

1 SENATE JOINT RESOLUTION NO. 33

2 INTRODUCED BY S. VINTON

3
4 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF
5 MONTANA REQUESTING AN INTERIM STUDY ON THE ENTITIES WITHIN THE PRESCRIPTION DRUG
6 SUPPLY CHAIN, PHARMACY SUSTAINABILITY, AND THE IMPACTS ON AFFORDABILITY AND PATIENT
7 ACCESS; AND REQUIRING THAT THE FINAL RESULTS OF THE STUDY BE REPORTED TO THE 70TH
8 LEGISLATURE.

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10 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE OF REPRESENTATIVES OF
11 THE STATE OF MONTANA:

12 That the Legislative Council be requested to designate an appropriate interim committee or statutory
13 committee, pursuant to section 5-5-217, MCA, or direct sufficient staff resources to:

14 (1) examine and review the structure of the prescription drug supply chain in the state, including:

15 (a) pharmacies, pharmacy services administrative organizations, pharmacy benefit managers,
16 manufacturers, providers, wholesalers, patients, and health plans;

17 (b) the roles, relationships, and decisionmaking authority of these stakeholders within the supply
18 chain; and

19 (c) how those dynamics affect pharmacy operations, prescription drug affordability, and patient
20 access, using aggregated, publicly available, or voluntarily provided data;

21 (2) identify factors contributing to pharmacy openings, closures, and patient accessibility, including
22 economic pressures, staffing availability, business arrangements, and geographic considerations;

23 (3) explore targeted strategies to reduce patient costs and promote the sustainability of pharmacy
24 operations, with particular attention to rural and underserved areas;

25 (4) assess the methods, best practices, technologies, and policy approaches employed by state-
26 administered health plans in other states to address prescription drug affordability and access challenges and
27 evaluate their relevance and applicability to Montana;

28 (5) ensure that the study does not request, compel, or rely on proprietary or confidential business

1 information. All data considered must be aggregated, publicly available, or voluntarily provided with no
2 expectation of confidentiality. Study methods must prioritize transparency, data integrity, and stakeholder trust
3 while supporting meaningful policy evaluation.

4 (6) engage relevant stakeholders across the prescription drug supply chain, including but not
5 limited to patients, providers, pharmacies, pharmacy services administrative organizations, pharmacy benefit
6 managers, manufacturers, health plan sponsors, and health plans to ensure comprehensive and balanced
7 input. Stakeholder feedback must be supported by citations, references, or source documentation sufficient to
8 inform additional analysis and legislative consideration.

9 (7) develop and recommend statutory, regulatory, or rule changes as appropriate. Each
10 recommendation must clearly identify how the proposal would:

11 (a) improve or protect patient access to essential medications;

12 (b) address cost impacts on patients, payers, and the state; and

13 (c) support the long-term sustainability of independent pharmacy operations.

14 BE IT FURTHER RESOLVED, that if the study is assigned to staff, any findings or conclusions be
15 presented to and reviewed by an appropriate committee designated by the Legislative Council.

16 BE IT FURTHER RESOLVED, that all aspects of the study, including presentation and review
17 requirements, be concluded prior to September 15, 2026.

18 BE IT FURTHER RESOLVED, that the final results of the study, including any findings, conclusions,
19 comments, or recommendations of the appropriate committee, be reported to the 70th Legislature.

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