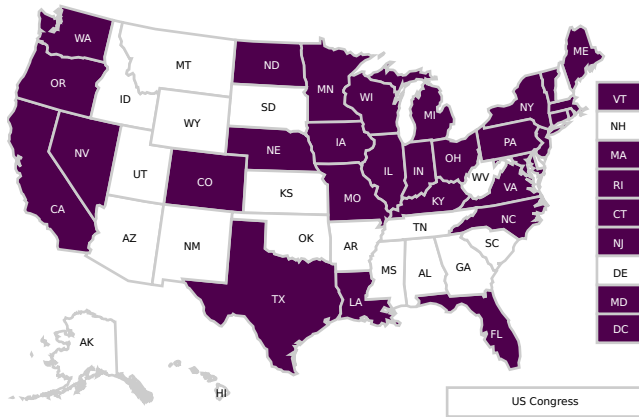


Medicaid Reform Legislation 2021

Last Updated: September 17, 2021

Bills by State



Bills by Issue

Recently Updated Bills (3)

State	Bill Number	Last Action	Status
DC	B 24-0285	Transmitted To Mayor Response Due On Sep 27 2021 2021 09 13	Passed City Council

Title
Fiscal Year 2022 Budget Support Act of 2021

Introduction Date: 2021-05-27

Primary Sponsors
Phil Mendelson

State	Bill Number	Last Action	Status
MA	H 1097	Hearing Scheduled For 09 21 2021 From 10 00 Am 03 00 Pm In Virtual Hearing 2021 09 14	In House

Title Introduction Date: 2021-03-29
An Act ensuring pharmacy access

Description
By Miss Garry of Dracut, a petition (accompanied by bill, House, No. 1097) of Colleen M. Garry relative to the rights of pharmacists to participate as preferred health care providers. Financial Services.

Primary Sponsors
Colleen Garry

State	Bill Number	Last Action	Status
MO	HB 11	Reported To The Senate S 2021 09 15	Passed Senate

Title Introduction Date: 2021-02-24
NO TITLE

Primary Sponsors
Cody Smith

Medicaid Reform (139)

Title

Medi-Cal: pharmacy benefits.

Introduction Date: 2021-02-12

Description

AB 671, as amended, Wood. Medi-Cal: pharmacy benefits. Existing law establishes the Medi-Cal program, administered by the State Department of Health Care Services and under which health care services are provided to qualified low-income persons pursuant to a schedule of benefits, which includes pharmacy benefits, through various health care delivery systems, including fee-for-service and managed care. The Medi-Cal program is, in part, governed and funded by federal Medicaid program provisions. Existing law authorizes the department to contract with a vendor for the purposes of surveying drug price information, collecting data from providers, wholesalers, or drug manufacturers, and calculating a proposed actual acquisition cost. Existing law authorizes the department to establish a list of maximum allowable ingredient cost for generically equivalent drugs, and to establish the actual acquisition cost based on 3 specified factors, including the volume weighted actual acquisition cost adjusted by the department to verify that the actual acquisition cost represents the average purchase price paid by retail pharmacies in California, or the proposed actual acquisition cost as calculated by a vendor, as specified. Existing law requires the department to establish a fee schedule for the list of pharmacist services. Existing law specifies the pharmacist services that may be provided to a Medi-Cal beneficiary. This bill would require the department to provide a disease management or similar payment to a pharmacy that the department has contracted with to dispense a specialty drug to Medi-Cal beneficiaries in an amount necessary to ensure beneficiary access, as determined by the department based on the results of the survey completed during the 2020 calendar year.

Primary Sponsors

Jim Wood

State

CA

Bill Number

AB 1064

Last Action

Enrolled And Presented To The Governor At 4
P M 2021 09 10

Status

Passed Senate

Title

Pharmacy practice: vaccines: independent initiation and administration.

Description

AB 1064, Fong. Pharmacy practice: vaccines: independent initiation and administration. Existing law, the Pharmacy Law, establishes the California State Board of Pharmacy within the Department of Consumer Affairs and sets forth its powers and duties relating to the licensing and regulation of pharmacists. A violation of the Pharmacy Law is a crime. Existing law authorizes a pharmacist to administer immunizations pursuant to a protocol with the prescriber. Existing law provides additional authority for the pharmacist to independently initiate and administer any COVID-19 vaccines approved or authorized by the federal Food and Drug Administration (FDA), or vaccines listed on the routine immunization schedules recommended by the federal Advisory Committee on Immunization Practices (ACIP), in compliance with individual ACIP vaccine recommendations, and published by the federal Centers for Disease Control and Prevention (CDC) for persons 3 years of age and older. This bill would recast this provision to instead authorize a pharmacist to independently initiate and administer any vaccine that has been approved or authorized by the FDA and received an ACIP individual vaccine recommendation published by the CDC for persons 3 years of age and older.

Primary Sponsors

Vince Fong

Bill Summary: Last edited by Belawoe Akwakoku at Aug 19, 2021, 3:26 PM
permits pharmacists to independently initiate and administer any FDA approved vaccines for persons 3 years if age and older

Introduction Date: 2021-02-18

State	Bill Number	Last Action	Status
CO	HB 21-1275	Governor Signed 2021 07 07	Enacted

Title Introduction Date: 2021-04-15
Medicaid Reimbursement For Services By Pharmacists

Description

Under the act, a pharmacist is eligible for reimbursement under the medical assistance program for certain medically necessary pharmacist services, as described in the act, that are not duplicative of other pharmacist services or programs reimbursed under the medical assistance program. The department of health care policy and financing shall include services reimbursed pursuant to the act in the review of provider rates for the medical assistance program. Further, the act allows a pharmacist or pharmacy that dispenses or administers extended-release injectable medications for the treatment of mental health or substance use disorders to seek reimbursement for those medications under the medical assistance program as either a pharmacy benefit or as a medical benefit. The act requires that costs associated with services provided by clinical pharmacists through a federally qualified health center (FQHC) be considered allowable costs for the purpose of the FQHC's cost report and be included in the calculation of the reimbursement rate for a patient visit at an FQHC. The act appropriates \$372,554 to the department of health care policy and financing from the general fund and the healthcare affordability and sustainability fee cash fund to implement the act. (Note: This summary applies to this bill as enacted.)

Primary Sponsors

Susan Lontine, Perry Will, Joann Ginal, Barb Kirkmeyer

State	Bill Number	Last Action	Status
CT	HB 6446	Referred By House To Committee On Appropriations 2021 04 26	Failed sine die

Title Bill Summary: Last edited by Matt Magner at Feb 11, 2021, 8:38 PM
AN ACT CONCERNING THE GOVERNOR'S BUDGET Budget
RECOMMENDATIONS FOR HUMAN SERVICES.

Introduction Date: 2021-02-11

Description

To implement the Governor's budget recommendations for human services.

State	Bill Number	Last Action	Status
CT	HB 6687	Signed By The Governor 2021 07 12	Enacted

Title Introduction Date: 2021-06-06
AN ACT CONCERNING MEDICAL ASSISTANCE FOR CHILDREN AND ADULTS WITHOUT HEALTH CARE COVERAGE.

Primary Sponsors

Matt Ritter, Martin Looney

State	Bill Number	Last Action	Status
DC	B 24-0115	Public Hearing On B 24 0115 2021 04 21	Under Council Review

Title Introduction Date: 2021-02-26
Department of Health Care Finance Support Act of 2021

Description
BILL SUMMARY - As introduced, Bill 24-115 would allow certain solicitations with respect to the Department of Health Care Finance issued on or before August 20, 2020 to be deemed to have been accepted by the District when the District receives the last best and final offer from the offeror of a subcontracting plan.

Primary Sponsors
Phil Mendelson

State	Bill Number	Last Action	Status
DC	B 24-0176	Act A 24 0063 Published In Dc Register Vol 68 And Page 004899 Expires On Aug 03 2021 2021 05 07	Enacted

Title Introduction Date: 2021-03-31
Contract No. DCCB-2021-F-0008 with Motley Rice, LLC Approval and Payment Authorization Emergency Act of 2021

Primary Sponsors
Phil Mendelson

State	Bill Number	Last Action	Status
DC	B 24-0285	Transmitted To Mayor Response Due On Sep 27 2021 2021 09 13	Passed City Council

Title Introduction Date: 2021-05-27
Fiscal Year 2022 Budget Support Act of 2021

Primary Sponsors
Phil Mendelson

State	Bill Number	Last Action	Status
FL	HB 1043	Died In Finance Facilities Subcommittee 2021 04 30	Failed

Title
Medicaid Pharmacy Benefit Savings

Bill Summary: Last edited by Matt Magner at Feb 18, 2021, 9:22 PM
Single PBM for MMC

Description
Requires AHCA to select single pharmacy benefit administrator through competitive procurement process by specified date; provides contract requirements; requires agency to calculate amount equal to specified percentage of managed care organization's net underwriting gain for certain contract year & reduce organization's contract term payment by such amount.

Introduction Date: 2021-02-16

Primary Sponsors
Randy Fine, Jackie Toledo

State	Bill Number	Last Action	Status
FL	HB 1057	Chapter No 2021 151 2021 06 23	Enacted

Title
Agency for Health Care Administration

Introduction Date: 2021-02-17

Description
Removes certain reporting requirements applicable to AHCA, certain requirements for Medicaid Pharmaceutical & Therapeutics Committee, & provisions relating to agency's implementation of prescribed-drug spending-control program & Organ Transplant Advisory Council.

Primary Sponsors
Sam Garrison, Subcommittee on Finance and Facilities

State	Bill Number	Last Action	Status
FL	SB 1292	Laid On Table Companion Bill S Passed See Cs Hb 1057 Ch 2021 151 Sj 720 2021 04 26	Failed sine die

Title
Medicaid

Introduction Date: 2021-02-15

Description
Deleting a requirement for the Agency for Health Care Administration to submit an annual report to the Legislature on the operation of the pharmaceutical expense assistance program; revising the method for determining prescribed drug provider reimbursements; requiring the agency to establish certain procedures related to prior authorization requests rather than prior consultation requests; revising the definitions of the terms "medical necessity" and "medically necessary" to provide an exception for behavior analysis services determinations, etc.

Primary Sponsors
Aaron Bean, Senate Committee on Health Policy

State	Bill Number	Last Action	Status
FL	SB 1306	Died In Health Policy 2021 04 30	Failed

Title
Medicaid Pharmacy Benefit Savings

Bill Summary: Last edited by Matt Magner at Feb 16, 2021, 7:37 PM
Requiring single PBM in MMC program.

Description
Citing this act as the "Medicaid Pharmacy Benefit Savings Optimization Act"; requiring the Agency for Health Care Administration to select a single pharmacy benefit administrator through a competitive procurement process to administer all pharmacy benefits for Medicaid recipients enrolled in managed care plans; requiring the agency to complete the procurement process and select the pharmacy benefit administrator by a specified date; prohibiting managed care organizations from providing pharmacy benefits for their enrolled members, etc.

Introduction Date: 2021-02-15

Primary Sponsors
Ana Rodriguez

State	Bill Number	Last Action	Status
FL	SPB 2500	Submitted As Committee Bill And Reported Favorably By Appropriations Yeas 20 Nays 0 2021 03 31	Failed sine die

Title
Appropriations

Introduction Date: 2021-03-26

Description
Providing moneys for the annual period beginning July 1, 2021, and ending June 30, 2022, and supplemental appropriations for the period ending June 30, 2021, to pay salaries, and other expenses, capital outlay - buildings, and other improvements, and for other specified purposes of the various agencies of state government, etc.

