

AMCP Legislative & Regulatory Briefing

November 17, 2021

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Presenters





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Bipartisan Infrastructure Framework

- H.R.3684, Infrastructure Investment and Jobs Act
- \$1.2 trillion w/ \$550 billion in new spending over 5 years
- Passed Senate 69-30 & House 228-206
- President Biden signed into law Nov. 15
- Health Care Offsets
 - Sequester (\$21b/10 years) restores 2% cut through 2031
 - Rebate Rule (\$52b) effective date delay to 2026
 - Vial Size (\$3.2b) beginning in 2023, requires drugmakers to refund Medicare quarterly for unused medication in singledose/single-use packages under Part B outpatient
 - COVID Relief (\$210b) repurposes unused relief dollars

Build Back Better Act (BBBA)

- \$1.75 to \$1.85 trillion/10 years
- White House framework (10/28) + House legislative text (11/2)
- Health Care Provisions (as of 11/16)
 - Medicare hearing coverage
 - Premium reduction for ACA coverage (\$600/person for 9 million covered)
 - Home and community-based services investment
 - Closes "Medicaid gap" by expanding coverage to 4 million under ACA
 - Medicare Part D redesign
 - Questionable
 - PBM transparency
 - Rebate rule pass through
 - Rx price reforms



The NOVEL Act

- The New Opportunities for Value that Extend Lives Act (S. 2416)
- Bipartisan bill designed to speed patient access to certain novel therapies by allowing manufacturers to apply for an HCPCS code as soon as the therapy receives breakthrough designation
- Requires CMS to begin the coverage determination process for these therapies as soon as they receive an HCPCS code

21st Century CURES 2.0 Act

- Provisions
 - Long COVID research & future pandemic response
 - Patient/caregiver education; clinical trial diversity & standards
 - FDA: digital and novel therapies; real-world evidence; accelerated approval pathway
 - CMS: telehealth and breakthrough therapies; reporting; access and coverage
 - Creates ARPA-H
- AMCP's recommendations
 - § 303 (cell and gene therapies): include language codifying FDA's 2018 guidance on pre-approval information exchange (PIE)
 - § 309 (confirmatory studies for accelerated approval): incentivize confirmatory study completion through higher rebate penalties or sunsetting authorization
 - § 404 (breakthrough devices): create a benefit category for prescription drug digital therapeutics, allowing Medicare coverage



Provider Status Bill

- Pharmacy and Medically Underserved Areas Enhancement Act (H.R. 2759/S.1362)
- Adds pharmacists to the list of providers whose patient care services, when delivered to patients in medically underserved communities, are covered by Medicare Part B
- Ensures pharmacists are fairly compensated for the patient care they provide to beneficiaries in underserved areas

Government Funding & Debt Ceiling

- Continuing Resolution to fund government at current levels through Dec. 3, 2021
- Debt Ceiling
 - Temporarily raised through Dec. 3*
 - Republicans want Democrats to raise via reconciliation
 - Failure to raise = federal default (& economic catastrophe)
 - Combined funding & debt ceiling showdown in Congress come December



Medicare Coverage of Innovative Technology (MCIT)

- Proposed establishing a coverage pathway for new, innovative medical devices approved by FDA, granting Medicare beneficiaries faster access to breakthrough technologies (Nov. '20)
- Proposed repeal (Sept. 13)
- Final rule repealing MCIT (Nov. 12)
- CMS committed to future efforts to accelerate approval of innovative technologies, including DTx
 - Future pathway should not focus on breakthrough designation
 - Ensure adequate safety protections
 - Improve data standards on device benefit for Medicare population
 - Incentivize generating new evidence



Biosimilars

- On Oct. 15, FDA approved first interchangeable biosimilar monoclonal antibody for immunosuppressant, Humira®
 - Because of its designation as interchangeable, product may be substituted for the reference product at the pharmacy counter, without intervention of the prescriber
- All 50 states have laws allowing for pharmacy-level substitution of interchangeable biosimilars

Drug Importation

- FDA Issued Final Rule in Sept. 2020 permitting FDAauthorized programs to import specific drugs from Canada
 - Importation plans would be administered by states or Indian tribes after authorization by the FDA and would specify the drugs eligible for importation
- Colorado, New Mexico, Florida, Maine, Vermont, and New Hampshire have submitted importation plans for approval
 - ➤ None have been approved at this point
 - Numerous other states have introduced legislation to create importation programs
- Biden administration has been supportive of drug importation, but it is unclear how it will proceed on these state importation plans



