

EMERGENCY SUPPLY OF INSULIN

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Senate Bills 155 (S-1) and 156 (S-3) as passed by the Senate

Sponsor: Sen. Kevin Daley

House Committee: Health Policy

Senate Committee: Health Policy and Human Services

Complete to 5-5-21

Analysis available at
<http://www.legislature.mi.gov>

SUMMARY:

Senate Bill 155 would amend the Public Health Code to allow pharmacists to dispense an emergency supply of insulin in certain situations, and Senate Bill 156 would make a complementary amendment to the Insurance Code to require insurers to cover the emergency supply as long as it complies with the provisions of SB 155.

Senate Bill 155 would add a section to Part 177 (Pharmacy Practice and Drug Control) of the Public Health Code to allow an individual to receive up to three **emergency supplies** of insulin from a pharmacist per year, even if the individual has no refills remaining, as long as all of the following are true:

- The individual has a **qualified prescription for insulin** in his or her name.
- The individual has received insulin from that pharmacy before.
- The pharmacist determines that failure to dispense the insulin would interrupt the individual's care and have a significant adverse effect on the individual's well-being.

Emergency supply would mean up to a 30-day supply.

Qualified prescription for insulin would mean a prescription for insulin that was issued within the 12-month period immediately preceding the date the individual requests the emergency supply of insulin.

If an individual has received an emergency supply of insulin, a pharmacist could not dispense another in the same calendar year unless the individual has since obtained a new qualified prescription for insulin that has no remaining authorized refills.

If an emergency supply of insulin were dispensed pursuant to this provision, the receipt provided by the pharmacist would have to include a reference to the section of law proposed by the bill, the name of the original prescriber of the exhausted prescription, and the name of the pharmacist dispensing the emergency supply.

A prescriber or pharmacist would not be subject to criminal prosecution, civil liability, or administrative sanction as a result of a pharmacist's dispensing such an emergency supply.

The bill would require the Michigan Board of Pharmacy to promulgate rules to implement this provision.

MCL 333.17703 et seq.

Senate Bill 156 would add a section to Chapter 34 (Disability Insurance) of the Insurance Code to require an insurer that delivers, issues for delivery, or renews in Michigan a health insurance policy that provides coverage for prescription drugs to cover any emergency supply of insulin covered under the insured's policy and dispensed as provided in SB 155.

Proposed MCL 500.3406v

The bills are tie-barred together, which means that neither could take effect unless both were enacted.

FISCAL IMPACT:

Senate Bills 155 and 156, examined jointly, would not have a significant fiscal impact on any unit of state or local government. The bills have the potential to create modest cost fluctuations for insurers, primarily based on any potential changes in insulin utilization, though the direction and magnitude of these shifts are presently indeterminate and would depend on several factors.

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■ This analysis was prepared by nonpartisan House Fiscal Agency staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.