



North Dakota
INSURANCE
DEPARTMENT

Drug Cost Transparency Health Insurer User Guide

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Program Overview

During the 67th Legislative Assembly the North Dakota Legislature passed HB 1032, relating to drug cost transparency. HB 1032 created Chapter 26.1-36.10 of the North Dakota Century Code. Chapter 26.1-36.10 requires health insurers (insurers) to file annual reports with the North Dakota Insurance Department (the Department) containing a variety of information related to prescription drugs impact on the insurer's plans during the previous two calendar years. The insurers disclosure report is due no later than April 1, 2022. As defined in 26.1-36.10-01(7), "health insurer" means an insurance company, nonprofit health service corporation, health maintenance organization, third-party payer, health program administered by a state agency other than the department of human services or state department of health, or other person engaged as principal in the business of insurance which issues or delivers a health care plan in this state.

Reporting Method

The Department will be conducting a phased implementation of HB 1032. Until further notice, insurers will be submitting the required report by filling out spreadsheet templates and sending the report to the Department via email. The email address to be used is drugtransparency@nd.gov.

During this phase of implementation, a complete filing can occur in one of two ways. The first is to send a message directly to the email address containing everything required in a report. The second is to utilize a secure file transfer system and send an invitation to download the spreadsheet to the email address and then send a second message to the email address to complete the submission.

Disclosure Data

About this report

This is an annual report. Insurers are required to submit their report to the Department, using the provided template, no later than April 1.

Steps for Submitting Disclosure Reports

Submit only one CSV file per insurer.

Step 1: [Download the template.](#)

Step 2: Enter and Save Your Data

1. Edit the file using Microsoft Excel to add your data.
2. When you are finished editing your file, go to **File > Save As.**
3. Make sure the file type selected is **CSV UTF-8.**
4. Save your file with this file name: **nd_insurer_report.**
5. Your save screen should look like this:



Screenshot of Template

	A	B	C	D	E	F	G
1	Insurer Name	25 Frequently Prescribed	25 Highest Dollar Spend	% Increase Net Spending	% Increase in Premium	% Specialty with Utilization Management	Premium Reductions
2							
3							

Below is a list of descriptions for what data should be entered into each field and the format for that data.

Variable	Description
Insurer Name	Name of the health insurer filing the disclosure report.
25 Frequently Prescribed	Names of the twenty-five more frequently prescribed drugs across all plans.
25 Highest Dollar Spend	Names of the twenty-five prescription drugs dispensed with the highest dollar spend in terms of gross revenue. No \$ signs. <u>NO COMMAS</u>
% Increase Net Spending	Percent increase in annual net spending for prescription drugs across all plans. Net spending means the cost of drugs minus any discounts that lower the price of the drugs, including a rebate, fee, price protection, retail pharmacy network spread, and dispensing fee. No % sign.
% Increase in Premium	Percent increase in premiums which is attributable to prescription drugs across all plans. No % sign.
% Specialty with Utilization Management	Percentage of specialty drugs with utilization management requirements across all plans. No % sign.
Premium Reductions	Premium reductions attributable to specialty drug utilization management. No \$ signs. <u>NO COMMAS</u>

Below is a screenshot of the report with sample data entered demonstrating proper data formatting.

	A	B	C	D	E	F	G
1	Insurer Name	25 Frequently Prescribed	25 Highest Dollar Spend	% Increase Net Spending	% Increase in Premium	% Specialty with Utilization Management	Premium Reductions
2	Name	Drug A	Drug X	12.3	12.3	12.3	12345.67
3	Name	Drug B	Drug Y				
4	Name	Drug C	Drug Z				

Step 3: Follow the steps below to submit data in one of two ways.

1. As an email attachment:

- a. Attach the file `nd_insurer_report.csv` to an email addressed to drugtransparency@nd.gov
- b. In the body of the email, state the insurer's name and attest to the fact that the report does not:
 - i. disclose the identity of a specific health benefit plan or the prices charged for specific prescription drugs or classes of prescription drugs, or
 - ii. contain confidential information or trade secrets.
- c. Send the email.
- d. Please note that emails that do not contain either the report or attestation will not be considered filed.
- e. The Department will respond to submitted reports to confirm receipt. If the Department does not respond within three business days, please send a follow up message to confirm that the message was received.

2. Secure File Transfer

- a. Insurers may submit the completed template via secure file transfer. If this method is selected, it is the insurer's responsibility to properly upload the file `nd_insurer_report.csv` to the system of their choice and invite drugtransparency@nd.gov to receive the file.
- b. After utilizing the secure file transfer system to send the completed template, the insurer must send an email to drugtransparency@nd.gov, state the insurer's name, and attest to the fact that the report does not:

- i. disclose the identity of a specific health benefit plan or the prices charged for specific prescription drugs or classes of prescription drugs, or
 - ii. contain confidential information or trade secrets.
- c. The Department will respond to submitted reports to confirm receipt. If the Department does not respond within three business days, please send a follow up message to confirm that the message was received.

Tips for Submitting Data in a CSV File

Below are some guidelines for entering and submitting data in a CSV file.

Entering Data

Data Entry Issue or Questions	Solution
Entering Leading zeros If the NDC is: 00028030000	Use an apostrophe (^) Ex: `0002803000
Empty fields	Leave the cell empty Do not put NA, or not applicable, or No
Entering Dates	Use the following format: mm/dd/yyyy No spaces, no additional characters
Entering dollar figures in the CSV file	xxx.xx or xxxx.xx No dollar signs No commas
Entering Text Fields	No special characters or symbols such as: ®, TM, ©