

Drugs of Substantial Public Interest

LIST METHODOLOGY & SUMMARY – MARCH 12, 2025

Public interest drug list: Insulin

This Minnesota Department of Health (MDH) list of drugs of substantial public interest is specific to insulin drug products. The drug products listed require reporting by drug manufacturers, wholesalers, pharmacy benefit managers (PBMs), and pharmacies pursuant to Minnesota Statutes, section [62J.84](#).¹

Program background

Many Minnesotans are struggling to afford the high and rising cost of critically important drug therapies. Due to the complexity and lack of transparency of the prescription drug market, patients and policymakers struggle with understanding the factors driving drug prices and how to make the market work more effectively to improve affordability.

To address these issues, the Minnesota Legislature passed the bipartisan Minnesota Prescription Drug Price Transparency Act (the Act) (Minnesota Statutes, section [62J.84](#)) in 2020, requiring drug manufacturers to report on new drug introductions and significant price increases. In 2023, the Act was expanded to include reporting on drugs of substantial public interest, with data collected from manufacturers, wholesalers, PBMs, and pharmacies on rebates, fees, and other transactions.

For the drugs of substantial public interest, the Act directs MDH to regularly publish lists of drugs of substantial public interest. These lists identify the drugs (by national drug code, NDC) that require reporting. For additional background on the program, please refer to the inaugural [List Methodology & Summary \(June 2024\) \(PDF\)](#) and MDH webpage, [Prescription Drug Price Transparency Public Interest Drug Lists](#).

Together, these initiatives aim to provide policymakers and stakeholders with actionable insights to improve transparency and affordability in the prescription drug market.

Insulin

Approximately 400,000 Minnesotans currently live with diabetes, with around 24,000 Minnesotans being diagnosed each year.² Diabetes affects the body's ability to produce insulin—a hormone required to process sugars and for the body to function properly—and about one-third of people with diabetes need to take one or more insulin products. According

¹ Reporting entities will have approximately 90 days to report (notifications will be sent 30 or more days after the list release date; reports are due 60 days after notifications are sent). Please refer to the [published guidance](#) for information on how to report on these drugs of substantial public interest.

² Minnesota Department of Health, "Diabetes in Minnesota"
<https://www.health.state.mn.us/diseases/diabetes/data/diabetesfacts.html>

to the [Minnesota All Payer Claims Database](#) (MN APCD), at least 100,000 people in Minnesota had an insurance claim for a retail insulin product in 2023.³ Since insulin was first discovered in 1921, the prices that consumers have paid for the life-saving drug have continued to rise, especially for the more recently developed insulin analogs.⁴ The United States has historically had the highest insulin list prices—or wholesale acquisition costs (WAC)—of any high-income economy in the world,⁵ and it is estimated that insulin affordability challenges have recently affected over one-quarter of Americans with diabetes.⁶

Several federal and state efforts—including the [Minnesota Insulin Safety Net Program](#) and the [Minnesota Attorney General’s settlements with insulin manufacturers](#)—have aimed to curb the prices that consumers pay for insulin. However, these affordability initiatives do not aim to address nor correct many of the factors of the pharmaceutical market that contribute to the high price of insulin—including upstream supply chain dynamics. Although some consumers may see lower insulin prices through these efforts, some of the lowered prices are not guaranteed and costs may be shifted to payers, such as commercial insurers. High insulin prices may therefore continue to reduce affordability by increasing health insurance premiums for enrollees.

Beginning in 2024, the list prices (WAC) of some widely used insulin products decreased significantly, although some consumers have continued to report insulin affordability challenges.⁷ At the same time, the market for insulin has been shifting: some insulin products have been removed from the market, while the biosimilar⁸ market for insulin has expanded, potentially giving consumers access to less expensive products.

Much of the insulin supply chain remains opaque and the impacts of these market changes on affordability are not yet well understood. The transparency data collected on this list will provide one of the first comprehensive reviews of the current insulin market and the various supply chain entities’ involvement.

³ The Minnesota All Payer Claims Database (MN APCD) does not currently include every claim in Minnesota for 2023, and any counts obtained through the MN APCD should be considered an undercount.

⁴ Analog insulin is a modified form of insulin designed to mimic human insulin more effectively, offering faster or prolonged absorption for better blood sugar control.

⁵ RAND, *Comparing Insulin Prices in the United States to Other Countries*
https://www.rand.org/pubs/research_reports/RRA788-1.html

⁶ American Diabetes Association, “Insulin Affordability Survey, 2018” <http://main.diabetes.org/dorg/PDFs/2018-insulin-affordability-survey.pdf>

⁷ MDH receives input from the public via an online form at [Minnesota Department of Health Public Input on Prescription Drug Price Transparency in Minnesota](#)

⁸ Biologics are complex medicines derived from living cells. They are distinct from chemical prescription drugs, which are small-molecule medications and can be exactly replicated as generics. Biosimilars are very similar to biologics with no meaningful clinical differences but are not exact copies due to the complexity of biologic production.

Insulin list & methodology

MDH queried Medi-Span reference data⁹ for all drug families containing the word “insulin.” MDH excluded all durable medical equipment, over-the-counter drugs products, and inner pack products—drugs that are contained within an outer package but have a different National Drug Code (NDC) than the outer package. This query resulted in a list of 16 drug families¹⁰ which include 79 drug products (NDCs) from seven manufacturers (Table 1). In 2023, there were over 580,000 claims for these 79 drug products in the MN APCD.

Table 1: Insulin drug families, list of drugs of substantial public interest

Drug Family	Count of Drug Products (NDCs)
Insulin Aspart	8
Insulin Aspart (with Niacinamide)	4
Insulin Aspart Protamine & Aspart (Human)	6
Insulin Degludec	6
Insulin Degludec-Liraglutide	1
Insulin Detemir	1
Insulin Glargine	9
Insulin Glargine-aglr	1
Insulin Glargine-Lixisenatide	1
Insulin Glargine-yfgr	8
Insulin Glulisine	3
Insulin Lispro	14
Insulin Lispro Protamine & Lispro	4
Insulin Lispro-aabc	4
Insulin Regular (Human)	8
Insulin Regular (Human) in Sodium Chloride	1
Total	79

⁹ Medi-Span is a suite of data products on prescription drugs maintained by Wolters Kluwer that includes manufacturer list prices or wholesale acquisition costs (WAC).

¹⁰ Drug families are groups of one or more prescription drug products that share a unique generic drug product description, or nontrade name, and dosage form.

References

- [Minnesota Statutes, section 62J.84 \(https://www.revisor.mn.gov/statutes/cite/62J.84\)](https://www.revisor.mn.gov/statutes/cite/62J.84)
- [List Methodology & Summary \(June 2024\) \(PDF\) \(https://www.health.state.mn.us/data/rxtransparency/docs/drugspimethod.pdf\)](https://www.health.state.mn.us/data/rxtransparency/docs/drugspimethod.pdf)
- [Prescription Drug Price Transparency Public Interest Drug Lists \(https://www.health.state.mn.us/data/rxtransparency/pilists.html\)](https://www.health.state.mn.us/data/rxtransparency/pilists.html)
- [Minnesota Insulin Safety Net Program \(https://www.mninsulin.org/\)](https://www.mninsulin.org/)
- [Minnesota Attorney General’s settlements with insulin manufacturers \(https://www.ag.state.mn.us/MNinsulin35/\)](https://www.ag.state.mn.us/MNinsulin35/)

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