uscode.house.gov/view.xhtml?req=(title:21%20section:384%20edition:prelim)
- <u>https://www.accessdata.fda.gov/cder/sb-drls/topic2/topic2/da_01_02_0050.htm</u>
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- FDAimports.com
- NASHP (National Academy of Health State Policy)