Primary Sponsors
Senate Committee on Appropriations

State	Bill Number	Last Action	Status
IA	HF 767	Referred To Human Resources 2021 04 15	In House

Title
A bill for an act relating to participating network provider pharmacies and pharmacists under Medicaid managed care. (Formerly HSB 224.)

Introduction Date: 2021-03-05

Primary Sponsors
Brooke Boden

State	Bill Number	Last Action	Status
IA	HF 891	Explanation Of Vote 2021 06 22	Enacted

Title

A bill for an act relating to appropriations for health and human services and veterans and including other related provisions and appropriations, providing penalties, and including effective date and retroactive and other applicability date provisions. Effective date: Enactment, 07/01/2021. Applicability date: 07/01/2020.

Introduction Date: 2021-04-28**Primary Sponsors**

Mark Costello, Joel Fry

State	Bill Number	Last Action	Status
IA	HSB 224	Committee Report Approving Bill Renumbered As Hf 767 2021 03 05	In House

Title

A bill for an act relating to participating network provider pharmacies and pharmacists under Medicaid managed care.(See HF 767.)

Bill Summary: Last edited by Matt Magner at Feb 18, 2021, 7:59 PM AWP in MMC**Introduction Date:** 2021-02-17**Primary Sponsors**

Brooke Boden

State	Bill Number	Last Action	Status
IA	SF 606	Withdrawn 2021 05 17	In Senate

Title

A bill for an act relating to appropriations for health and human services and veterans and including other related provisions and appropriations, providing penalties, and including effective date and retroactive and other applicability date provisions.(Formerly SSB 1267.)

Introduction Date: 2021-04-21**Primary Sponsors**

Mark Costello, Joel Fry

State

IL

Bill Number

HB 450

Last Action

Rule 19 A Re Referred To Rules Committee
2021 03 27

Status

In House

Title

Medicaid-Pharmacy Payments

Description

Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services and Medicaid managed care organizations may not deny reimbursement to a pharmacist for the provision of a service or procedure within the scope of the pharmacist's license if the service or procedure: (1) would be covered by the Department or the Medicaid managed care organization if the service were provided by a physician; an advanced practice nurse; or a physician assistant; and (2) is performed by the pharmacist in strict compliance with laws and rules related to the provision of the service or procedure and the pharmacist's license.

Primary Sponsors

Deb Conroy

Bill Summary: Last edited by Belawoe Akwakoku at Aug 19, 2021, 5:28 PM

Requires MCO/PBM to reimburse pharmacists for covered services that are within the pharmacist's scope of practice.

Introduction Date: 2021-02-02

Title

Medicaid-Pharmacy Access

Bill Summary: Last edited by Matt Magner at Feb 4, 2021, 3:03 PM
Establishes AWP requirements.**Description**

Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires the Department of Healthcare and Family Services to permit medical assistance recipients, including those enrolled in managed care, to obtain pharmacy services from the pharmacy of their choice if the pharmacy is licensed under the Pharmacy Practice Act and accepts the professional dispensing fee for pharmacy services as determined by the Department. Provides that no managed care organization that contracts with the Department to provide services to recipients may restrict a recipient's access to pharmacy services to a selected group of pharmacies. Provides that if a managed care organization merges with or is acquired by another entity, the resulting entity may not restrict a recipient's access to pharmacy services to a selected group of pharmacies. Permits the Department to renegotiate with the resulting entity the terms of the managed care contract the Department had with the original managed care organization prior to the merger or acquisition. Requires the Department to contract with an independent research organization to conduct a study and submit a report on those managed care organizations that are contracted to provide services to recipients. Requires the report to include an analysis of pharmacy access for medical assistance recipients with the aim of identifying "pharmacy deserts"; an analysis of the costs and benefits of having managed care organizations administer health care services, including pharmacy services, to recipients; and other matters. Prohibits the Department from entering into any new contract with a managed care organization before the report has been received and analyzed by the Department and posted on its website. Effective immediately.

Introduction Date: 2021-02-03**Primary Sponsors**

La Shawn Ford, Kelly Cassidy, Carol Ammons, Terra Costa Howard, Lindsey LaPointe

Title

Ins Code-Birth Control

Description

Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Provides that the Director of Public Health, if a physician licensed to practice medicine in all its branches in Illinois, shall establish a standing order complete with the issuance of a prescription for a hormonal contraceptive in accordance with the requirements of the provisions. Provides that if the Director is not a physician licensed to practice medicine in all its branches in Illinois, the Medical Director of the Department of Public Health shall establish the standing order. Amends the Illinois Insurance Code. Requires a group or individual policy of accident and health insurance or managed care plan to provide coverage for patient care services provided by a pharmacist. Makes conforming changes in the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, and the School Code. Amends the Pharmacy Practice Act. Provides that the definition of "practice of pharmacy" includes the dispensing of hormonal contraceptives pursuant to the standing order under provisions of the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Amends the Illinois Public Aid Code. Requires the medical assistance program to cover patient care services provided by a pharmacist for hormonal contraceptives assessment and consultation. Effective January 1, 2020.

Primary Sponsors

Anne Stava-Murray, Michelle Mussman, Jonathan Carroll

Bill Summary: Last edited by zAllie Jo Shipman at Feb 6, 2019, 5:30 PM

This bill changes the definition of the practice of pharmacy to allow a pharmacist to dispense a 12-month supply of hormonal contraceptives to a patient pursuant to a standing order. It also requires pharmacists to complete an ACPE-accredited training program prior to dispensing under the standing order. This bill requires certain health insurance plans to provide coverage for patient care services provided by a pharmacist for hormonal contraceptives assessment and consultation. It requires the state Medicaid program (both FFS and managed care) to cover these services at a rate of reimbursement of 85% of the physician fee schedule.

Introduction Date: 2019-01-28

Title
Sexual Assault Evidence Track

Introduction Date: 2021-02-11

Description

Amends the Sexual Assault Evidence Submission Act. Provides that health care providers or local law enforcement must notify victims about the tracking system after an Illinois Sexual Assault Evidence Collection Kit has been analyzed. Amends the Hospital Licensing Act. Provides that a hospital licensed under this Act must comply with the requirements concerning the sexual assault evidence tracking system under the Sexual Assault Evidence Submission Act. Replaces everything after the enacting clause. Amends the Sexual Assault Evidence Submission Act. Provides that the Illinois State Police may, rather than shall, develop rules to implement a sexual assault evidence tracking system. Amends the Sexual Assault Incident Procedure Act. Adds a requirement that at the time of first contact with the victim, law enforcement shall notify victims about the Illinois State Police sexual assault evidence tracking system. Provides that upon the request of the victim who has consented to the release of sexual assault evidence for testing, the law enforcement agency having jurisdiction shall notify the victim about the Illinois State Police sexual assault evidence tracking system. Makes other changes. Provides that a health care provider must provide information to victims about the tracking system at the time when information pertaining to the collection of sexual assault evidence is provided. Provides that using the contact information provided, a local law enforcement agency must take reasonable steps to notify victims about the tracking system after sexual assault evidence has been collected. Replaces everything after the enacting clause. Reinserts the provisions of the bill as engrossed, with the following changes: Amends the Sexual Assault Survivors Emergency Treatment Act. In a provision concerning the minimum requirements for medical forensic services provided to sexual assault survivors by hospitals and approved pediatric health care facilities, provides that a treatment hospital, a treatment hospital with approved pediatric transfer, or an approved pediatric health care facility shall provide written information regarding the Illinois State Police sexual assault evidence tracking system. Makes a conforming change in a provision concerning minimum requirements for medical forensic services provided to sexual assault survivors by hospitals, approved pediatric health care facilities, and approved federally qualified health centers. Further amends the Sexual Assault Incident Procedure Act. Replaces the contents of a provision concerning victim notification with a provision providing that when evidence is collected from a sexual assault survivor, the health care provider or law enforcement officer who collects the evidence must notify a victim about the trackin... (click bill link to see more).

Primary Sponsors

Maura Hirschauer, Deb Conroy, Fran Hurley, Karina Villa, Robert Peters, Jacqui Collins, Patricia Van Pelt

State	Bill Number	Last Action	Status
IL	HB 3244	Rule 19 A Re Referred To Rules Committee 2021 03 27	In House

Title
Medicaid-Mco-Pharmacy Fee

Bill Summary: Last edited by Matt Magner at Feb 19, 2021, 7:16 PM
MMC: establishes reimbursement FFS benchmarks

Description
Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires all Medicaid managed care organizations to reimburse pharmacy provider dispensing fees and acquisition costs at no less than the amounts established under the fee-for-service program whether the Medicaid managed care organization directly reimburses pharmacy providers or contracts with a pharmacy benefit manager to reimburse pharmacy providers. Provides that the reimbursement requirement applies to all pharmacy services for persons receiving benefits under the Code including pharmacy services. Effective immediately.

Introduction Date: 2021-02-19

Primary Sponsors
Natalie Manley

State	Bill Number	Last Action	Status
IL	HB 3266	Rule 19 A Re Referred To Rules Committee 2021 03 27	In House

Title
Medicaid-Pharmacy Services

Bill Summary: Last edited by Matt Magner at Feb 19, 2021, 7:15 PM
Medicaid pharmacy carve out

Description
Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that the Department of Healthcare and Family Services shall transition pharmacy services for managed care enrollees from the State's managed care medical assistance program back to the State's traditional fee-for-service program, thereby assuming direct responsibility for all pharmacy services provided under the Article. Provides that the transition back to a fee-for-service reimbursement model for pharmacy services shall be implemented by the Department upon the expiration of any managed care contracts the Department has with managed care organizations on the effective date of the amendatory Act. Provides that, to ensure managed care enrollees do not experience an interruption in pharmacy services during the transition from managed care to fee-for-service coverage, the Department must, at a minimum, do the following: add an additional pharmacist to its staff; stress-test its existing claims processing system; increase its capacity for prior authorizations; and educate the public and its help desk staff about the change in coverage for pharmacy services. Grants the Department rulemaking authority. Repeals a provision that permits the Department to enter into a contract with a third party on a fee-for-service reimbursement model for the purpose of administering pharmacy benefits for recipients not enrolled in a Medicaid managed care organization. Effective immediately.

Introduction Date: 2021-02-19

Primary Sponsors
Mary Flowers

State	Bill Number	Last Action	Status
IL	HB 3811	Session Sine Die 2021 01 13	Failed

Title
Ins Code-Birth Control

Description

Amends the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Provides that the Director of Public Health, if a physician licensed to practice medicine in all its branches in Illinois, shall establish a standing order complete with the issuance of a prescription for a hormonal contraceptive in accordance with the requirements of the provisions. Provides that if the Director is not a physician licensed to practice medicine in all its branches in Illinois, the Medical Director of the Department of Public Health shall establish the standing order. Provides that a pharmacist may dispense a 12-month supply of hormonal contraceptives to a patient who is age 17 or older. Amends the Illinois Insurance Code. Requires a group or individual policy of accident and health insurance or managed care plan to provide coverage for patient care services provided by a pharmacist. Makes conforming changes in the State Employees Group Insurance Act of 1971, the Counties Code, the Illinois Municipal Code, and the School Code. Amends the Pharmacy Practice Act. Provides that the definition of "practice of pharmacy" includes the dispensing of hormonal contraceptives pursuant to the standing order under provisions of the Department of Public Health Powers and Duties Law of the Civil Administrative Code of Illinois. Amends the Illinois Public Aid Code. Requires the medical assistance program to cover patient care services provided by a pharmacist for hormonal contraceptives assessment and consultation for patients who are age 17 or older. Effective January 1, 2020.

