

119TH CONGRESS  
1ST SESSION

# H. R. 5139

To amend title XXVII of the Public Health Service Act, the Employee Retirement Income Security Act of 1974, and the Internal Revenue Code of 1986 to establish requirements with respect to cost sharing for epinephrine delivery systems under group health plans and group and individual health insurance coverage.

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## IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 4, 2025

Mr. FROST (for himself and Ms. MATSUI) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on Education and Workforce, and Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend title XXVII of the Public Health Service Act, the Employee Retirement Income Security Act of 1974, and the Internal Revenue Code of 1986 to establish requirements with respect to cost sharing for epinephrine delivery systems under group health plans and group and individual health insurance coverage.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Epinephrine’s Pharma  
3 Inflated Price Ends Now Act” or the “EPIPEN Act”.

4 **SEC. 2. REQUIREMENTS WITH RESPECT TO COST SHARING**  
5 **FOR EPINEPHRINE DELIVERY SYSTEMS.**

6 (a) PHSA.—Part D of title XXVII of the Public  
7 Health Service Act (42 U.S.C. 300gg–111 et seq.) is  
8 amended by adding at the end the following new section:  
9 **“SEC. 2799A–11. REQUIREMENTS WITH RESPECT TO COST**  
10 **SHARING FOR EPINEPHRINE DELIVERY SYS-**  
11 **TEMS.**

12 “(a) IN GENERAL.—A group health plan, and a  
13 health insurance issuer offering group or individual health  
14 insurance coverage, shall provide coverage of epinephrine  
15 delivery systems, and with respect to such delivery sys-  
16 tems, may not—

17 “(1) apply any deductible; or

18 “(2) impose any cost sharing in excess of \$60  
19 per package of 2 delivery systems (or the equiva-  
20 lent).

21 “(b) APPLICATION OF COST SHARING TOWARD  
22 DEDUCTIBLES AND OUT-OF-POCKET MAXIMUMS.—Any  
23 cost-sharing payments made pursuant to subsection (a)(2)  
24 shall be counted toward any deductible or out-of-pocket  
25 maximum that applies under the plan or coverage.

1       “(c) OUT-OF-NETWORK PROVIDERS.—Nothing in  
2 this section requires a plan or issuer that has a network  
3 of providers to provide benefits for an epinephrine delivery  
4 system described in this section that is delivered by an  
5 out-of-network provider, or precludes a plan or issuer that  
6 has a network of providers from imposing higher cost  
7 sharing than the levels specified in subsection (a)(2) for  
8 an epinephrine delivery system described in this section  
9 that is delivered by an out-of-network provider.

10       “(d) EPINEPHRINE DELIVERY SYSTEM DEFINED.—  
11 In this section, the term ‘epinephrine delivery system’  
12 means a delivery system approved by the Food and Drug  
13 Administration for the administration of epinephrine, in-  
14 cluding any auto-injector, nasal spray, or sublingual deliv-  
15 ery system that is so approved.”.

16       (b) ERISA.—

17               (1) IN GENERAL.—Subpart B of part 7 of sub-  
18 title B of title I of the Employee Retirement Income  
19 Security Act of 1974 (29 U.S.C. 1185 et seq.) is  
20 amended by adding at the end the following new sec-  
21 tion:

22       **“SEC. 726. REQUIREMENTS WITH RESPECT TO COST SHAR-**  
23               **ING FOR EPINEPHRINE DELIVERY SYSTEMS.**

24       “(a) IN GENERAL.—A group health plan, and a  
25 health insurance issuer offering group health insurance

1 coverage, shall provide coverage of epinephrine delivery  
2 systems, and with respect to such delivery systems, may  
3 not—

4 “(1) apply any deductible; or

5 “(2) impose any cost sharing in excess of \$60  
6 per package of 2 delivery systems (or the equiva-  
7 lent).

