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ACF/HR

17-4057

SENATE STATE OF MINNESOTA NINETIETH SESSION

S.F. No. 1902

DATE 03/08/2017	D-PG 1181	OFFICIAL STATUS Introduction and first reading
05/06/2017	1101	Referred to Health and Human Services Finance and Policy
		A bill for an act
the med	ical assis	care; permitting drugs used for weight loss to be covered under tance program; amending Minnesota Statutes 2016, section ivision 13d.
BE IT ENA	CTED BY	THE LEGISLATURE OF THE STATE OF MINNESOTA:
Section 1.	Minnesot	a Statutes 2016, section 256B.0625, subdivision 13d, is amended to
read:		
Subd. 13	d. Drug f	formulary. (a) The commissioner shall establish a drug formulary. Its
establishmer	nt and pub	lication shall not be subject to the requirements of the Administrative
Procedure A	ct, but the	e Formulary Committee shall review and comment on the formulary
contents.		
(b) The f	ormulary	shall not include:
(1) drugs	, active p	harmaceutical ingredients, or products for which there is no federal
funding;		
(2) over-	the-count	er drugs, except as provided in subdivision 13;
(3) drugs	or active	pharmaccutical ingredients used for weight loss, except that medically
necessary lip	ase inhib	itors may be covered for a recipient with type II diabetes;
(4) (3) dr	ugs or ac	tive pharmaceutical ingredients when used for the treatment of
impotence of	-	
(5) (1) 1		tive phones contract in anodicate for which are directory to a set the
ری (4) dr	ugs of ac	tive pharmaceutical ingredients for which medical value has not been

established; 1.21

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- 2.1 (6) (5) drugs from manufacturers who have not signed a rebate agreement with the
 2.2 Department of Health and Human Services pursuant to section 1927 of title XIX of the
 2.3 Social Security Act; and
- 2.4 (7) (6) medical cannabis as defined in section 152.22, subdivision 6.
- (c) If a single-source drug used by at least two percent of the fee-for-service medical
 assistance recipients is removed from the formulary due to the failure of the manufacturer
 to sign a rebate agreement with the Department of Health and Human Services, the
 commissioner shall notify prescribing practitioners within 30 days of receiving notification
 from the Centers for Medicare and Medicaid Services (CMS) that a rebate agreement was
 not signed.