Primary Sponsors
Mark Batinick

Bill Summary: Last edited by zAllie Jo Shipman at Mar 21, 2019, 11:59 AM

This bill provides that a pharmacist may dispense a 12-month supply of hormonal contraceptives to a patient who is age 17 or older pursuant to a standing order. It also requires a group or individual policy of accident and health insurance or managed care plan to provide coverage for patient care services for hormonal contraceptives provided by a pharmacist.

Introduction Date: 2019-03-18

State	Bill Number	Last Action	Status
IL	HB 4394	Session Sine Die 2021 01 13	Failed

Title
Abortion-Variou

Description

Amends the State Employees Group Insurance Act of 1971, the Illinois Public Aid Code, and the Problem Pregnancy Health Services and Care Act. Restores the provisions that were amended by Public Act 100-538 to the form in which they existed before their amendment by Public Act 100-538.

Primary Sponsors
Patrick Windhorst

Introduction Date: 2020-01-29

State

IL

Bill Number

HB 4443

Last Action

Session Sine Die 2021 01 13

Status

Failed

Title

Cybersecurity-Information Tech

Introduction Date: 2020-01-31

Description

Amends the Freedom of Information Act. Modifies the exemptions from inspection and copying concerning cybersecurity vulnerabilities. Amends the Department of Innovation and Technology Act. Authorizes the Department of Innovation and Technology to accept grants and donations. Creates the Technology, Education, and Cybersecurity Fund as a special fund in the State treasury to be used by the Department of Innovation and Technology to promote and effectuate information technology activities. Requires a local government official or employee to be chosen to act as the primary point of contact for local cybersecurity issues. Amends the Illinois Information Security Improvement Act. Requires the Secretary of Innovation and Technology to establish a cybersecurity liaison program to advise and assist units of local government and school districts concerning specified cybersecurity issues. Provides for cybersecurity training for employees of counties, municipalities, and school districts. Amends the Illinois Procurement Code. Provides that State agencies are prohibited from purchasing any products that, due to cybersecurity risks, are prohibited for purchase by federal agencies pursuant to a United States Department of Homeland Security Binding Operational Directive. Amends the State Finance Act to provide for the Technology, Education, and Cybersecurity Fund.

Primary Sponsors

Jaime Andrade

State

IL

Bill Number

HB 4444

Last Action

Tabled 2020 02 18

Status

In House

Title

Cybersecurity-Information Tech

Introduction Date: 2020-01-31

Description

Amends the Freedom of Information Act. Modifies the exemptions from inspection and copying concerning cybersecurity vulnerabilities. Amends the Department of Innovation and Technology Act. Authorizes the Department of Innovation and Technology to accept grants and donations. Creates the Technology, Education, and Cybersecurity Fund as a special fund in the State treasury to be used by the Department of Innovation and Technology to promote and effectuate information technology activities. Requires a local government official or employee to be chosen to act as the primary point of contact for local cybersecurity issues. Amends the Illinois Information Security Improvement Act. Requires the Secretary of Innovation and Technology to establish a cybersecurity liaison program to advise and assist units of local government and school districts concerning specified cybersecurity issues. Provides for cybersecurity training for employees of counties, municipalities, and school districts. Amends the Illinois Procurement Code. Provides that State agencies are prohibited from purchasing any products that, due to cybersecurity risks, are prohibited for purchase by federal agencies pursuant to a United States Department of Homeland Security Binding Operational Directive. Amends the State Finance Act to provide for the Technology, Education, and Cybersecurity Fund.

Primary Sponsors

Jaime Andrade

State	Bill Number	Last Action	Status
IL	HB 4789	Session Sine Die 2021 01 13	Failed

Title Introduction Date: 2020-02-10
Ins-Health Care For Veterans

Description

Amends the State Employees Group Insurance Act of 1971, the Counties Code, and the Illinois Municipal Code. Provides that the program of health benefits for persons in the service of the State, a self-insuring county, or a self-insuring municipality may not deny a claim from a medical facility operated by the Veterans Health Administration of the U.S. Department of Veterans Affairs on the basis that the medical facility is an out-of-network provider and may not impose a deductible, coinsurance, copayment, or any other cost-sharing requirement on a claim from a medical facility operated by the Veterans Health Administration of the U.S. Department of Veterans Affairs unless cost sharing is applied to such a claim from an in-network provider. Amends the Network Adequacy and Transparency Act. Provides that an insurer providing a network plan may not deny a claim from a medical facility operated by the Veterans Health Administration on the basis that the medical facility is a non-preferred provider and may not impose a deductible, coinsurance, copayment, or any other cost-sharing requirement on a claim from a medical facility operated by the Veterans Health Administration unless cost sharing is applied to such a claim from a preferred provider. Defines "Veterans Health Administration".

Primary Sponsors

Dan Swanson

State	Bill Number	Last Action	Status
IL	HB 5764	Session Sine Die 2021 01 13	Failed

Title Introduction Date: 2020-03-13
First 2020 General Revisory

Description

Creates the First 2020 General Revisory Act. Combines multiple versions of Sections amended by more than one Public Act. Renumbers Sections of various Acts to eliminate duplication. Corrects obsolete cross-references and technical errors. Makes stylistic changes. Effective immediately.

Primary Sponsors

Greg Harris

State	Bill Number	Last Action	Status
IL	SB 142	Rule 3 9 A Re Referred To Assignments 2021 05 07	In Senate

Title
Medicaid-Exception To Rx Limit

Bill Summary: Last edited by Matt Magner at Feb 11, 2021, 9:26 PM
Regarding prior authorization in Medicaid

Description
Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that drugs prescribed to residents of the following facilities are not subject to prior approval as a result of the 4-prescription limit: (i) long-term care facilities as defined in the Nursing Home Care Act; (ii) community-integrated living arrangements as defined in the Community-Integrated Living Arrangements Licensure and Certification Act; (iii) supportive living facilities as defined in the Code; (iv) intermediate care facilities for persons with developmental disabilities as defined in the ID/DD Community Care Act; and (v) medically complex for the developmentally disabled facilities as defined in the MC/DD Act.

Introduction Date: 2021-02-09

Primary Sponsors
Laura Murphy, Julie Morrison

State	Bill Number	Last Action	Status
IL	SB 270	Rule 3 9 A Re Referred To Assignments 2021 04 16	In Senate

Title
Medicaid-Prescription Meds

Introduction Date: 2021-02-17

Description
Amends the Medical Assistance Article of the Illinois Public Aid Code. Provides that beginning July 1, 2021, all FDA approved prescription medications that are recognized by a generally accepted standard medical reference as effective in the treatment of conditions specified in the most recent Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association must be covered under both fee-for-service and managed care medical assistance programs for persons who are otherwise eligible for medical assistance and shall not be subject to any (i) utilization control, (ii) prior authorization mandate, or (iii) lifetime restriction limit mandate. Effective July 1, 2021.

Primary Sponsors
Mike Hastings

Title
Sexual Assault Survivors

Introduction Date: 2019-01-31

Description

Amends the Uniform Act for the Extradition of Persons of Unsound Mind. Makes a technical change in a Section concerning the short title. Replaces everything after the enacting clause. Creates the Carpet Stewardship Act. Provides that for all carpet sold in this State, producers shall, through a clearinghouse, implement and finance a statewide carpet stewardship program that manages the product by reducing the product's waste generation, promotes its reuse and recycling, and provides for negotiation and execution of agreements to collect, transport, process, and market the product for end-of-life recycling and reuse. Provides that the Illinois Environmental Protection Agency must approve the carpet stewardship plan for the plan to be valid. Establishes requirements for review of the plan, carpet stewardship assessments, requirements for producers, retailers, and distributors of carpet. Requires the clearinghouse to submit annual reports to the Agency and pay specified administrative fees. Provides enforcement provisions for the Act. Establishes requirements for State procurement of carpet in the future. Effective immediately. Replaces everything after the enacting clause. Amends the Environmental Protection Act. Provides for the phasing out of ethylene oxide emissions by specified entities. Provides that, prior to issuing specified permits, the Environmental Protection Agency shall require submission of documentation demonstrating that the permit applicant is in compliance with laws governing the storage of ethylene oxide. Requires all permits issued by the Agency to grant the Agency the authority to modify them to change storage limitations, modify storage practices or equipment requirements, and grant the Agency the right to conduct unannounced inspections. Requires the Agency to conduct at least one unannounced inspection annually of the ethylene oxide storage system for each permit holder. Provides that owners or operators of ethylene oxide sterilization sources or ethylene oxide emissions sources shall provide the Agency with specified materials within 10 business days after receiving the Agency's conditional acceptance or denials of their plans. Requires entities conducting ethylene oxide sterilization operations to submit a letter to the Agency. Requires the submission or resubmission of a risk management plan to the Agency by specified dates. Requires the Agency to submit and make publicly available a report on or before June 30, 2021. Provides that if multiple applicants request to emit ethylene oxide in a collective sum that is greater than the annual collective maximum regional emissions, the Agency shall prioritize applicants seeking to provide medical services. Contains other provisions. Effective immediately. Replaces everything after... (click bill link to see more).

Primary Sponsors

Elgie Sims, Melinda Bush, John Connor, Joyce Mason, Kelly Cassidy, Margo McDermed

State	Bill Number	Last Action	Status
IL	SB 969	Senate Floor Amendment No 1 Pursuant To Senate Rule 3 9 B Referred To Assignments 2021 07 16	In Senate

Title Introduction Date: 2021-02-25
Health-Tech

Description
Amends the Health Care Workplace Violence Prevention Act. Makes a technical change in a Section concerning the short title.

Primary Sponsors
Julie Morrison, Jacqui Collins

State	Bill Number	Last Action	Status
IL	SB 2420	Rule 3 9 A Re Referred To Assignments 2021 05 21	In Senate

Title Introduction Date: 2021-02-26
Medicaid-Mco-Pharmacy Fee

Description
Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires all Medicaid managed care organizations to reimburse pharmacy provider dispensing fees and acquisition costs at no less than the amounts established under the fee-for-service program whether the Medicaid managed care organization directly reimburses pharmacy providers or contracts with a pharmacy benefit manager to reimburse pharmacy providers. Provides that the reimbursement requirement applies to all pharmacy services for persons receiving benefits under the Code including pharmacy services. Effective immediately.

Primary Sponsors
Napoleon Harris, Rachelle Crowe

State	Bill Number	Last Action	Status
IL	SB 3543	Session Sine Die 2021 01 13	Failed

Title
Medicaid-Mco-Pharmacy Fee

Description
Amends the Medical Assistance Article of the Illinois Public Aid Code. Requires all Medicaid managed care organizations to reimburse pharmacy provider dispensing fees and acquisition costs at no less than the amounts established under the fee-for-service program whether the Medicaid managed care organization directly reimburses pharmacy providers or contracts with a pharmacy benefit manager to reimburse pharmacy providers. Provides that the reimbursement requirement applies to all pharmacy services for persons receiving benefits under the Code including pharmacy services. Effective immediately.

Primary Sponsors
Andy Manar

Bill Summary: Last edited by [deactivated]Ademola Are at Feb 18, 2020, 1:21 PM

Reimbursement to pharmacy must not be less than the dispensing fees and acquisition costs under the fee-for-service program

Introduction Date: 2020-02-14

State	Bill Number	Last Action	Status
IN	HB 1141	First Reading Referred To Committee On Public Health 2021 01 07	In House

Title
Transportation for Medicaid presumptive eligible.