HHS Comprehensive Plan for Addressing High Drug Prices

- Released Sept. 9th
- Guiding principles for drug pricing reform: make drug prices more affordable and equitable, promote competition throughout prescription drug industry, foster scientific innovation
- Potential actions
 - Legislation authorizing CMS to negotiate prescription drug prices in Medicare Parts B and D
 - Legislation speeding entry of biosimilar and generic drugs
 - CMMI models to test using value-based payments for Part B drugs

COVID Rules & Regulations

- Under PREP Act authority, HHS has permitted pharmacists/pharmacies to:
 - Order and bill Medicare for COVID testing
 - "Order vaccine"
 - Administer vaccine
 - Administer COVID post-exposure prophylaxis
 - Preempts state laws that would effectively prohibit this



Dr. Robert Califf Nominated as FDA Commissioner

- Served as FDA Commissioner in former President Obama's fainal year (February 2016 to January 2017)
 - Confirmed by Senate 89-4
 - Democrats Manchin, Blumenthal, Markey, and Ayotte opposed
- Previously Deputy Commissioner of the Office of Medical Products and Tobacco at FDA
- Cardiologist by training with pharmaceutical research background



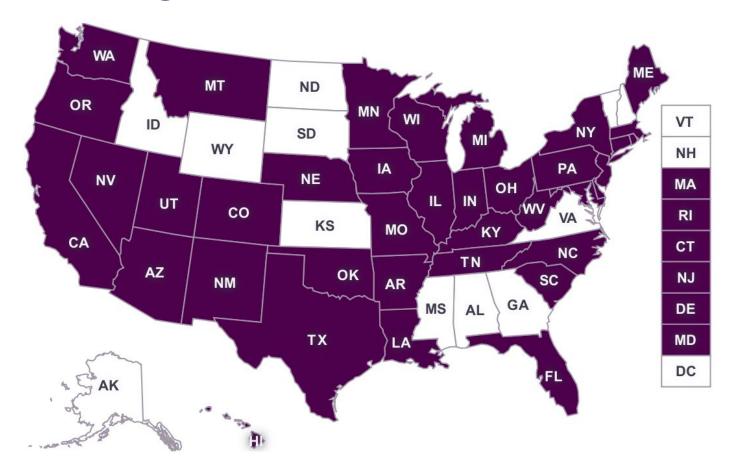
State Affairs

State Priorities

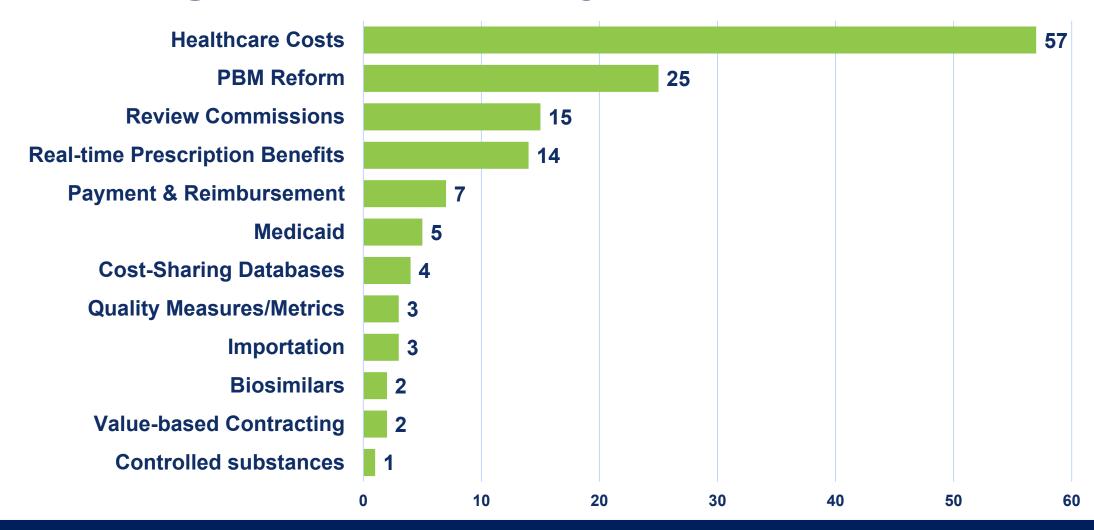
- Promote meaningful transparency on drug pricing and patient cost-sharing
- Advocate for the development of clear metrics to shift pharmaceutical payments to value-based care
- Encourage data sharing and interoperability of electronic health records
- Promote AMCP's position on formulary requirements, tier restrictions, and coverage mandates
- Support the use of managed care tools



