

## NATIONAL COMMUNITY PHARMACISTS ASSOCIATION

# 2019 State Legislative Wins for Community Pharmacists

1/17/2020

## Medicaid Managed Care Reform

### Arkansas **SB 520**

Prohibits a PBM from reimbursing the ingredient component at a rate less than NADAC.

### California **Executive Order N-01-19**

Carves pharmacy benefits out of the Medicaid managed care program by 2021.

### Louisiana **SB 239**

Authorizes the Department of Health to carve pharmacy benefits out of the Medicaid managed care program.

### Maryland **HB 589**

Requires the Maryland Medical Assistance Program to conduct an independent audit of the PBMs in the Medicaid managed care program.

### Massachusetts **H 4000**

Requires the Secretary of Health and Human Services to investigate and develop a report for increasing transparency on PBM services in the Medicaid program.

### New York **A 2007, S 1507**

Prohibits a PBM in the Medicaid managed care program from engaging in spread pricing.

### North Dakota **HB 1374**

Provides the Medicaid agency with full access to data regarding amounts paid to PBMs and pharmacies under the Medicaid managed care program.

### Ohio **HB 166**

Requires the state to contract with a single PBM to administer Medicaid managed care benefits; prohibits the PBM from requiring patients to use its own specialty pharmacies; allows pharmacists to appeal reimbursement disputes to the state; reinvests \$100 million into the pharmacy community in the form of supplemental dispensing fees.

### Virginia **HB 1700**

Requires Medicaid managed care organizations to provide data regarding payments to PBMs, pharmacy reimbursements, fees, rebates, and other pricing information.

## PBM Reform

### PBM Registration/Licensure

Requires a PBM to register with the state prior to operating or conducting business in the state.

### Delaware **HB 194**

### Maine **LD 1504 (SP 466)**

### Minnesota **SF 278**

### New Hampshire **SB 226**

### South Carolina **S 359**

### West Virginia **SB 489**

## Fair Pharmacy Audits

Creates and/or strengthens the state's fair pharmacy audit provisions.

### Louisiana **HB 538**

### New Mexico **SB 394**

### Rhode Island **HB 5544/SB 581**

### Tennessee **HB 786**

### Texas **HB 1455**

### Virginia **HB 2561**

### West Virginia **SB 489**

## Transparency/Disclosure

### **Arkansas SB 520**

Applies the state's MAC transparency laws to all PBM reimbursement methodologies; prohibits a PBM from conducting spread pricing; requires a PBM to disclose to the state information concerning rebates and reimbursements.

### **Arizona HB 2285**

Requires a PBM to update MAC lists every 7 business days and to establish a reimbursement appeal process.

### **Delaware HB 194**

Strengthens existing MAC transparency laws.

### **Georgia HB 233**

Requires a PBM to pass rebate savings on for the benefit of patients.

### **Georgia HB 323**

Requires a PBM to provide an annual report to all clients regarding aggregate rebate information.

### **Iowa SF 563**

Requires a PBM to file with the insurance commissioner an annual report regarding its prescription drug benefit services.

### **Louisiana SB 41**

Prohibits spread pricing unless the PBM provides biannual notice to the policyholder of the aggregate amount of the spread; creates a PBM monitoring advisory council to investigate complaints against PBMs.

### **Louisiana HB 433**

Authorizes a pharmacist to decline to dispense a drug if the PBM reimburses the pharmacy in an amount less than the acquisition cost of the drug.

### **Maryland HB 754**

Requires a PBM to establish an appeal process for all reimbursement disputes; prohibits a PBM from charging certain retroactive adjudication fees.

### **Montana SB 83**

Prohibits a PBM from charging certain claim adjudication fees.

### **New Hampshire SB 226**

Prohibits retroactive claim adjustments; strengthens existing MAC transparency laws; re-establishes a commission to study the role PBMs play in the cost of prescription drugs.

### **New Jersey A3717**

Applies the state's MAC transparency laws to all PBM reimbursement methodologies; prohibits retroactive claim adjustments.

### **New Mexico SB 415**

Strengthens the state's MAC transparency laws; prohibits a PBM from reimbursing a pharmacy less than it reimburses one of its affiliated pharmacies.

### **North Dakota HB 1374**

Requires certain publicly funded prescription drug benefit contracts to allow the state to conduct performance audits and allow full access to reimbursement data.

### **Oklahoma HB 2632**

Prohibits retroactive claim adjustments and denials.

### **Oregon HB 2185**

Prohibits PBMs from charging certain retroactive fees; strengthens existing MAC transparency laws.

**South Carolina S 359**

Limits a PBM's authority to retroactively adjust a reimbursement amount; prohibits certain adjudication fees.

**South Dakota HB 1137**

Limits a PBM's authority to retroactively adjust a reimbursement amount.