8 “(b) APPLICATION OF COST SHARING TOWARD  
9 DEDUCTIBLES AND OUT-OF-POCKET MAXIMUMS.—Any  
10 cost-sharing payments made pursuant to subsection (a)(2)  
11 shall be counted toward any deductible or out-of-pocket  
12 maximum that applies under the plan or coverage.

13 “(c) OUT-OF-NETWORK PROVIDERS.—Nothing in  
14 this section requires a plan or issuer that has a network  
15 of providers to provide benefits for an epinephrine delivery  
16 system described in this section that is delivered by an  
17 out-of-network provider, or precludes a plan or issuer that  
18 has a network of providers from imposing higher cost  
19 sharing than the levels specified in subsection (a)(2) for  
20 an epinephrine delivery system described in this section  
21 that is delivered by an out-of-network provider.

22 “(d) EPINEPHRINE DELIVERY SYSTEM DEFINED.—  
23 In this section, the term ‘epinephrine delivery system’  
24 means a delivery system approved by the Food and Drug  
25 Administration for the administration of epinephrine, in-

1 cluding any auto-injector, nasal spray, or sublingual deliv-  
 2 ery system that is so approved.”.

3 (2) CLERICAL AMENDMENT.—The table of con-  
 4 tents in section 1 of the Employee Retirement In-  
 5 come Security Act of 1974 (29 U.S.C. 1001 et seq.)  
 6 is amended by inserting after the item relating to  
 7 section 725 the following:

“Sec. 726. Requirements with respect to cost sharing for epinephrine delivery  
 systems.”.

8 (c) IRC.—

9 (1) IN GENERAL.—Subchapter B of chapter  
 10 100 of the Internal Revenue Code of 1986 is amend-  
 11 ed by adding at the end the following new section:

12 **“SEC. 9826. REQUIREMENTS WITH RESPECT TO COST SHAR-**  
 13 **ING FOR EPINEPHRINE DELIVERY SYSTEMS.**

14 “(a) IN GENERAL.—A group health plan shall pro-  
 15 vide coverage of epinephrine delivery systems, and with re-  
 16 spect to such delivery systems, may not—

17 “(1) apply any deductible; or

18 “(2) impose any cost sharing in excess of \$60  
 19 per package of 2 delivery systems (or the equiva-  
 20 lent).

21 “(b) APPLICATION OF COST SHARING TOWARD  
 22 DEDUCTIBLES AND OUT-OF-POCKET MAXIMUMS.—Any  
 23 cost-sharing payments made pursuant to subsection (a)(2)

1 shall be counted toward any deductible or out-of-pocket  
 2 maximum that applies under the plan.

3       “(c) OUT-OF-NETWORK PROVIDERS.—Nothing in  
 4 this section requires a plan that has a network of providers  
 5 to provide benefits for an epinephrine delivery system de-  
 6 scribed in this section that is delivered by an out-of-net-  
 7 work provider, or precludes a plan that has a network of  
 8 providers from imposing higher cost sharing than the lev-  
 9 els specified in subsection (a)(2) for an epinephrine deliv-  
 10 ery system described in this section that is delivered by  
 11 an out-of-network provider.

12       “(d) EPINEPHRINE DELIVERY SYSTEM DEFINED.—  
 13 In this section, the term ‘epinephrine delivery system’  
 14 means a delivery system approved by the Food and Drug  
 15 Administration for the administration of epinephrine, in-  
 16 cluding any auto-injector, nasal spray, or sublingual deliv-  
 17 ery system that is so approved.”.

18               (2) CLERICAL AMENDMENT.—The table of sec-  
 19 tions for subchapter B of chapter 100 of the Inter-  
 20 nal Revenue Code of 1986 is amended by adding at  
 21 the end the following new item:

“Sec. 9826. Requirements with respect to cost sharing for epinephrine delivery systems.”.

1           (d) EFFECTIVE DATE.—The amendments made by  
2 this section shall apply with respect to plan years begin-  
3 ning on or after January 1, 2026.

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