13.8113.02000

FIRST ENGROSSMENT

Sixty-third Legislative Assembly of North Dakota

ENGROSSED SENATE BILL NO. 2066

Introduced by

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Human Services Committee

(At the request of the Department of Human Services)

- 1 A BILL for an Act to amend and reenact section 50-24.6-04 of the North Dakota Century Code,
- 2 relating to prior authorization of antineoplastic agents.

3 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

- 4 **SECTION 1. AMENDMENT.** Section 50-24.6-04 of the North Dakota Century Code is amended and reenacted as follows:
- 6 **50-24.6-04. Prior authorization program.**
 - The department shall develop and implement a prior authorization program that meets the requirements of 42 U.S.C. 1396r-8(d) to determine coverage of drug products when a medical assistance recipient's health care provider prescribes a drug that is identified as requiring prior authorization. Authorization must be granted for provision of the drug if:
 - a. The drug not requiring prior authorization has not been effective, or with reasonable certainty is not expected to be effective, in treating the recipient's condition:
 - The drug not requiring prior authorization causes or is reasonably expected to cause adverse or harmful reactions to the health of the recipient; or
 - c. The drug is prescribed for a medically accepted use supported by a compendium or by approved product labeling unless there is a therapeutically equivalent drug that is available without prior authorization.
 - 2. For any drug placed on the prior authorization program, the department shall provide medical and clinical criteria, cost information, and utilization data to the drug use review board for review and consideration. The board may consider department data and information from other sources to make a decision about placement of the drug on prior authorization.

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1 Except for quantity limits that may be no less than the pharmaceutical manufacturer's 2 package insert, or brand name drugs with a generic equivalent drug for which the cost 3 to the state postrebate is less than the brand name drugs, in the aggregate, the 4 department may not prior authorize the following medication classes: 5 Antipsychotics: a. 6 b. Antidepressants; 7 Anticonvulsants; C. 8 d. Antiretrovirals, for the treatment of human immunodeficiency virus; and 9 Antineoplastic agents, for the treatment of cancer; and e. 10 f. Stimulant medication used for the treatment of attention deficit disorder and 11 attention deficit hyperactivity disorder. 12 4. The department may prior authorize antineoplastic agents for the treatment of cancer 13 to review the use of the agent to ensure it is being used as determined appropriate by 14 the United States food and drug administration or a national standard and in 15 accordance with section 1927 of the Social Security Act [42 U.S.C. 1396r-8] and 16 title 42 of the Code of Federal Regulations. The department may not prefer one 17 antineoplastic agent over another. If an antineoplastic agent prior authorization shows 18 that the agent meets the definition of medically accepted indication under section 1927 19 of the Social Security Act [42 U.S.C. 1396r-8] and title 42 of the Code of Federal 20 Regulations, the department shall approve the agent. 21 <u>5.</u> The department may use contractors to collect and analyze the documentation 22 required under this section and to facilitate the prior authorization program. 23 5.6. The department shall consult with the board in the course of adopting rules to 24 implement the prior authorization program. The rules must: 25 a. Establish policies and procedures necessary to implement the prior authorization 26 program. 27 b. Develop a process that allows prescribers to furnish documentation required to 28 obtain approval for a drug without interfering with patient care activities. 29 Allow the board to establish panels of physicians and pharmacists which provide 30 expert guidance and recommendations to the board in considering specific drugs

or therapeutic classes of drugs to be included in the prior authorization program.