Description
Requires coverage for nonemergency medical transportation of individuals who have been deemed presumptively eligible for Medicaid during the time in which the individual is deemed presumptively eligible for Medicaid. Requires the office of the secretary of family and social services to apply for any Medicaid state plan amendment or waiver necessary to provide for the coverage.

Primary Sponsors
Chris Campbell

Introduction Date: 2021-01-07

Title

Pharmacy benefit managers.

Description

Allows a public employer and a self-funded health plan to use a reverse auction to procure the services of a pharmacy benefit manager. Requires an audit of prescription drug cost sharing for the state Medicaid program once every three state fiscal years. Requires a pharmacy benefit manager to: (1) perform its contractual duties in good faith and in observance of reasonable commercial standards of fair dealing; and (2) notify a health plan in writing if any activity, policy, or practice of the pharmacy benefit manager presents a conflict of interest. Adds requirements of pharmacy benefit managers when denying an appeal of the maximum allowable cost pricing of a prescription drug. Requires the department of insurance (department) to develop a process for complaints regarding pharmacy benefit managers. Requires a pharmacy benefit manager to provide the department with certain information within 20 business days after the date of a complaint. Prohibits a pharmacy benefit manager from requiring a pharmacy to obtain a signature from an individual for a prescription or immunization during a public health emergency. Requires the legislative services agency to conduct a study of market concentration in Indiana of: (1) the health insurance industry; (2) the hospital industry; (3) the professions of licensed health care practitioners; (4) the retail pharmaceutical industry; (5) the pharmacy benefit manager industry; and (6) the pharmacy services administrative organization industry, including its relationship to pharmaceutical wholesalers. Requires the legislative services agency to present the findings of the study not later than September 1, 2022.

Primary Sponsors

Andy Zay, Ron Grooms, Ed Charbonneau, Blake Doriot, Aaron Freeman, Fady Qaddoura, Matt Lehman

Bill Summary: Last edited by Matt Magner at Feb 3, 2021, 5:41 PM
Requires the auditor of state to conduct an audit of prescription drug cost sharing for the Medicaid program every three state fiscal years. Adds requirements of pharmacy benefit managers when denying an appeal of the maximum allowable cost pricing of a prescription drug. Requires the department of insurance to develop a process for complaints regarding pharmacy benefit managers, including:(1) denied appeals of maximum allowable cost pricing; and (2) unfair, unjust, or unlawful contract provisions. Allows a pharmacy or pharmacist to decline to provide pharmacist services to a covered individual if the acquisition cost to the pharmacy or pharmacist would exceed the amount received for the pharmacist services.

Introduction Date: 2021-01-04

State
KY

Bill Number
HB 48

Last Action
Signed By Governor Acts Ch 30 2021 03 18

Status
Enacted

Title

AN ACT relating to reimbursement for pharmacist services.

Description

Create a new section of Subtitle 12 of KRS Chapter 304 to establish certain insurance practices relating to the reimbursement of pharmacists; amend KRS 304.14-135 to establish a clean claim form for the reimbursement of certain pharmacist services or procedures; amend KRS 304.17A-844 and 304.17B-011 to conform; amend KRS 18A.225 to require the state employee health plan to comply with pharmacist reimbursement requirements; amend KRS 342.020 to require workers' compensation employers, insurers, and payment obligors to comply with pharmacist reimbursement requirements.

Primary Sponsors

Danny Bentley, Kim Banta, Lynn Bechler, John Blanton, Tina Bojanowski, Adam Bowling, Josh Branscum, Kevin Bratcher, Josh Bray, Randy Bridges, Josh Calloway, Ryan Dotson, Jim DuPlessis, Joe Fischer, Patrick Flannery, Ken Fleming, Deanna Frazier, Chris Freeland, Robert Goforth, Derrick Graham, David Hale, Mark Hart, Angie Hatton, Richard Heath, Samara Heavrin, Regina Huff, Thomas Huff, D.J. Johnson, Nima Kulkarni, Derek Lewis, Scott Lewis, Mary Marzian, Ed Massey, Bobby McCool, Chad McCoy, Patti Minter, Jim Nemes, David Osborne, Ruth Palumbo, Phillip Pratt, Melinda Prunty, Brandon Reed, Steve Riley, Steven Rudy, Sal Santoro, Attica Scott, Scott Sharp, Steve Sheldon, Tom Smith, Cherlynn Stevenson, Ashley Tackett Laferty, Nancy Tate, Walker Thomas, Killian Timoney, James Tipton, Russell Webber, Susan Westrom, Buddy Wheatley, Lisa Willner

Bill Summary: Last edited by Belawoe Akwakoku at Aug 5, 2021, 8:41 PM
Any insurer must reimburse a pharmacist for service or procedure at a rate not less than that provided to other nonphysician practitioners if within the scope of practice of pharmacy and would otherwise be covered under the policy, plan, or contract if the service or procedure were provided by a physician, ANP, or PA

Introduction Date: 2021-01-05

State	Bill Number	Last Action	Status
KY	HB 117	To Committee On Committees H 2021 01 05	Failed sine die

Title Introduction Date: 2021-01-05
AN ACT relating to coverage for the mailing or delivery of covered prescription drugs.

Description
Create a new section of Subtitle 17A of KRS Chapter 304 to require health benefit plans that provide benefits for prescription drugs to include coverage for the mailing or delivery of covered prescription drugs to insureds; provide that the coverage shall not be subject to higher copayments, fees, or other cost-sharing requirements; amend KRS 205.522, KRS 205.6485, and KRS 18A.225 to require Medicaid managed care organizations, the Kentucky Children's Health Insurance Program, and the state employee health plan to comply with prescription drug delivery coverage requirements; provide that Sections 1 and 4 shall take effect on January 1, 2022; provide that Sections 2 and 3 shall be implemented by the Cabinet for Health and Family Services or the Department for Medicaid Services on or before January 1, 2022, except when a federal waiver or authorization is deemed necessary.

Primary Sponsors
Patti Minter

State	Bill Number	Last Action	Status
KY	HB 177	Recommitted To Appropriations Revenue H 2021 03 30	Failed sine die

Title Introduction Date: 2021-01-06
AN ACT relating to pharmacy benefits in the Medicaid program and declaring an emergency.

Description
Amend KRS 205.5514 to require the Department for Medicaid Services to establish and implement a preferred drug list, reimbursement methodologies, and dispensing fees for Medicaid managed care organizations and the state pharmacy benefit manager within 30 days after the effective date of this Act; amend KRS 205.5518 to require Medicaid managed care organizations and pharmacy benefit managers to use reimbursement methodologies and dispensing fees established by the department for all Medicaid pharmacy benefit claims submitted on or after January 1, 2021; EMERGENCY.

Primary Sponsors
Steve Sheldon, Randy Bridges, Derek Lewis, Ed Massey, Shawn McPherson, Melinda Prunty, Scott Sharp

Title**Introduction Date:** 2021-01-07

AN ACT relating to appropriations measures providing funding and establishing conditions for the operations, maintenance, support, and functioning of the government of the Commonwealth of Kentucky and its various officers, cabinets, departments, boards, commissions, institutions, subdivisions, agencies, and other state-supported activities.

Description

The State/Executive Branch Budget: Detail Part I, Operating Budget; appropriate to General Government: 2020-2021: \$2,232,159,200, 2021-2022: \$1,799,151,900; appropriate to the Economic Development Cabinet: 2020-2021: \$30,692,000, 2021-2022: \$32,698,000; appropriate to the Department of Education: 2020-2021: \$5,087,565,600, 2021-2022: \$5,236,333,800; appropriate to the Education and Workforce Development Cabinet: 2020-2021: \$224,230,300, 2021-2022: \$226,419,100; appropriate to the Energy and Environment Cabinet: 2020-2021: \$301,178,900, 2021-2022: \$276,053,300; appropriate to the Finance and Administration Cabinet: 2020-2021: \$992,598,800, 2021-2022: \$1,025,343,600; appropriate to the Health and Family Services Cabinet: 2020-2021: \$16,559,398,900, 2021-2022: \$16,709,573,800; appropriate to the Justice and Public Safety Cabinet: 2020-2021: \$1,270,439,200, 2021-2022: \$1,293,490,400; appropriate to the Labor Cabinet: 2020-2021: \$1,642,204,900, 2021-2022: \$761,756,600; appropriate to the Personnel Cabinet: 2020-2021: \$63,150,200, 2021-2022: \$90,780,200; appropriate to Postsecondary Education: 2020-2021: \$8,533,377,500, 2021-2022: \$8,938,898,700; appropriate to the Public Protection Cabinet: 2020-2021: \$167,314,500, 2021-2022: \$125,746,600; appropriate to the Tourism, Arts and Heritage Cabinet: 2020-2021: \$269,047,600, 2021-2022: \$274,838,800; appropriate to the Budget Reserve Trust Fund: 2021-2022: \$100,000,000; not included in the appropriation amounts are capital project amounts as follows: 2020-2021: \$8,538,931,500, 2021-2022: \$807,761,600; detail Part II, Capital Projects Budget; detail Part III, General Provisions; detail Part IV, State Salary/Compensation, Benefit, and Employment Policy; detail Part V, Funds Transfer; detail Part VI, General Fund Budget Reduction Plan; detail Part VII, General Fund Surplus Expenditure Plan; detail Part VIII, Road Fund Budget Reduction Plan; detail Part IX, Road Fund Surplus Expenditure Plan; detail Part X, Phase I Tobacco Settlement; and detail Part XI, Executive Branch Budget Summary; APPROPRIATION.

Primary Sponsors

Jason Petrie, Brandon Reed, Ryan Dotson

State	Bill Number	Last Action	Status
KY	HB 222	To Health Welfare S 2021 03 01	Failed sine die

Title
AN ACT relating to pharmacy benefits in the Medicaid program and declaring an emergency.

Bill Summary: Last edited by Matt Magner at Feb 5, 2021, 6:52 PM
Requires the state to hire an entity to oversee the Medicaid PBM

Introduction Date: 2021-01-07

Description
Create a new section of KRS 205.510 to 205.560 to define terms; require the Department for Medicaid Services to contract with an independent entity to monitor all Medicaid pharmacy benefit claims; establish eligibility requirements for an entity seeking to contract with the department to monitor pharmacy benefit claims; establish requirements for analyzing and monitoring claims; EMERGENCY.

Primary Sponsors
Steve Sheldon, Danny Bentley, Kim Banta, Adam Bowling, Randy Bridges, Deanna Frazier, Norma Kirk-McCormick, Derek Lewis, Scott Lewis, Ed Massey, Bobby McCool, Brandon Reed, Nancy Tate, Walker Thomas

State	Bill Number	Last Action	Status
KY	SB 162	Signed By Governor Acts Ch 185 2021 04 05	Enacted

Title
AN ACT relating to state government.

Introduction Date: 2021-02-03

Description
Amend KRS 14.025 to abolish the Division of Administration and the Division of Business Filings in the Office of the Secretary of State; create the Office of Administration, Office of Business Services, and Office of Elections, and describe the duties of the offices; amend KRS 355.9-513A to conform; confirm Secretary of State Executive Order 2020-02.