**Tennessee HB 786**

Prohibits a PBM from charging certain adjudication fees; prohibits a PBM from reimbursing a pharmacy less than it reimburses one of its affiliated pharmacies.

**Utah HB 370**

Limits a PBM's authority to retroactively adjust a reimbursement amount.

**Washington HB 1224**

Requires a PBM to provide an annual report on prescription drug costs to a health care authority.

### Pharmacy Patient Protections

#### *Delivery services*

Limits a PBM's authority to prohibit a network pharmacy from offering delivery services to patients.

**Arizona HB 2285****Montana SB 83****New Jersey A3717****Oregon HB 2185**

#### *Network Adequacy/Patient Choice*

**Arizona HB 2285**

Prevents a PBM from prohibiting 90-day fills at certain pharmacies.

**Georgia HB 233**

Prevents a PBM from steering patients to one of its affiliate pharmacies; prohibits PBMs and

insurance companies from poaching patient information from pharmacies for profit.

**Georgia HB 323**

Prevents a PBM from steering a patient to one of its affiliate pharmacies.

**Louisiana SB 41**

Prohibits patient steering to a pharmacy in which the PBM has an ownership interest without making a written disclosure to the patient and informing them that they have the right to use a different pharmacy.

**Maryland HB 759**

Prohibits a PBM from requiring that a beneficiary use a specific pharmacy in which the PBM has an ownership interest.

**Oklahoma HB 2632**

Establishes network adequacy and "any willing pharmacy" requirements.

**Oregon HB 2185**

Prohibits a PBM from mandating the use of mail-order pharmacies.

**Virginia SB 1197**

Requires certain carriers to allow consumers freedom of choice for pharmacy benefits.

**West Virginia SB 489**

Establishes PBM network adequacy standards and prohibits mail-order only benefits.

#### *Accreditation/Certification*

Prohibits a PBM from requiring accreditation standards or certification requirements for pharmacies beyond those required by the state board of pharmacy.

**Montana SB 83****New Jersey A3717****New Mexico SB 415**

### *Medication Synchronization*

Requires prorated copays and prohibits prorated dispensing fees related to medication synchronization

**Minnesota SF 278**

**Nebraska LB 442**

**New Mexico SB 415**

**Pennsylvania HB 195**

### *“Gag” Clause/Copay clawbacks*

**Alabama SB 73**

**Delaware HB 24**

**Montana HB 270**

**Nebraska LB 316**

**New Jersey S 2690**

**New Mexico SB 415**

**Nevada AB 141**

**Oregon HB 2185**

**South Carolina S 359**

**South Dakota HB 1137**

**West Virginia SB 489**

**Wyoming HB 63**

### State Provider Status

**Arkansas HB 1263**

Allows pharmacists to initiate therapy and administer or dispense nicotine replacement therapy products under a statewide protocol.

**Arkansas HB 1278**

Allows pharmacists to enter into general written protocols for vaccines and immunizations other than influenza vaccines for patients 7-18 years old.

**Arizona HB 2060**

Expands drug therapy agreement protocols between pharmacists and physicians to include any patient referred by the physician.

**California SB 159**

Authorizes pharmacists to provide HIV preexposure and postexposure prophylaxis to patients without a prescription.

**Idaho H 182**

Allows pharmacists to prescribe tobacco cessation and tuberculin purified protein derivative products; removes pharmacy board authorization requirements for pharmacist prescribing of drugs for certain conditions.

**Indiana HB 1248**

Allows a pharmacist to prescribe inhalation spacers, nebulizers, supplies for medical devices, normal saline and sterile water for irrigation, diabetes testing supplies, pen needles, and syringes; expands a pharmacist’s authority to initiate a refill, change the prescribed quantity or package size, and complete missing prescription information.

**Hawaii SB 535**

Allows a pharmacist to prescribe opioid antagonists to patients and family members.

**Montana HB 231**

Expands a pharmacist’s authority to administer immunizations.

**Texas HB 2425**

Allows physicians to delegate the implementation or modification of patient’s drug therapy to pharmacists under a standing order, physician order, or board protocol.

**Washington SB 5380**

Allows partial fills of CII drugs if certain conditions are met; allows a pharmacist to dispense opioid overdose reversal agents pursuant to a collaborative practice agreement, standing order, or protocol.

**West Virginia HB 2525**

Allows a pharmacist to initiate and dispense tobacco cessation therapy to patients 18 years and older pursuant to a standing order.

**West Virginia HB 2583**

Allows a pharmacist to dispense a self-administered hormonal contraceptive to a patient at least 18 years old pursuant to a standing order.

**Wisconsin AB 137**

Eliminates age restriction on vaccines administered by pharmacists and pharmacy students as long as it is pursuant to a prescription order of a physician or other prescribing practitioner.

<http://www.ncpa.co/pdf/2019-state-legislative-wins-com-pharm.pdf>