

BILL ANALYSIS

C.S.H.B. 1935
By: Bucy
Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Current law allows for only a three-day emergency refill of insulin and insulin-related equipment and supplies, which can be problematic for people with diabetes, as their daily insulin needs vary. The difference in receiving a refill or not can have significant and potentially fatal health implications for patients in need. C.S.H.B. 1935 seeks to resolve the issue and expand access to lifesaving medications by giving pharmacists the authority to dispense a 30-day emergency supply of insulin and insulin-related equipment and supplies if specific criteria are met.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the Texas State Board of Pharmacy in SECTION 3 of this bill.

ANALYSIS

C.S.H.B. 1935 amends the Occupations Code to authorize a pharmacist to provide an emergency refill of insulin or insulin-related equipment or supplies if the pharmacist complies with the bill's applicable provisions and rules adopted under those provisions. With respect to an emergency refill, the bill provides the following:

- the quantity of an emergency refill of insulin may not exceed a 30-day supply;
- the quantity of an emergency refill of insulin-related equipment or supplies may not exceed the lesser of a 30-day supply or the smallest available package;
- a pharmacist may exercise professional judgment in refilling a prescription without the authorization of the prescribing practitioner if the pharmacist is unable to contact the practitioner after reasonable effort, is provided with documentation showing that the patient was previously prescribed insulin or insulin-related equipment or supplies by a practitioner, and does the following:
 - assesses the patient to determine whether the emergency refill is appropriate;
 - creates a record that documents the patient's visit that includes a notation describing the documentation provided; and
 - makes a reasonable attempt to inform the practitioner of the emergency refill at the earliest reasonable time; and
- a prescribing practitioner is not liable for an act or omission by a pharmacist in dispensing an emergency refill.

The bill requires the Texas State Board of Pharmacy to adopt rules necessary to implement these provisions.

C.S.H.B. 1935 amends the Insurance Code to require a health benefit plan that provides coverage for the treatment of diabetes and associated conditions to provide to each qualified enrollee coverage for emergency refills of diabetes equipment or diabetes supplies dispensed to the enrollee in accordance with the bill's provisions in the same manner as for a nonemergency refill. This requirement applies only to a health benefit plan delivered, issued for delivery, or renewed on or after January 1, 2022.

EFFECTIVE DATE

September 1, 2021.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 1935 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute omits the original's provisions providing for the establishment of a training program, the completion of which would have been mandatory for a pharmacist to exercise the emergency refill authority granted under the bill.

The substitute also omits a provision from the original limiting the number of emergency refills to an individual patient to three per calendar year.