Legislation introduced in 38 states

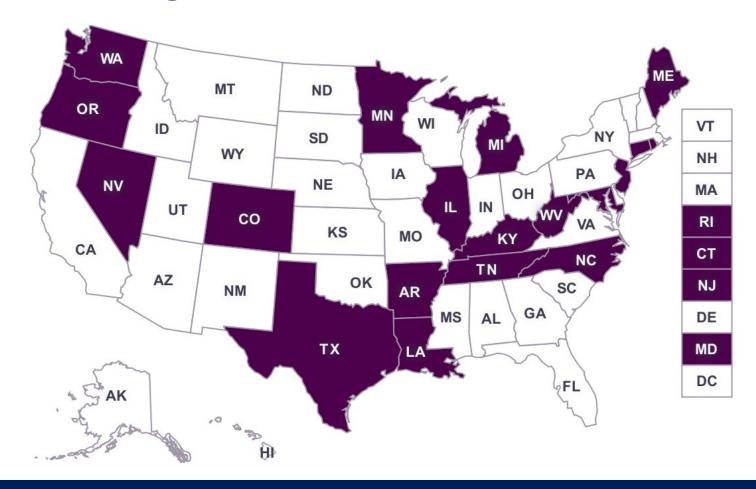




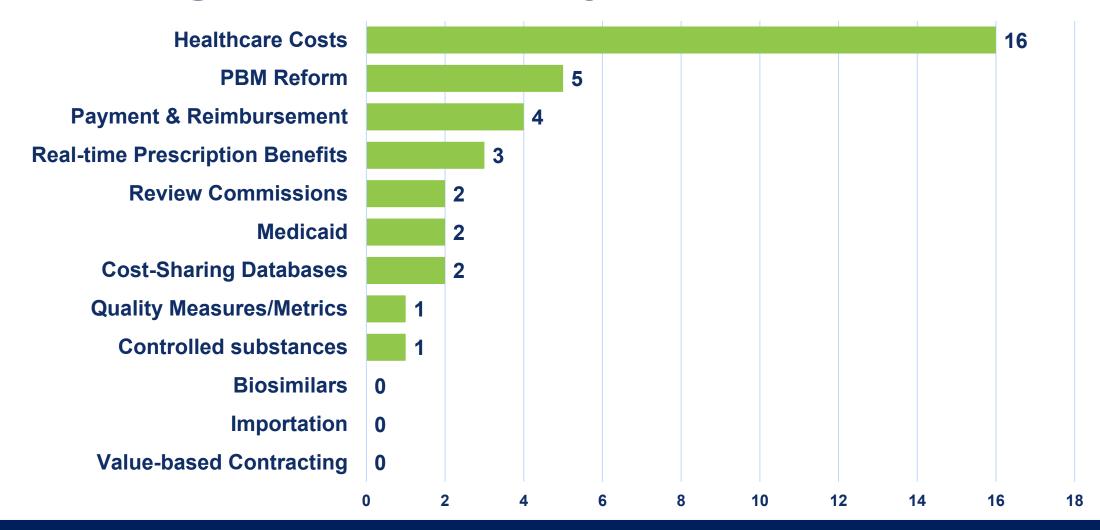




Legislation enacted in 19 states

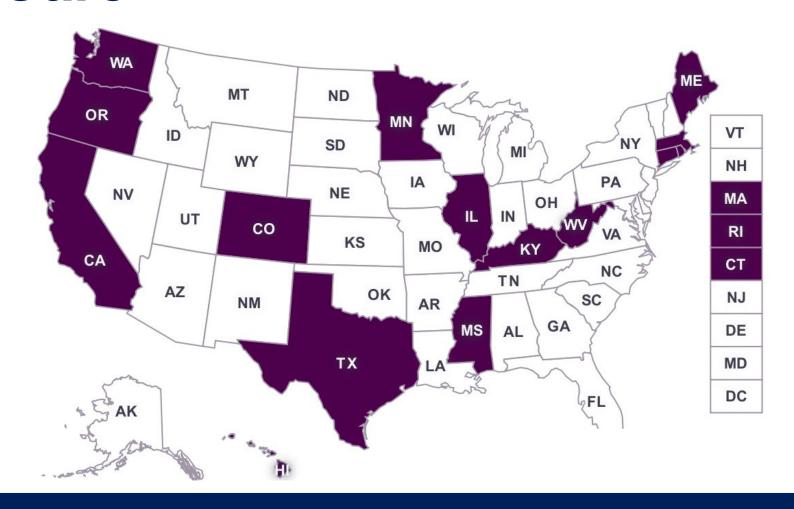




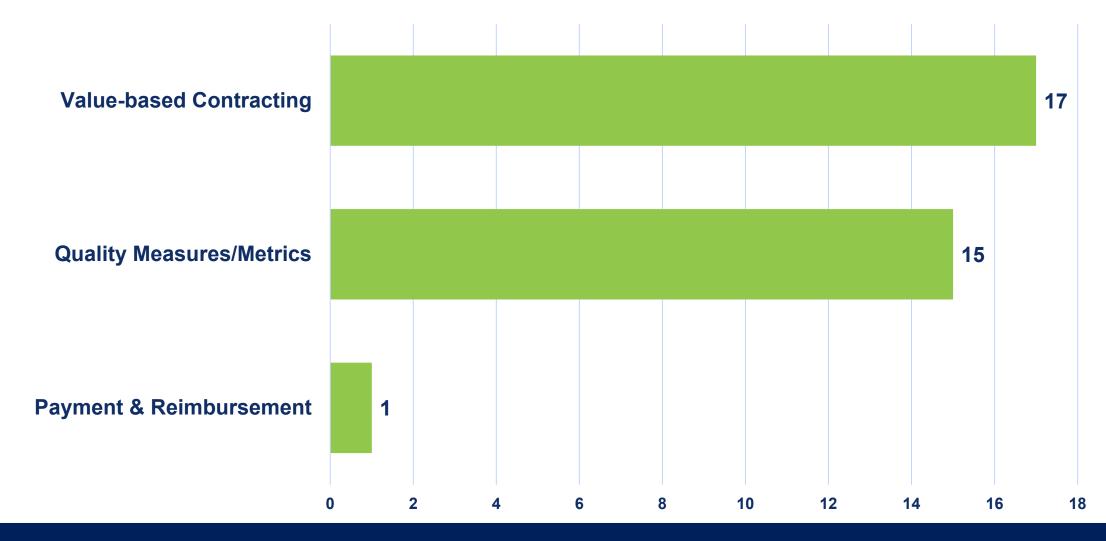




Legislation introduced in 15 states