Primary Sponsors
Jason Howell, Paul Hornback, Brandon Storm

State	Bill Number	Last Action	Status
LA	HB 1	Veto Message From The Governor Received And Read 2021 06 10	Enacted

Title
APPROPRIATIONS: Provides for the ordinary operating expenses of state government for Fiscal Year 2021-2022

Introduction Date: 2021-03-31

Primary Sponsors
Zee Zeringue

State	Bill Number	Last Action	Status
LA	HB 485	Read By Title Under The Rules Referred To The Committee On Health And Welfare 2021 04 12	Failed sine die

Title Introduction Date: 2021-04-02
MEDICAID MANAGED CARE: Establishes the Medicaid Managed Care Authority as a policymaking and oversight body for the Medicaid managed care program (OR INCREASE GF EX See Note)

Primary Sponsors
Zee Zeringue

State	Bill Number	Last Action	Status
LA	SB 180	Effective Date 8 1 2021 2021 06 04	Enacted

Title Introduction Date: 2021-04-01
PROCUREMENT CODE: Provides relative to state procurement of certain services by use of reverse auction technology. (8/1/21) (EN SEE FISC NOTE GF EX See Note)

Primary Sponsors
T-Fred Mills

State	Bill Number	Last Action	Status
MA	H 1	Reported In Part By H 4000 2021 04 15	In House

Title Introduction Date: 2021-02-25
An Act making appropriations for the Fiscal Year 2022 for the maintenance of the departments, boards, commissions, institutions, and certain activities of the Commonwealth, for interest, sinking fund, and serial bond requirements, and for certain permanent improvements

Primary Sponsors
Charles D. Baker

State	Bill Number	Last Action	Status
MA	H 1097	Hearing Scheduled For 09 21 2021 From 10 00 Am 03 00 Pm In Virtual Hearing 2021 09 14	In House

Title Introduction Date: 2021-03-29
An Act ensuring pharmacy access

Description
By Miss Garry of Dracut, a petition (accompanied by bill, House, No. 1097) of Colleen M. Garry relative to the rights of pharmacists to participate as preferred health care providers. Financial Services.

Primary Sponsors
Colleen Garry

State	Bill Number	Last Action	Status
MA	H 4000	Published As Amended See H 4001 2021 05 03	In Senate

Title **Introduction Date:** 2021-04-15

An Act making appropriations for the fiscal year 2022 for the maintenance of the departments, boards, commissions, institutions and certain activities of the Commonwealth, for interest, sinking fund and serial bond requirements and for certain permanent improvements

Primary Sponsors

House Committee on Ways and Means

State	Bill Number	Last Action	Status
MA	S 2465	See H 4001 2021 05 27	In Senate

Title **Introduction Date:** 2021-05-27

An Act making appropriations for the fiscal year 2022 for the maintenance of the departments, boards, commissions, institutions and certain activitie...

Description

Senate, May 25, 2021 – Text of the Senate amendment to the House Bill making appropriations for the fiscal year 2021 for the maintenance of the departments, boards, commissions, institutions and certain activities of the commonwealth, for interest, sinking fund and serial bond requirements and for certain permanent improvements (House, No. 4001) (being the text of Senate, No. 3, printed as amended).

State	Bill Number	Last Action	Status
MD	HB 602	Withdrawn By Sponsor 2021 03 24	Failed sine die

Title **Bill Summary:** Last edited by Matt Magner at Feb 5, 2021, 7:00 PM
Maryland Medical Assistance Program and Managed Care Organizations That Use Pharmacy Benefits Managers - Reimbursement Requirements
Requiring FFS reimbursement rates in MMC

Introduction Date: 2021-01-20

Description

Requiring the Maryland Medical Assistance Program to establish reimbursement levels, rather than maximum reimbursement levels, for drug products for which there is a certain generic equivalent; requiring that certain minimum reimbursement levels be at least equal to the National Average Drug Acquisition Cost of the generic product plus the fee-for-service professional dispensing fee determined by the Maryland Department of Health in accordance with the most recent in-State cost-of-dispensing survey; etc.

Primary Sponsors

Nic Kipke

State	Bill Number	Last Action	Status
MD	HB 607	Enacted Under Article Ii Section 17 C Of The Maryland Constitution Chapter 721 2021 05 30	Enacted

Title
Judges' Retirement System - Retiree Health Benefits - Mandatory Retirement

Bill Summary: Last edited by Matt Magner at Feb 5, 2021, 7:01 PM
Requiring FFS reimbursement rates in MMC

Introduction Date: 2021-01-20

Description
Establishing the eligibility for State retiree health benefits for a retiree of the Judges' Retirement System and the retiree's spouse and dependent children when a retiree of the Judges' Retirement System retired at a mandatory retirement age with less than 5 years of creditable service; and providing for the calculation of a certain State subsidy.

Primary Sponsors
Anne Healey, House Committee on Health and Government Operations

State	Bill Number	Last Action	Status
ME	LD 1701 (HP 1264)	Carried Over In The Same Posture To Any Special Or Regular Session Of The 130th Legislature Pursuant To Joint Order Hp 1302 2021 07 19	In House

Title
An Act To Establish a Managed Care Program for MaineCare Services

Introduction Date: 2021-05-11

Primary Sponsors
Sawin Millett

State	Bill Number	Last Action	Status
MI	HB 4373	Bill Electronically Reproduced 02 25 2021 2021 03 02	In House

Title
Appropriations: other; executive recommendation; provide for omnibus bill. Creates appropriation act.

Introduction Date: 2021-02-25

Primary Sponsors
Joe Tate

State	Bill Number	Last Action	Status
MI	HB 5006	Bill Electronically Reproduced 06 15 2021 2021 06 16	In House

Title Introduction Date: 2021-06-15

Human services: medical services; Medicaid contract with pharmacy benefit management; prohibit under certain circumstances. Amends 1939 PA 280 (MCL 400.1 - 400.119b) by adding secs. 105i & 105j.

Primary Sponsors
Abdullah Hammoud

State	Bill Number	Last Action	Status
MI	SB 187	Referred To Committee On Appropriations 2021 02 25	In Senate

Title Introduction Date: 2021-02-25

Appropriations: other; executive recommendation; provide for omnibus bill. Creates appropriation act.

Primary Sponsors
Curtis Hertel

State	Bill Number	Last Action	Status
MN	HF 8	Author Added Carlson 2021 03 01	In House

Title **Bill Summary:** Last edited by Matt Magner at Feb 5, 2021, 6:45 PM
Establishes a state prescription drug purchasing program.
Introduction Date: 2021-01-07

Commissioner of human services directed to establish prescription drug purchasing program, and program authority and eligibility requirements specified.

Primary Sponsors
Tina Liebling, Cedrick Frazier, Liz Reyer, Kristin Bahner, Hodan Hassan, Connie Bernardy, Mike Freiberg, Robert Bierman, Jessica Hanson, Andrew Carlson

State	Bill Number	Last Action	Status
MN	HF 19	Author Added Bierman 2021 04 06	In House

Title Introduction Date: 2021-01-07

Direct injectable drugs reimbursement provisions under medical assistance modified.

Primary Sponsors
Kelly Morrison, Erin Koegel, Keith Franke, Kristin Bahner, Dave Baker, Kelly Moller, Deb Kiel, Jeremy Munson, Robert Bierman

State	Bill Number	Last Action	Status
MN	HF 1040	Introduction And First Reading Referred To Human Services Finance And Policy 2021 02 11	In House

Title

Children and family services, community supports, direct care and treatment, health care, human services licensing and background studies, and chemical and mental health service provisions modified; forecast adjustments made; reports required; money transferred; technical and conforming changes made; and money appropriated.

Primary Sponsors

Jennifer Schultz, Tina Liebling

Bill Summary: Last edited by Matt Magner at Feb 12, 2021, 3:05 PM
Lowers Medicaid PDF from \$10.48 to \$9.91

Introduction Date: 2021-02-11

State	Bill Number	Last Action	Status
MN	HF 1483	Introduction And First Reading Referred To Health Finance And Policy 2021 02 22	In House

Title

Restricted medical assistance pharmacy providers restricted to in-state pharmacies.

Primary Sponsors

Deb Kiel

Bill Summary: Last edited by Matt Magner at Feb 24, 2021, 8:10 PM
Requires pharmacy providers in Medicaid program to be in-state.

Introduction Date: 2021-02-22

State	Bill Number	Last Action	Status
MN	HF 2128	Governors Action Approval 2021 05 25	Enacted

Title

Omnibus health and human services policy and finance bill.

Primary Sponsors

Tina Liebling, Jennifer Schultz, Connie Bernardy

Introduction Date: 2021-03-11

State	Bill Number	Last Action	Status
MN	HF 2327	Author Added Bahner 2021 04 17	In House

Title

Commissioner of management and budget required to use reverse auction for pharmacy benefit manager procurement to manage and administer the State Employees Group Insurance Program prescription drug benefit.

Primary Sponsors

Mike Howard, Steve Elkins, Mike Sundin, Kristin Bahner

Introduction Date: 2021-03-22

State	Bill Number	Last Action	Status
MN	HF 2644	Introduction And First Reading Referred To Health Finance And Policy 2021 05 15	In House

Title Introduction Date: 2021-05-15

Dispensing fee increased for prescription drugs in the medical assistance program.

Primary Sponsors

Joe Schomacker

State	Bill Number	Last Action	Status
MN	SF 982	Withdrawn And Re Referred To Health And Human Services Finance And Policy 2021 03 15	In Senate

Title Bill Summary: Last edited by Matt Magner at Feb 16, 2021, 8:09 PM
Lowers the professional dispensing fee in the fee-for-service program.

Human services miscellaneous provisions governing children and family services, community supports, direct care and treatment, health care, human services licensing, background studies, and chemical and mental health services modifications; budget forecast adjustments; funds transfers

Introduction Date: 2021-02-15

Primary Sponsors

Melissa Wiklund, Ann Johnson Stewart

State	Bill Number	Last Action	Status
MN	SF 999	Referred To Health And Human Services Finance And Policy 2021 02 15	In Senate

Title Bill Summary: Last edited by Matt Magner at Feb 16, 2021, 8:10 PM
Limiting use of out-of-state pharmacies for Medicaid program.

Medical assistance pharmacy providers restriction to in-state pharmacies use

Introduction Date: 2021-02-15

Primary Sponsors

Michelle Benson, Mark Koran, Rich Draheim, Carla Nelson

State	Bill Number	Last Action	Status
MN	SF 2360	Rule 45 Amend Subst General Orders Hf 2128 2021 04 28	In Senate

Title Introduction Date: 2021-04-06

Omnibus health and human services policy and finance bill

Primary Sponsors

Michelle Benson, Jim Abeler, Rich Draheim

State	Bill Number	Last Action	Status
MN	SF 2372	Author Added Nelson 2021 04 08	In Senate

Title Introduction Date: 2021-04-07
Medical assistance program prescription drug dispensing fee increase

Primary Sponsors
Michelle Benson, Carla Nelson

State	Bill Number	Last Action	Status
MO	HB 11	Reported To The Senate S 2021 09 15	Passed Senate

Title Introduction Date: 2021-02-24
NO TITLE

Primary Sponsors
Cody Smith

State	Bill Number	Last Action	Status
MO	HB 14	None	

Title
No Title

Primary Sponsors
Cody Smith

State	Bill Number	Last Action	Status
MO	HB 1146	Referred Health And Mental Health Policy H 2021 03 01	Failed sine die

Title Bill Summary: Last edited by Matt Magner at Feb 18, 2021, 8:33 PM
Creates provisions relating to payments for prescription drugs Regarding PBM drug pricing disclosures and affiliate reimbursements

Primary Sponsors Introduction Date: 2021-02-17
Ann Kelley

State	Bill Number	Last Action	Status
MO	SB 212	H Informal Calendar Senate Bills For Third Reading W Hcs 2021 05 14	Failed sine die

Title Introduction Date: 2021-01-06
Modifies provisions relating to the Department of Corrections, the Division of Probation and Parole, and the Parole Board

Primary Sponsors
Bill White

State	Bill Number	Last Action	Status
NC	SB 594	Ch SI 2021 62 2021 06 29	Enacted

Title Introduction Date: 2021-04-06
Medicaid Admin. Changes & Tech. Corrections.

