Medicaid Managed Care Reform

**Kentucky SB 50**
Requires the state to contract with a single PBM to administer Medicaid managed care benefits; authorizes the Medicaid department to establish pharmacy reimbursement methodologies and dispensing fees.

**New York S7506B**
Directs the Department of Health to carve the Medicaid prescription drug benefit out of the managed care program and into the state-administered fee-for-service program beginning in April 2021.

**Virginia HB 1291, SB 568**
Prohibits a PBM in the Medicaid managed care program from engaging in spread pricing.

PBM Reform

**Colorado HB20-1078**
Prohibits retroactive claim reductions; prohibits a PBM from reimbursing a pharmacy less than it reimburses one of its affiliated pharmacies.

**Georgia HB 946 and SB 313**
Requires the reporting of drugs paid 10 percent above and 10 percent below National Average Drug Acquisition Cost every four months; prohibits a PBM from tying a pharmacy’s drug reimbursement to a patient’s health outcomes; requires a PBM to offer drug coverage plans that do not include spread pricing and plans that allow plan sponsors to receive 100 percent of rebates negotiated by the PBM.

**Georgia HB 918**
Strengthens existing anti-steering and fair pharmacy audit provisions.

**Idaho H 386**
Requires a PBM to register with the state; requires a PBM to establish a MAC appeal process; prohibits a PBM from retroactively denying or reducing a reimbursement amount; prohibits a PBM from implementing a gag clause.

**Indiana SB 241**
Prohibits a PBM from conditioning network participation on pharmacy accreditation standards that are more stringent than state or federal requirements, retroactively denying or reducing a claim, and reimbursing a PBM-owned pharmacy at higher rates than it reimburses non-affiliated pharmacies; requires a PBM to establish a MAC-appeals process; establishes PBM reporting requirements.

**Indiana HB 1207**
Prohibits co-pay clawbacks in the state employee health benefit plan.

**Maine LD 1928**
Prohibits a PBM from charging certain retroactive claim adjudication fees.

**Maryland HB 1273**
Allows a pharmacy to withdraw and resubmit a claim for which a discrepancy was found during an audit.

**Maryland HB 1307**
Prohibits a PBM from reducing payment under a reconciliation process to an effective rate; limits a PBM’s authority to implement onerous pharmacy credentialing requirements.
Mississippi HB 708
Prohibits a PBM from implementing retroactive claim reductions, establishing arbitrary pharmacy accreditation/certification requirements, and steering patients to PBM-owned pharmacies.

New Hampshire SB 63
Requires a PBM/insurer to pass manufacturer rebates to patients by offsetting out-of-pocket costs or premiums.

Pennsylvania HB 943
Prohibits a PBM from implementing a gag clause; requires a PBM/insurer to pass manufacturer rebates to patients by offsetting out-of-pocket costs or premiums.

Utah SB 138
Prohibits a PBM from interfering with a pharmacy’s authority to offer home delivery services.

Utah HB 272
Prohibits a PBM from reimbursing PBM-owned pharmacies more than non-affiliated pharmacies, limiting a pharmacy’s ability to offer home delivery services, and charging retroactive fees without providing notice to the pharmacy.

Virginia HB 1290
Requires a PBM to obtain a license from the state; prohibits a PBM from conducting spread pricing, charging certain adjudication fees, reimbursing a pharmacy an amount less than the amount that the PBM reimburses an affiliated pharmacy, imposing provider accreditation standards or certification requirements in addition to state requirements, including any mail order pharmacy or affiliated pharmacy in calculating or determining network adequacy, or disseminating misleading information.

Washington HB 2464
Prohibits a PBM from implementing a co-pay clawback.

Washington SB 5601
Prohibits a PBM from retroactively decreasing a reimbursement amount; prohibits certain transaction/adjudication fees; prohibits a PBM from establishing arbitrary pharmacy accreditation standards; prohibits a PBM from reimbursing a pharmacy less than it reimburses on of its affiliated pharmacies.

West Virginia HB 4058
Strengthens the Insurance Commissioner’s enforcement authority over PBMs.

State Provider Status
Colorado HB 20-1061
Authorizes pharmacists to prescribe and dispense PrEP and PEP medications, requires coverage of HIV infection prevention drugs prescribed or dispensed by a pharmacist and provision of an adequate consultative fee or adequate dispensing fee (if medical billing is unavailable) equivalent to that provided to a physician or advanced practice nurse.

Colorado SB 20-212
Establishes reimbursement for telehealth services at the same rate for services provided in person.

Florida HB 389
Expands scope of practice to include initiating, modifying, or discontinuing drug therapy for a chronic health condition under a collaborative practice agreement (CPA); allows pharmacists to test and treat for minor, nonchronic health conditions under a protocol with a supervising physician; allows pharmacist therapy
Florida HB 599
Authorizes a consultant pharmacist to order and evaluate any lab or clinical test, conduct patient assessments, implement, modify, discontinue, or administer medicinal drugs under the direction of a CPA.

Georgia HB 791
Authorizes a pharmacist to dispense certain refill prescription medications and dispense up to a 90-day supply of a maintenance medication under certain conditions.

Minnesota SF 13
Requires health plans to provide prescription coverage for self-administered hormonal contraceptives, nicotine replacement medications, and opiate antagonist. Authorizes pharmacists to furnish FDA approved COVID-19 or SARS-CoV-2 vaccines to eligible individuals 6 years and older. Allow for therapeutic interchange during peacetime emergency.

New Hampshire HB 1639
Authorizes pharmacists and pharmacy interns (under supervision) to administer COVID-19 vaccine.

New Mexico HB 42
Requires commercial payers and managed Medicaid plans to reimburse pharmacists practicing within their scope of practice at the same rate as other providers.

New York S 8182
Expands pharmacist’s vaccine authority by including approved COVID-19 vaccines.

South Carolina S 16
Authorizes a pharmacist to dispense an emergency refill of up to a 14-day supply (or up to a 30-day supply if the medication’s packaging prevents a refill amount in the quantity specified).

Utah SB 145
Allows for change of quantity and dosage forms, allows for emergency refills, allows for standing orders for epinephrine injectable orders and albuterol stock.

Virginia HB 1506
Authorizes prescribing, dispensing, and administration of certain controlled substances by a pharmacist, and clarifies that certain insurance policies must provide reimbursement when those services are performed in accordance with regulations of the Board of Pharmacy.

West Virginia HB 4102
Authorizes a pharmacist to directly or by standing order prescribe an opioid antagonist.

West Virginia SB 544
Authorizes pharmacists to administer immunizations in accordance with CDC guidelines including, but not limited to, the CDC’s recommended immunization schedule for adults, children, and adolescents to a person age 11 through 17, with written informed parental consent when presented with a prescription from a physician.

West Virginia SB 787
Requires provided benefits to pharmacists for pharmacist care rendered within the pharmacist’s scope of practice if benefits would be provided for such services performed by other health care providers.