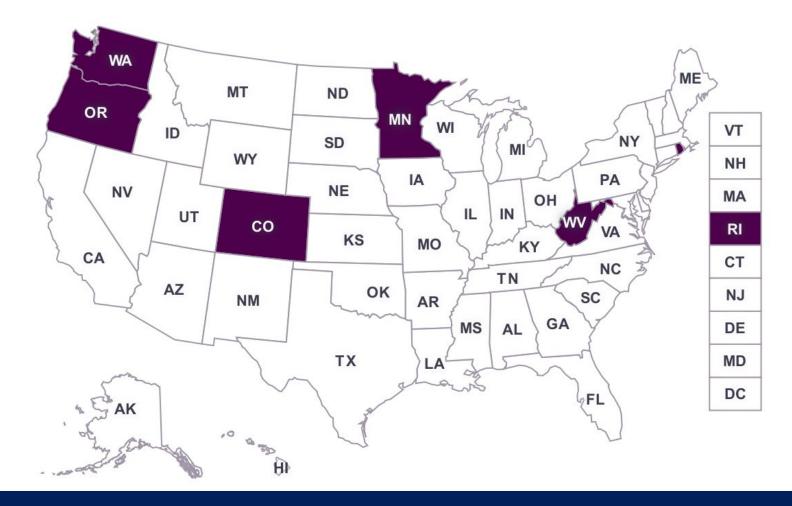




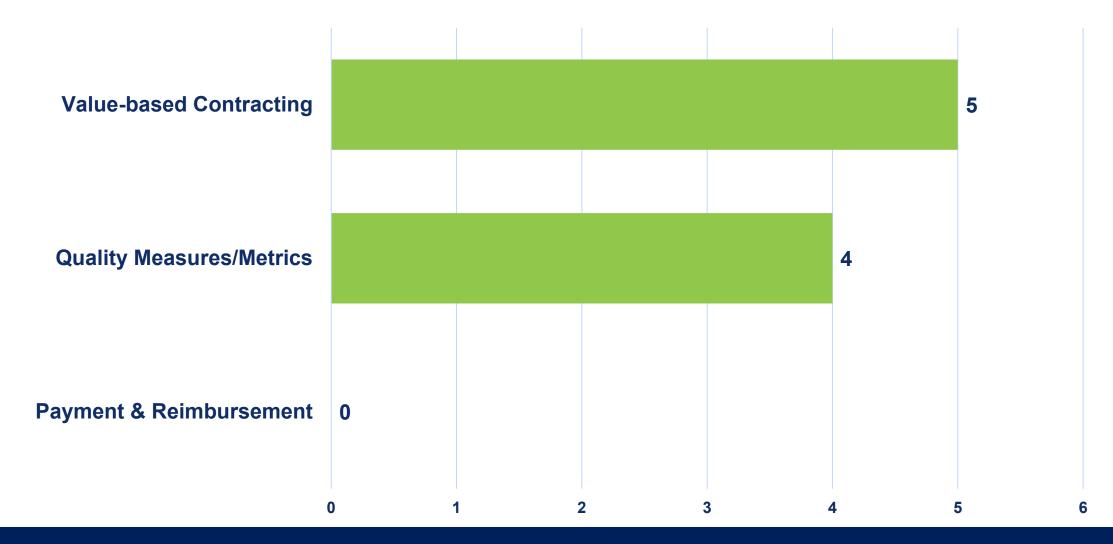




Legislation enacted in 6 states

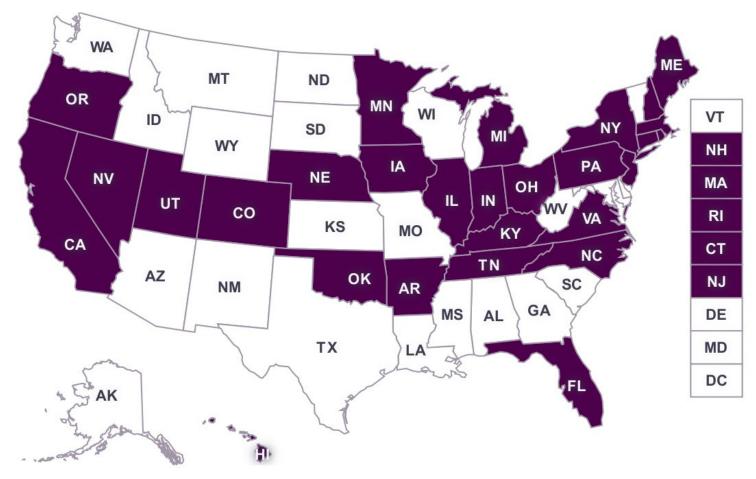




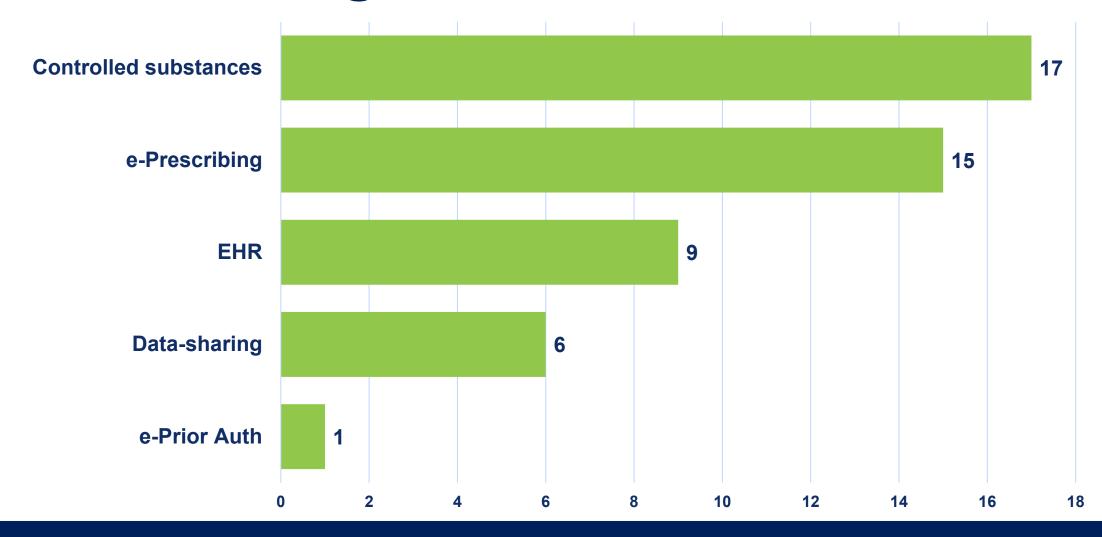




Legislation introduced in 28 states

