GOE19562

Rand Paul

AMENDMENT NO.	4	Calendar No.	
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Purpose: To amend title XVIII of the Social Security Act to provide incentives to encourage the use of generics and biosimilars under part D of the Medicare program.

IN THE SENATE OF THE UNITED STATES-116th Cong., 1st Sess. S. 1895 To lower health care costs. Referred to the Committee on ordered to be printed Ordered to lie on the table and to be printed AMENDMENT intended to be proposed by Mr. Paul Viz: 1 At the appropriate place in title II, insert the fol-2 lowing: SEC. 2 . INCENTIVIZING THE USE OF GENERICS AND 4 BIOSIMILARS UNDER MEDICARE PART D. 5 Section 1860D-4(b)(3) of the Social Security Act (42) U.S.C. 1395w-104(b)(3)) is amended by adding at the 7 end the following new subparagraphs: 8 "(I) Generic drugs on formulary.— "(i) In General.—For plan year 9 10 2021, and subsequent plan years, the formulary shall include a generic drug that 11 12 references a brand drug if the negotiated

	price (as described in section 1860D-2(d))
2	under the plan for the generic drug is less
3	than the negotiated price for the brand
4	drug.
5	"(ii) Brand drug defined.—In this
6	subparagraph, the term 'brand drug'
7	means a covered part D drug that is mar-
8	keted under a new drug application ap-
9	proved under section 505(c) of the Federal
10	Food, Drug, and Cosmetic Act or under a
11	biological product license application ap-
12	proved under section 351(a) of the Public
13	Health Service Act.
14	"(iii) Generic drug defined.—In
15	this subparagraph, the term 'generic drug'
16	means any covered part D drug that is not
17	a brand drug, including a biosimilar bio-
18	logical product (as defined in section
19	1847A(e)(6)(H)).
20	"(J) LABELING OF FORMULARY TIERS.—
21	"(i) SEPARATE TIERS FOR BRAND
22	AND GENERIC DRUGS.—For plan year
23	2021, and subsequent plan years:
24	"(I) IN GENERAL.—The for-

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1	ferential in cost-sharing or copay-
2	ments between tiers. Formulary tiers
3	may not include both brand drugs and
4	generic drugs, but shall have separate
5	designated drug tiers for brand drugs
6	and generic drugs.
7	"(II) TIERS.—The formulary
8	may include a separate tier for—
9	"(aa) preferred brand drugs
10	and preferred generic drugs, but
11	the cost-sharing or copayment as-
12	sociated with the preferred ge-
13	neric drug tier shall be lower
14	than the cost-sharing or copay-
15	ment associated with the pre-
16	ferred brand drug tier;
17	"(bb) nonpreferred brand
18	drugs and nonpreferred generic
19	drugs, but the cost-sharing or co-
20	payment associated with the non-
21	preferred generic drug tier shall
22	be lower than the cost-sharing or
23	copayment associated with the
24	nonpreferred brand drug tier;
25	and

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1	"(cc) brand specialty drugs
2	and generic specialty drugs, but
3	the cost-sharing or copayment as-
4	sociated with the generic spe-
5	cialty drug tier shall be lower
6	than the cost-sharing or copay-
7	ment associated with the brand
8	specialty drug tier.
9	"(ii) Definitions.—In this subpara-
10	graph:
11	"(I) Brand specialty drug.—
12	The term 'brand specialty drug'
13	means brand drug (as defined in sub-
14	paragraph (I)(2)) that is a specialty
15	drug.
16	"(II) GENERIC SPECIALTY
17	DRUG.—The term 'generic specialty
18	drug' means generic drug (as defined
19	in subparagraph (I)(3)) that is a spe-
20	cialty drug.
21	"(III) SPECIALTY DRUG.—The
22	term 'specialty drug' means a covered
23	part D drug that exceeds a cost
24	threshold established by the Sec-
25	retary.".