Primary Sponsors
Joyce Krawiec, Jim Burgin, Jim Perry

State	Bill Number	Last Action	Status
ND	HB 1233	Motion To Reconsider Failed 2021 04 12	Failed sine die

Title
Relating To Public Employees Retirement System Prescription Drug Coverage Performance Audits.

Description
A BILL for an Act to amend and reenact section 54-52.1-04.16 of the North Dakota Century Code, relating to public employees retirement system prescription drug coverage performance audits.

Primary Sponsors
Jim Kasper, Terry Jones, George Keiser, Mike Lefor, Scott Louser, Lisa Meier, Karen Rohr, Austen Schauer, Vicky Steiner

Bill Summary: Last edited by Matt Magner at Feb 2, 2021, 3:28 PM
Provides for the public employees retirement system to contract for an audit of pharmacy benefit managers providing contract services for the state uniform group health insurance program

Introduction Date: 2021-01-11

State	Bill Number	Last Action	Status
NE	LB 270	Notice Of Hearing For March 02 2021 2021 02 10	In Legislature

Title Introduction Date: 2021-01-12
Adopt the Pharmacy Benefit Manager Regulation Act and require an audit under the Medical Assistance Act

Primary Sponsors
Adam Morfeld

State	Bill Number	Last Action	Status
NE	LB 413	Notice Of Hearing For February 05 2021 2021 01 28	In Legislature

Title Introduction Date: 2021-01-14
Require coverage of medications for substance use disorder treatment and addiction medicine services under the Medical Assistance Act

Primary Sponsors
Anna Wishart

State	Bill Number	Last Action	Status
NJ	A 994	Introduced Referred To Assembly Financial Institutions And Insurance Committee 2020 01 14	In Assembly

Title Introduction Date: 2020-01-14

Prohibits SHBP, SEHBP, and Medicaid from denying coverage for maintenance medications for chronic conditions for covered persons solely because of change in health benefits plan or pharmacy benefits manager.

Primary Sponsors

Herb Conaway, Ralph Caputo, Ron Dancer

State	Bill Number	Last Action	Status
NJ	A 1028	Introduced Referred To Assembly Human Services Committee 2020 01 14	In Assembly

Title **Bill Summary:** Last edited by [deactivated]Ademola Are at Jan 15, 2020, 2:27 PM
Requires prescription drug services covered under Medicaid program to be provided via fee-for-service delivery system.

Primary Sponsors

Joann Downey, Eric Houghtaling, Raj Mukherji

Carves out prescription drug services to be administered by the Division of Medical Assistance and Health service in the Department of Human service under a fee-for-service delivery system using NADAC or wholesale acquisition cost in absence of the latter

Introduction Date: 2020-01-14

State	Bill Number	Last Action	Status
NJ	A 1258	Introduced Referred To Assembly State And Local Government Committee 2020 01 14	In Assembly

Title Introduction Date: 2020-01-14

Requires pharmacy benefits manager under contract with SHBP and SEHBP to report price paid to pharmacy and amount charged to SHBP and SEHBP.

Primary Sponsors

Gary Schaer, Raj Mukherji, Dan Benson

State	Bill Number	Last Action	Status
NJ	A 1259	Substituted By S 249 1 R 2021 06 21	In Assembly

Title Introduction Date: 2020-01-14

Requires pharmacy benefits manager providing services within Medicaid program to disclose certain information to DHS.

Primary Sponsors

Gary Schaer, BettyLou DeCroce, Valerie Vainieri Huttle

State	Bill Number	Last Action	Status
NJ	A 2181	Introduced Referred To Assembly Health Committee 2020 01 14	In Assembly

Title Introduction Date: 2020-01-14

Requires all Medicaid managed care organization to permit all pharmacies in State to dispense prescriptions for all covered medications.

Primary Sponsors

Raj Mukherji

State	Bill Number	Last Action	Status
NJ	A 2330	Introduced Referred To Assembly Health Committee 2020 02 03	In Assembly

Title Introduction Date: 2020-02-03

Requires Medicaid preferred drug lists to provide for coverage of buprenorphine for treatment of chronic pain.

Primary Sponsors

Carol Murphy, Valerie Vainieri Huttle

State	Bill Number	Last Action	Status
NJ	A 2655	Introduced Referred To Assembly Health Committee 2020 02 13	In Assembly

Title Introduction Date: 2020-02-13

Provides Medicaid and certain insurers access to Prescription Monitoring Program.

Primary Sponsors

Valerie Vainieri Huttle, Shanique Speight

State	Bill Number	Last Action	Status
NJ	A 4528	Approved P L 2021 C 4 2021 01 29	Enacted

Title **Bill Summary:** Last edited by Matt Magner at Feb 5, 2021, 6:54 PM
Revises certain aspects of the State procurement process and permits auction or reverse auction procedures.
Regarding reverse auctions

Introduction Date: 2020-08-10

Primary Sponsors

Wayne DeAngelo, Eric Houghtaling, Troy Singleton, Vin Gopal

State	Bill Number	Last Action	Status
NJ	A 4720	Substituted By S 2021 2020 09 24	In Assembly

Title Introduction Date: 2020-09-21
Appropriates \$32,711,205,000 in State funds and \$13,856,161,239 in federal funds for the State budget for fiscal year 2020-2021.

Primary Sponsors
Eliana Pintor Marin, John Burzichelli

State	Bill Number	Last Action	Status
NJ	A 5029	Introduced Referred To Assembly Financial Institutions And Insurance Committee 2020 11 19	In Assembly

Title Introduction Date: 2020-11-19
New Jersey Public Option Health Care Act.

Primary Sponsors
Shavonda Sumter

State	Bill Number	Last Action	Status
NJ	S 235	Introduced In The Senate Referred To Senate Health Human Services And Senior Citizens Committee 2020 01 14	In Senate

Title Introduction Date: 2020-01-14
Permits certain managed care organizations to consider cost-effectiveness when placing prescription drug on formulary.

Primary Sponsors
Troy Singleton

State	Bill Number	Last Action	Status
NJ	S 249	Passed Assembly Passed Both Houses 72 0 0 2021 06 21	Passed Assembly

Title Introduction Date: 2020-01-14
Requires pharmacy benefits manager providing services within Medicaid program to disclose certain information to DHS.

Primary Sponsors
Troy Singleton, Shirley Turner, Gary Schaer, BettyLou DeCroce, Valerie Vainieri Huttle

State	Bill Number	Last Action	Status
NJ	S 887	Approved P L 2021 C 151 2021 07 02	Enacted

Title Introduction Date: 2020-01-27
Requires DHS to contract with third party entity to apply risk reduction model to Medicaid prescription drug services.

Primary Sponsors
Steve Sweeney, Linda Greenstein, Joann Downey, Dan Benson, Valerie Vainieri Huttle

State	Bill Number	Last Action	Status
NJ	S 1089	Introduced In The Senate Referred To Senate Health Human Services And Senior Citizens Committee 2020 01 30	In Senate

Title Introduction Date: 2020-01-30
Requires all Medicaid managed care organization to permit all pharmacies in State to dispense prescriptions for all covered medications.

Primary Sponsors
Joe Vitale, Vin Gopal

State	Bill Number	Last Action	Status
NJ	S 1210	Introduced In The Senate Referred To Senate State Government Wagering Tourism Historic Preservation Committee 2020 02 03	In Senate

Title Introduction Date: 2020-02-03
Requires pharmacy benefits manager under contract with SHBP and SEHBP to report price paid to pharmacy and amount charged to SHBP and SEHBP.

Primary Sponsors
Joe Cryan, Troy Singleton

State	Bill Number	Last Action	Status
NJ	S 1253	Introduced In The Senate Referred To Senate Health Human Services And Senior Citizens Committee 2020 02 03	In Senate

Title Introduction Date: 2020-02-03
Requires prescription drug services covered under Medicaid program to be provided via fee-for-service delivery system.

Primary Sponsors
Vin Gopal

State	Bill Number	Last Action	Status
NJ	S 1765	Introduced In The Senate Referred To Senate Health Human Services And Senior Citizens Committee 2020 02 13	In Senate

Title Introduction Date: 2020-02-13

Requires pharmacy benefits manager providing services within Medicaid program to implement pass-through pricing model and to disclose certain information to DHS and managed care organizations.

Primary Sponsors

Vin Gopal

State	Bill Number	Last Action	Status
NJ	S 1775	Introduced In The Senate Referred To Senate Health Human Services And Senior Citizens Committee 2020 02 13	In Senate

Title Introduction Date: 2020-02-13

Requires Medicaid preferred drug lists to provide for coverage of buprenorphine for treatment of chronic pain.

Primary Sponsors

Fred Madden

State	Bill Number	Last Action	Status
NJ	S 1876	Introduced In The Senate Referred To Senate Health Human Services And Senior Citizens Committee 2020 02 24	In Senate

Title Introduction Date: 2020-02-24

Prohibits SHBP, SEHBP, and Medicaid from denying coverage for maintenance medications for chronic conditions for covered persons solely because of change in health benefits plan or pharmacy benefits manager.

Primary Sponsors

Joe Lagana

State	Bill Number	Last Action	Status
NJ	S 2021	Approved P L 2020 C 97 2020 09 29	Enacted

Title Introduction Date: 2020-09-21

Appropriates \$32,711,205,000 in State funds and \$13,856,161,239 in federal funds for the State budget for fiscal year 2020-2021.

Primary Sponsors

Paul Sarlo, Sandra Cunningham, Eliana Pintor Marin, John Burzichelli

State	Bill Number	Last Action	Status
NJ	S 2838	Substituted By A 4528 1 R 2020 10 29	In Senate

Title Introduction Date: 2020-08-17
Revises certain aspects of the State procurement process and permits auction or reverse auction procedures.

Primary Sponsors
Troy Singleton, Vin Gopal

State	Bill Number	Last Action	Status
NV	AB 494	Approved By The Governor Chapter 310 2021 06 03	Enacted

Title Introduction Date: 2021-05-26
Makes various changes regarding state financial administration and makes appropriations for the support of the civil government of the State. (BDR S-1170)

Description
AN ACT relating to state financial administration; making appropriations from the State General Fund and the State Highway Fund for the support of the civil government of the State of Nevada for the 2021-2023 biennium; providing for the use of the money so appropriated; making various other changes relating to the financial administration of the State; and providing other matters properly relating thereto.

Primary Sponsors
Assembly Committee on Ways and Means

State	Bill Number	Last Action	Status
NV	SB 420	Chapter 537 2021 06 11	Enacted

Title Introduction Date: 2021-04-28
Revises provisions relating to health insurance. (BDR 57-251)

Description

AN ACT relating to insurance; providing for the establishment of a public health benefit plan; prescribing certain goals and requirements relating to the plan; requiring certain health carriers to participate in a competitive bidding process to administer the plan; requiring certain providers of health care to participate in the plan; exempting rules and policies governing the plan from certain requirements; requiring the Executive Director of the Silver State Health Insurance Exchange to apply for a federal waiver to allow certain policies to be offered on the Exchange; requiring certain persons to report the abuse and neglect of older persons, vulnerable persons and children; requiring the State Plan for Medicaid to include coverage for the services of a community health worker and doula services; revising provisions relating to coverage of services for pregnant women under Medicaid; requiring the establishment of a statewide Medicaid managed care program if money is available; revising requirements relating to health insurance coverage of enteral formulas; making appropriations; and providing other matters properly relating thereto.