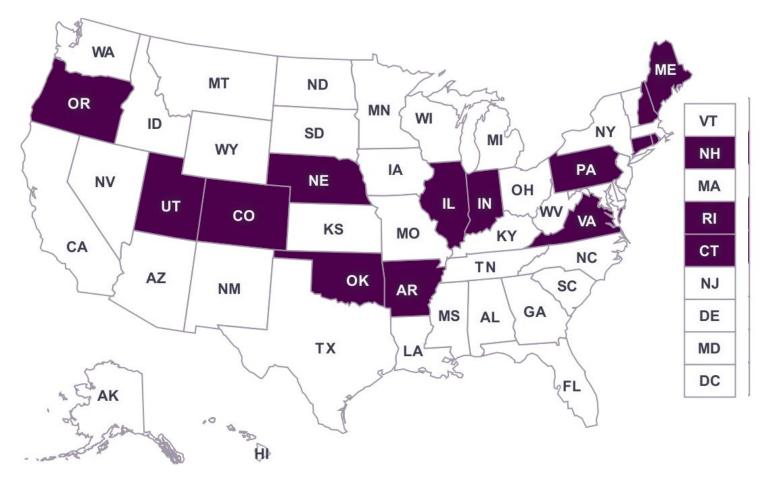




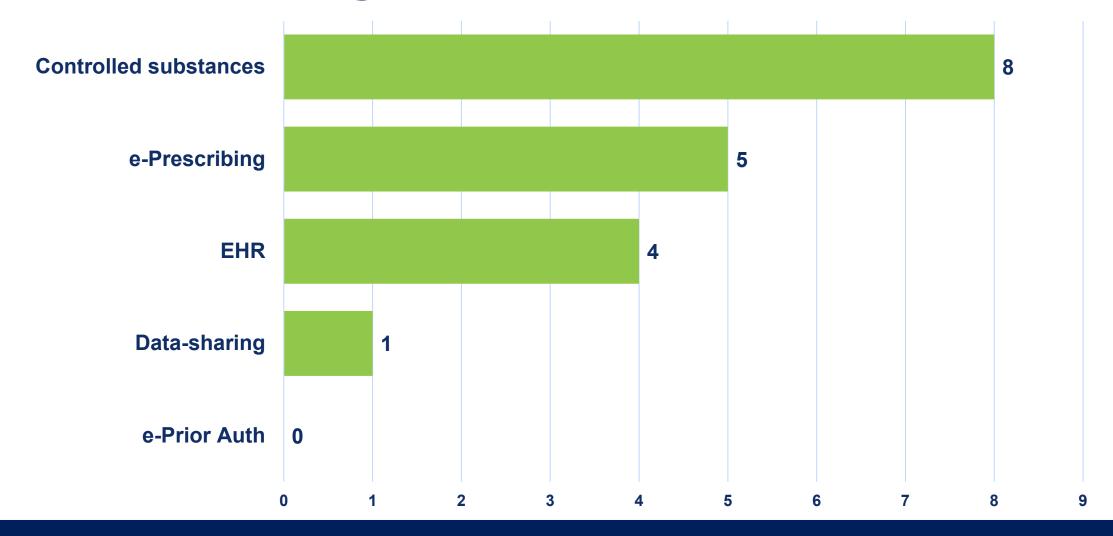




Legislation enacted in 14 states

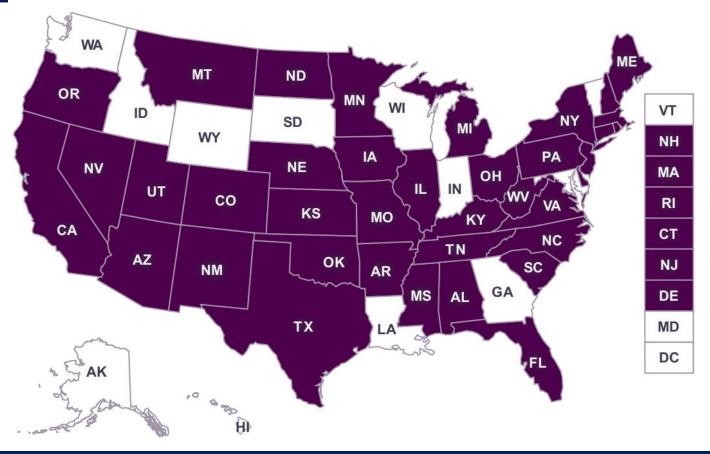




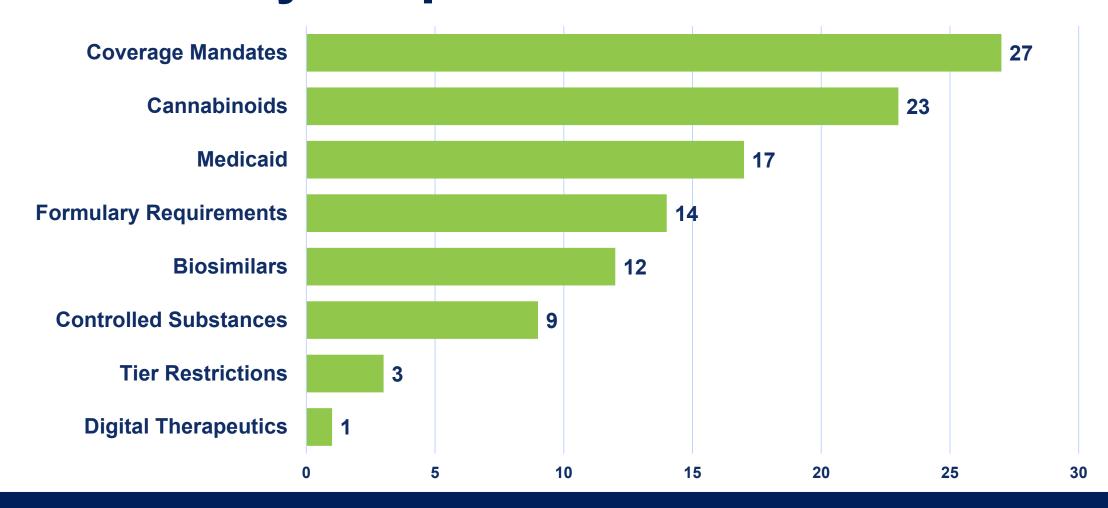




Legislation introduced in 38 states

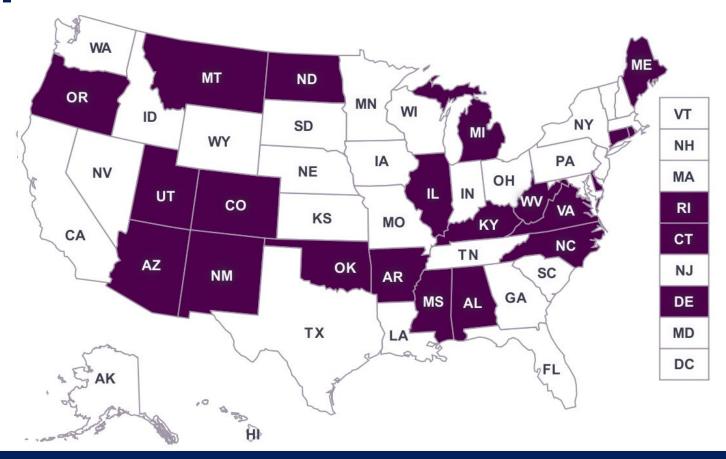








