

FISCAL IMPACT REPORT
1st Session of the 51st Legislature

Bill No.: HB 1373
Version: Committee Substitute
Author: Representative Schwartz
Date: February 27, 2007
Analyst: Mark Newman

Impact: \$293,622

Reviewed: Mark Jygrat

Summary

The CS for HB 1373 is new language providing legislative findings regarding organ transplant patients, their physicians, and immunosuppressive drugs. This legislation would prohibit the state Medicaid program from requiring prior authorization, step therapy, generic substitution, or quantity limits without express written consent of the practitioner and the patient for immunosuppressive drugs used to prevent the rejection of transplanted organs and tissues.

Analysis

Based on information provided by the Oklahoma Health Care Authority (OHCA), CS for HB 1373 will have a fiscal impact related to the number of Medicaid eligible immunosuppressant users not covered by Medicare (128), the average cost of each prescription required per month (\$600), and the number of months per fiscal year (12). Based on the language in the CS for HB 1371 which states that an immunosuppressive drug shall not require a quantity limit and assuming that related patients will require more than the 6 prescription limit for adults, the total fiscal impact of this legislation will be \$921,600 and the state share of this amount will be \$293,622. Immunosuppressant drugs are not currently included by the OHCA in prior authorization, step therapy, or generic substitution requirements.

Long Term Considerations

Any changes in the average monthly cost of the immunosuppressant drugs or the number of Medicaid eligible immunosuppressant users will proportionately affect the fiscal impact of this legislation.