Primary Sponsors

Nicole Cannizzaro, Fabian Donate, Roberta Lange, Pat Spearman, Teresa Benitez-Thompson, Jason Frierson

State	Bill Number	Last Action	Status
NY	A 187	Reported Referred To Ways And Means 2021 01 20	In Assembly

Title Introduction Date: 2021-01-06
Provides for the synchronization of multiple prescriptions for recipients of medical assistance

Description

Provides for the synchronization of multiple prescriptions for recipients of medical assistance.

Primary Sponsors

Dick Gottfried

State	Bill Number	Last Action	Status
NY	A 1671	Print Number 1671 A 2021 02 03	In Assembly

Title
Relates to temporarily exempting covered entities under the federal 340B program and comprehensive HIV special needs plans

Bill Summary: Last edited by Matt Magner at Feb 5, 2021, 6:46 PM
Keeps 340B and certain HIV treatment providers in FFS.

Introduction Date: 2021-01-11

Description
Relates to temporarily exempting covered entities under the federal 340B program and comprehensive HIV special needs plans.

Primary Sponsors
Dick Gottfried

State	Bill Number	Last Action	Status
NY	A 6605	Reported Referred To Ways And Means 2021 05 20	In Assembly

Title
Relates to the pricing of single source brand-name maintenance medication for which there is no National Average Drug Acquisition Cost pricing

Introduction Date: 2021-03-19

Description
Provides that the price of single source brand-name maintenance medication for which there is no National Average Drug Acquisition Cost pricing shall be the wholesale acquisition cost.

Primary Sponsors
Tom Abinanti

State	Bill Number	Last Action	Status
NY	A 7200	Reported Referred To Ways And Means 2021 05 25	In Assembly

Title
Relates to coverage for prescription drugs under Medicaid; repealer

Introduction Date: 2021-04-29

Description
Provides that prescription drugs eligible for reimbursement shall be provided and paid for under the preferred drug program and the clinical drug review program; restores pharmacy benefits under Medicaid managed care.

Primary Sponsors
Dick Gottfried

State	Bill Number	Last Action	Status
NY	A 7598	Substitute S 6603 Action Returned To Senate 2021 06 10	In Assembly

Title Introduction Date: 2021-05-18
Protects access to pharmacy services

Description
Requires Medicaid managed care plans to reimburse retail pharmacies in an amount equal to the fee-for-service rate; allows retail pharmacies the opportunity to participate in another provider's network under the medical assistance program; prohibits pharmacy benefit managers from limiting an individual's option to receive medications from non-mail order pharmacies.

Primary Sponsors
Dick Gottfried

State	Bill Number	Last Action	Status
NY	S 431	Referred To Health 2021 01 06	In Senate

Title Introduction Date: 2021-01-06
Provides for the synchronization of multiple prescriptions for recipients of medical assistance

Description
Provides for the synchronization of multiple prescriptions for recipients of medical assistance.

Primary Sponsors
Brad Hoylman

State	Bill Number	Last Action	Status
NY	S 1026	Referred To Labor 2021 05 03	In Assembly

Title
Relates to contracted network pharmacy use

Description
Relates to contracted network pharmacy use.

Primary Sponsors
Jessica Ramos

Bill Summary: Last edited by Belawoe Akwakoku at Jun 23, 2021, 3:18 PM
Companion to AB 1013) pertains to an employer or carrier contract for network pharmacy use for workers' compensation; addresses compounded medications. Section 1(5) states that the proposed change "will not apply to any non-resident, out-of-state pharmacies nor shall it apply to any compound medications that the claimant is prescribed. The employer or carrier will have the right to deny any charges that originate from non-resident, out-of-state pharmacies and deny any charges for non-FDA approved extemporaneous compound medications."
<https://s3.amazonaws.com/fn-document-service/file-by-sha384/715443685aba19f29df2338a2b514609c0edc1e23990a21903db75>

Introduction Date: 2021-01-06

State	Bill Number	Last Action	Status
NY	S 2520	Amend By Restoring To Original Print 2520 2021 01 27	In Senate

Title Introduction Date: 2021-01-21

Temporarily exempts covered entities under the federal 340B program and comprehensive HIV special needs plans

Description

Relates to temporarily exempting covered entities under the federal 340B program and comprehensive HIV special needs plans.

Primary Sponsors

Gustavo Rivera

State	Bill Number	Last Action	Status
NY	S 3566	Returned To Senate 2021 06 08	Passed Assembly

Title Bill Summary: Last edited by Matt Magner at Feb 2, 2021, 4:51 PM
Relates to the purchase of prescription drugs
Modifies existing mandatory mail-order provisions.

Description

Relates to the purchase of prescription drugs by pharmacies; establishes the same reimbursement amount shall be provided to all pharmacies.

Introduction Date: 2021-01-30

Primary Sponsors

Neil Breslin

State	Bill Number	Last Action	Status
NY	S 5401	Committee Discharged And Committed To Health 2021 03 05	In Senate

Title Introduction Date: 2021-03-04

Relates to the pricing of single source brand-name maintenance medication for which there is no National Average Drug Acquisition Cost pricing

Description

Provides that the price of single source brand-name maintenance medication for which there is no National Average Drug Acquisition Cost pricing shall be the wholesale acquisition cost.

Primary Sponsors

Elijah Reichlin-Melnick

State	Bill Number	Last Action	Status
NY	S 6081	Signed Chap 101 2021 04 06	Enacted

Title Introduction Date: 2021-04-06
Provides for emergency appropriation for the period April 1, 2021 through April 8, 2021

Description
Provides for emergency appropriation for the period April 1, 2021 through April 8, 2021.

Primary Sponsors
Senate Committee on Rules

State	Bill Number	Last Action	Status
NY	S 6603	Returned To Senate 2021 06 10	Passed Assembly

Title Introduction Date: 2021-05-10
Protects access to pharmacy services

Description
Requires Medicaid managed care plans to reimburse retail pharmacies in an amount equal to the fee-for-service rate; allows retail pharmacies the opportunity to participate in another provider's network under the medical assistance program; prohibits pharmacy benefit managers from limiting an individual's option to receive medications from non-mail order pharmacies.

Primary Sponsors
James Skoufis

State	Bill Number	Last Action	Status
NY	S 6763	Referred To Health 2021 05 14	In Senate

Title Introduction Date: 2021-05-14
Determines the amount paid to a pharmacy for certain high cost drugs

Description
Requires the amount paid to a pharmacy for certain high cost drugs be no more than 2.5% of the total cost of such drug plus any dispensing fees.

Primary Sponsors
Diane Savino

State	Bill Number	Last Action	Status
OH	HB 336	Refer To Committee Insurance 2021 06 10	In House

Title Introduction Date: 2021-06-07
Regards health plan issuers, Medicaid, pharmacies, cancer drugs

Description

To amend sections 3901.81, 3901.811, 3902.50, 3902.60, and 3902.70 and to enact sections 3902.72, 3902.73, 3902.74, 3902.75, 3902.76, 3902.77, 4729.66, 5167.124, 5167.125, 5167.126, 5167.127, and 5167.128 of the Revised Code to impose requirements relating to health plan issuers, Medicaid, pharmacies, and cancer drugs.

Primary Sponsors

Scott Lipps, Thomas West

State	Bill Number	Last Action	Status
OR	HB 2080	In Committee Upon Adjournment 2021 06 26	Failed

Title Introduction Date: 2021-01-11
Relating to pharmaceuticals.

Description

Establishes Office of Pharmaceutical Purchasing in Oregon Health Authority and specifies duties. Requires office to administer multistate prescription drug purchasing consortium. Authorizes Oregon Health Authority to require prior authorization for drugs under specified conditions.

State	Bill Number	Last Action	Status
OR	SB 457	In Committee Upon Adjournment 2021 06 26	Failed

Title Introduction Date: 2021-01-11
Relating to the scope of services paid for by medical assistance.

Description

Modifies required coverage of prescription drugs in medical assistance program. Modifies membership requirements and duties of Pharmacy and Therapeutics Committee and Health Evidence Review Commission and advisory committees appointed for committee and commission. Reduces term of committee members from four years to two years. Modifies timelines for Pharmacy and Therapeutics Committee to make recommendation and for Oregon Health Authority to act on recommendation. Requires decision approving, disapproving or modifying recommendation of committee to be adopted by rule.

Primary Sponsors

Tim Knopp

State	Bill Number	Last Action	Status
PA	HB 1630	Referred To Health 2021 06 15	In House

Title Introduction Date: 2021-06-15
An Act amending the act of June 13, 1967 (P.L.31, No.21), known as the Human Services Code, in public assistance, providing for pharmacy benefits manager audit and obligations.

Primary Sponsors
Jonathan Fritz

State	Bill Number	Last Action	Status
PA	SB 668	Referred To Aging And Older Adult Services 2021 06 23	In House

Title Introduction Date: 2021-06-08
An Act amending the act of August 26, 1971 (P.L.351, No.91), known as the State Lottery Law, in pharmaceutical assistance for the elderly, further providing for the Pharmaceutical Assistance Contract for the Elderly Needs Enhancement Tier, for powers of the department and for coordination of benefits.

Primary Sponsors
Judy Ward

State	Bill Number	Last Action	Status
RI	HB 5081	Committee Recommended Measure Be Held For Further Study 2021 02 23	Failed sine die

Title **Bill Summary:** Last edited by Matt Magner at Feb 3, 2021, 5:35 PM Establishes a rare disease medication accessibility commission.
Introduction Date: 2021-01-22
An Act Relating To Health And Safety -- Establishing The Rhode Island Rare Disease Medication Accessibility, Affordability, And Reinsurance Act (Provides For Establishment Of The Rare Disease Medication Reinsurance Program To Be Funded By Insurer Contributions That Would Be Administered By The Secretary Of Health And Human Services Based On Recommendations From A 15 Member Advisory Council.)

Primary Sponsors
Joseph McNamara

State	Bill Number	Last Action	Status
TX	HB 1	Referred To Appropriations 2021 03 01	Failed sine die

Title Introduction Date: 2021-02-26
General Appropriations Bill.

Primary Sponsors
Greg Bonnen

State	Bill Number	Last Action	Status
TX	HB 18	Effective On 9 1 21 2021 06 15	Enacted

Title **Introduction Date:** 2021-03-11
Relating to establishment of the prescription drug savings program for certain uninsured individuals.

Primary Sponsors
Tom Oliverson, Greg Bonnen, Nicole Collier, Terry Canales, Dustin Burrows, Lois Kolkhorst

State	Bill Number	Last Action	Status
TX	HB 939	Referred To Human Services 2021 03 01	Failed sine die

Title **Introduction Date:** 2021-01-04
Relating to required access to care and provider network provisions in a contract between the Health and Human Services Commission and a Medicaid managed care organization.

Primary Sponsors
Richard Raymond

State	Bill Number	Last Action	Status
TX	HB 2658	Effective On 9 1 21 2021 06 16	Enacted

Title **Introduction Date:** 2021-03-02
Relating to the Medicaid program, including the administration and operation of the Medicaid managed care program.

Primary Sponsors
James Frank, Lois Kolkhorst

State	Bill Number	Last Action	Status
TX	HB 2981	Referred To Insurance 2021 03 18	Failed sine die

Title **Introduction Date:** 2021-03-05
Relating to establishment of the prescription drug savings program for certain uninsured individuals.