Legislation enacted in 21 states

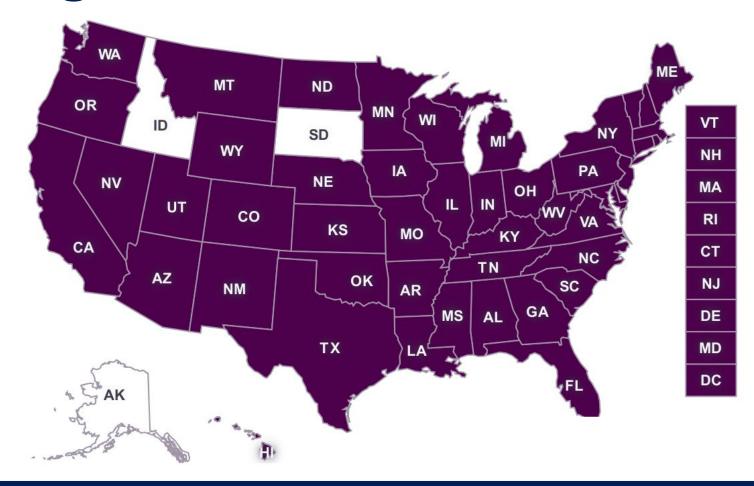




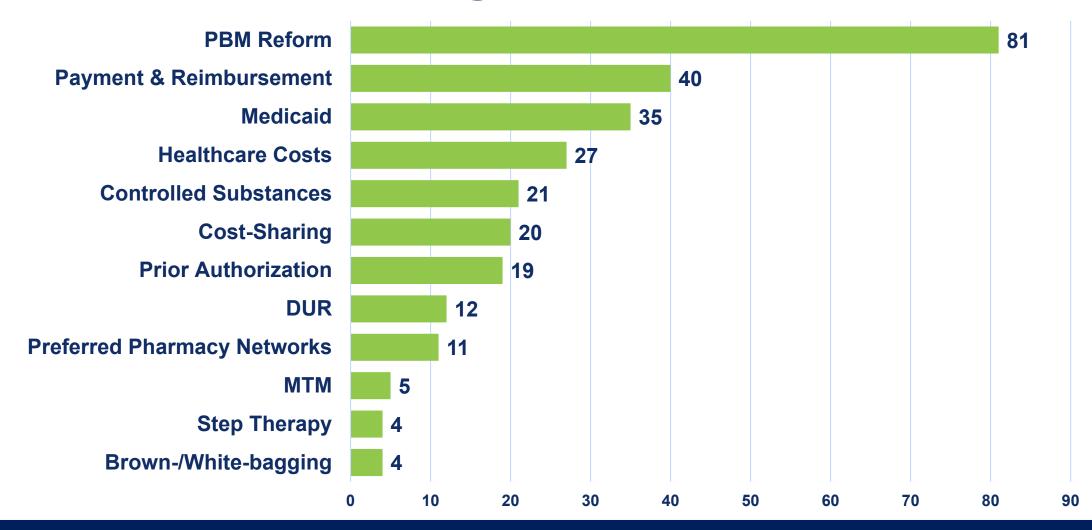




Legislation introduced in 47 states plus DC

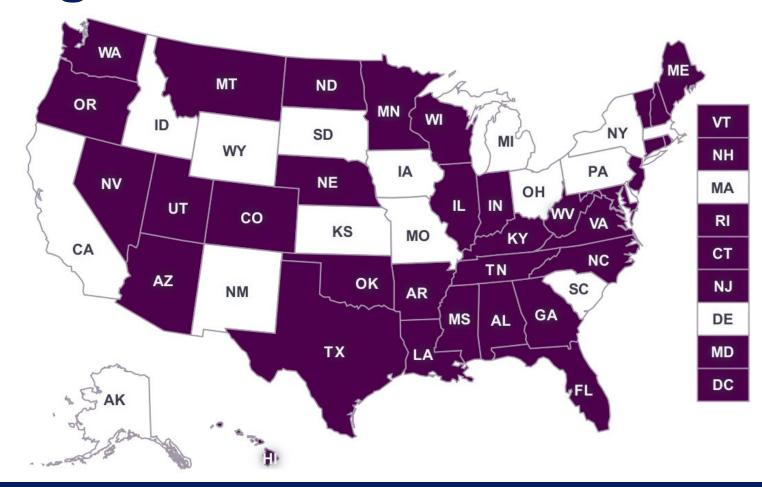








Legislation enacted in 34 states plus DC

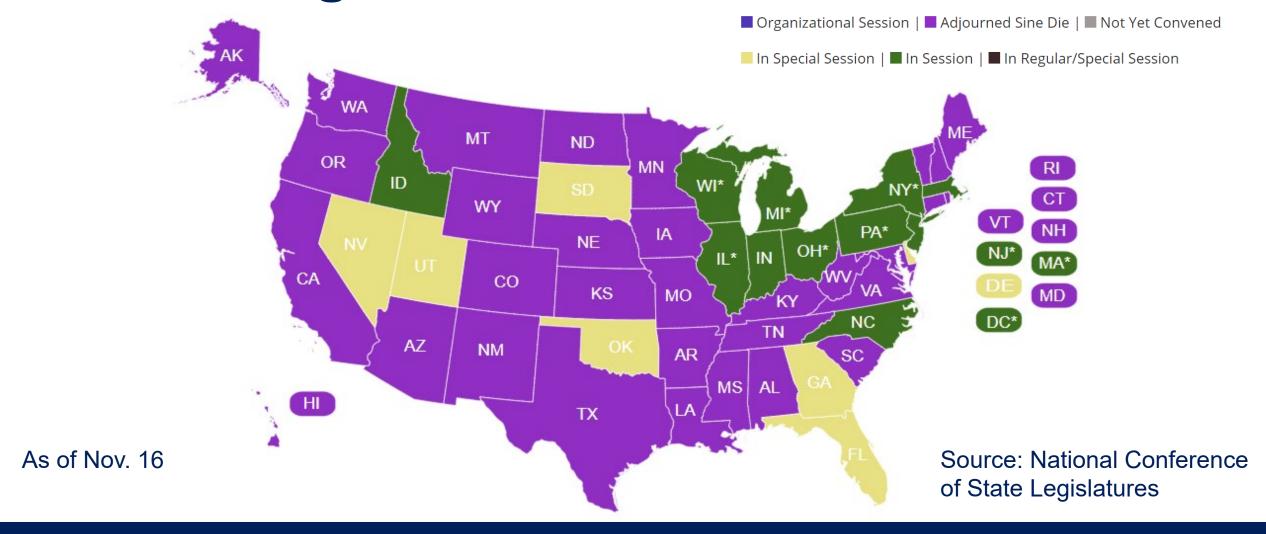








State Legislature Statuses





Additional Information

- amcp.org/policy-advocacy/legislative-regulatory-issues
 PDFs of enacted legislation on our five subject areas
- amcp.org/policy-advocacy/policy-resource-center/where-westand-position-statements
 - Where We Stand statements for detailed information on AMCP's policy positions
- Email advocacy@amcp.org
 Requests for more specific information, legislative reports of
 - Requests for more specific information, legislative reports, questions, etc.





Questions?