Primary Sponsors
Tom Oliverson

State	Bill Number	Last Action	Status
TX	HB 3441	Referred To Human Services 2021 03 22	Failed sine die

Title **Introduction Date:** 2021-03-10
Relating to timely claims payments in the Medicaid managed care program.

Primary Sponsors
Gina Hinojosa

State	Bill Number	Last Action	Status
VA	HB 30	Governor Acts Of Assembly Chapter Text Chap 1289 2020 05 21	Enacted

Title Introduction Date: 2019-12-17
Budget Bill.

Description
Budget Bill. Provides for all appropriations of the Budget submitted by the Governor of Virginia in accordance with the provisions of § 2.2-1509, Code of Virginia, and provides a portion of revenues for the two years ending respectively on the thirtieth day of June 2021, and the thirtieth day of June 2022.

Primary Sponsors
Luke Torian

State	Bill Number	Last Action	Status
VA	HB 526	House Left In Health Welfare And Institutions 2020 12 04	Failed

Title Introduction Date: 2020-01-05
Reproductive health services; health benefit plans to cover the costs of specified services, etc.

Description
Coverage for reproductive health services. Requires health benefit plans to cover the costs of specified health care services, drugs, devices, products, and procedures related to reproductive health, including (i) well-woman preventive visits; (ii) counseling for sexually transmitted infections; (iii) screening for certain conditions; (iv) folic acid supplements; (v) breastfeeding support, counseling, and supplies; (vi) breast cancer chemoprevention counseling; (vii) contraceptive drugs, devices, or products; (viii) voluntary sterilization; and (ix) any additional preventive services for women that must be covered without cost sharing under federal law as of January 1, 2019. The mandated coverage does not include abortion services other than when performed when the life of the mother is endangered by a physical disorder, physical illness, or physical injury, including a life-endangering physical condition caused by or arising from the pregnancy itself, or when the pregnancy is the result of an alleged act of rape or incest. The measure provides an exemption for plans sold to religious employers. Carriers are prohibited from excluding a covered person from participating in, being denied the benefits of, or otherwise being subjected to discrimination in the coverage of or payment for reproductive health services, and a violation constitutes an unfair trade practice. The health benefit plan requirements become effective when a plan is delivered, issued for delivery, reissued, or extended in the Commonwealth on and after January 1, 2021, or at any time thereafter when any term of the health benefit plan is changed or any premium adjustment is made.

Primary Sponsors
Kaye Kory

State	Bill Number	Last Action	Status
VA	HB 1291	Governor Acts Of Assembly Chapter Text Chap 1082 2020 04 10	Enacted

Title Introduction Date: 2020-01-08

Medical assistance services; managed care organization contracts with pharmacy benefits managers.

Description

Medical assistance services; managed care organization contracts with pharmacy benefits managers; spread pricing. Requires the Department of Medical Assistance Services to require a managed care organization with which the Department enters into an agreement for the delivery of medical assistance services to include in any agreement between the managed care organization and a pharmacy benefits manager provisions prohibiting the pharmacy benefits manager or a representative of the pharmacy benefits manager from conducting spread pricing with regard to the managed care organization's managed care plans. The bill defines "spread pricing" as the model of prescription drug pricing in which the pharmacy benefits manager charges a managed care plan a contracted price for prescription drugs, and the contracted price for the prescription drugs differs from the amount the pharmacy benefits manager directly or indirectly pays the pharmacist or pharmacy for pharmacist services. The bill applies to agreements entered into, amended, extended, or renewed on or after July 1, 2020. This bill is identical to SB 568.

Primary Sponsors

Keith Hodges

State	Bill Number	Last Action	Status
VA	HB 1456	House Left In Health Welfare And Institutions 2020 02 11	Failed

Title Introduction Date: 2020-01-08

Medical assistance services; managed care organization contracts with pharmacy providers.

Description

Medical assistance services; managed care organization contracts with pharmacy providers; recoupment of direct and indirect remuneration fees. Requires the Department of Medical Assistance Services to require a managed care organization with which the Department enters into an agreement for the delivery of medical assistance services to include in any agreement between the managed care organization and an intermediary a provision prohibiting the intermediary from recouping direct and indirect remuneration fees with respect to a prescription.

Primary Sponsors

Ibraheem Samirah

State	Bill Number	Last Action	Status
VA	HB 1922	House Left In Labor And Commerce 2021 02 05	Failed

Title

Medical assistance; coverage for reproductive health services.

Introduction Date: 2021-01-10

Description

Medical assistance; coverage for reproductive health services.

Directs the Board of Medical Assistance Services to include in the state plan for medical assistance services a provision for the payment of medical assistance for medically necessary reproductive health care services for eligible individuals and provides that medical benefits required to be provided to individuals eligible for medical assistance under the Family Access to Medical Insurance Security (FAMIS) Plan shall include reproductive health care services for which the payment of medical assistance is required under the state plan for medical assistance. The bill directs the Board of Medical Assistance Services to adopt emergency regulations to implement the provisions of the bill. The bill also requires health benefit plans to cover the costs of specified health care services, drugs, devices, products, and procedures related to reproductive health. The health benefit plan requirements become effective when a plan is delivered, issued for delivery, reissued, or extended in the Commonwealth on and after January 1, 2022, or at any time thereafter when any term of the health benefit plan is changed or any premium adjustment is made.

Primary Sponsors

Cia Price

Title

Telemedicine services; originating site.

Introduction Date: 2020-08-17

Description

Telemedicine services; originating site. Directs the Board of Medical Assistance Services to amend the state plan for medical assistance services to provide for payment of medical assistance for medically necessary health care services provided through telemedicine services, regardless of the originating site or whether the patient is accompanied by a health care provider at the time such services are provided. "Originating site" is defined in the bill as any location where the patient is located, including any medical care facility or office of a health care provider, the home of the patient, the patient's place of employment, or any public or private primary or secondary school or postsecondary institution of higher education at which the person to whom services are provided is located. The bill also requires each (i) insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis; (ii) corporation providing individual or group accident and sickness subscription contracts; and (iii) health maintenance organization providing a health care plan for health care services to provide coverage for telemedicine services regardless of the originating site and whether the patient is accompanied by a health care provider at the time such services are provided. The bill also provides that no health care provider who provides health care services via telemedicine services shall be required to use proprietary technology or applications to be reimbursed for providing telemedicine services, and requires the Department of Medical Assistance Services to continue to reimburse health care providers for Medicaid-covered services delivered via audio-only equipment and by telemedicine services until July 1, 2021. This bill is identical to SB 5080.

Primary Sponsors

Dawn Adams

Title

Medical assistance services; managed care organization contracts with pharmacy benefits managers.

Introduction Date: 2020-01-07

Description

Medical assistance services; managed care organization contracts with pharmacy benefits managers; spread pricing. Requires the Department of Medical Assistance Services to require a managed care organization with which the Department enters into an agreement for the delivery of medical assistance services to include in any agreement between the managed care organization and a pharmacy benefits manager provisions prohibiting the pharmacy benefits manager or a representative of the pharmacy benefits manager from conducting spread pricing with regard to the managed care organization's managed care plans. The bill defines "spread pricing" as the model of prescription drug pricing in which the pharmacy benefits manager charges a managed care plan a contracted price for prescription drugs, and the contracted price for the prescription drugs differs from the amount the pharmacy benefits manager directly or indirectly pays the pharmacist or pharmacy for pharmacist services. The bill applies to agreements entered into, amended, extended, or renewed on or after July 1, 2020. This bill is identical to HB 1291.

Primary Sponsors

Siobhan Dunnivant

State	Bill Number	Last Action	Status
VA	SB 1227	Governor Acts Of Assembly Chapter Text Chap 0245 2021 03 18	Enacted

Title Introduction Date: 2021-01-11

Hormonal contraceptives; payment of medical assistance for 12-month supply.

Description

State plan for medical assistance; payment of medical assistance; 12-month supply of hormonal contraceptives. Directs the Board of Medical Assistance Services to include in the state plan for medical assistance a provision for the payment of medical assistance for the dispensing or furnishing of up to a 12-month supply of hormonal contraceptives at one time for Medicaid and Family Access to Medical Insurance Security (FAMIS) enrollees. The bill prohibits the Department of Medical Assistance Services from imposing any utilization controls or other forms of medical management limiting the supply of hormonal contraceptives that may be dispensed or furnished to an amount less than a 12-month supply. The bill provides that the bill shall not be construed to (i) require a provider to prescribe, dispense, or furnish a 12-month supply of self-administered hormonal contraceptives at one time or (ii) exclude coverage for hormonal contraceptives as prescribed by a prescriber, acting within his scope of practice, for reasons other than contraceptive purposes.

Primary Sponsors

Jennifer Boysko

State	Bill Number	Last Action	Status
VA	SB 1416	Senate Incorporated By Education And Health Sb 1338 Barker 14 Y 0 N 2021 01 21	In Senate

Title Introduction Date: 2021-01-13

DMAS; remote patient monitoring, rural and underserved populations.

Description

Department of Medical Assistance Services; remote patient monitoring; rural and underserved populations. Amends the State Plan for Medical Assistance Services to require the payment of medical assistance for remote patient monitoring services for rural and underserved populations, with the home as an eligible telemedicine originating site. The bill requires the Department of Medical Assistance Services to prepare and submit to the Centers for Medicare and Medicaid Services an application for such waiver or waivers as may be necessary to implement the provisions of the bill. The bill also requires the Department to report to the Governor and the General Assembly on the status of such application or applications by October 1, 2021. This bill was incorporated into SB 1338.

Primary Sponsors

Bill Stanley

Title

Telemedicine services; originating site.

Introduction Date: 2020-08-17

Description

Telemedicine services; originating site. Directs the Board of Medical Assistance Services to amend the state plan for medical assistance services to provide for payment of medical assistance for medically necessary health care services provided through telemedicine services, regardless of the originating site or whether the patient is accompanied by a health care provider at the time such services are provided. "Originating site" is defined in the bill as any location where the patient is located, including any medical care facility or office of a health care provider, the home of the patient, the patient's place of employment, or any public or private primary or secondary school or postsecondary institution of higher education at which the person to whom services are provided is located. The bill also requires each (i) insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis; (ii) corporation providing individual or group accident and sickness subscription contracts; and (iii) health maintenance organization providing a health care plan for health care services to provide coverage for telemedicine services regardless of the originating site and whether the patient is accompanied by a health care provider at the time such services are provided. The bill also provides that no health care provider who provides health care services via telemedicine services shall be required to use proprietary technology or applications to be reimbursed for providing telemedicine services, and requires the Department of Medical Assistance Services to continue to reimburse health care providers for Medicaid-covered services delivered via audio-only equipment and by telemedicine services until July 1, 2021. This bill incorporates SB 5087 and is identical to HB 5046.

Primary Sponsors

George Barker

State	Bill Number	Last Action	Status
VA	SB 5087	Senate Incorporated By Education And Health Sb 5080 Barker 15 Y 0 N 2020 08 19	Failed sine die

Title Introduction Date: 2020-08-17
Telemedicine services; originating site.

Description

Telemedicine services; originating site. Directs the Board of Medical Assistance Services to amend the state plan for medical assistance services to provide for payment of medical assistance for medically necessary health care services provided through telemedicine services, regardless of the originating site or whether the patient is accompanied by a health care provider at the time such services are provided. "Originating site" is defined in the bill as any location where the patient is located, including any medical care facility or office of a health care provider, the home of the patient, the patient's place of employment, or any public or private primary or secondary school or postsecondary institution of higher education at which the person to whom services are provided is located. The bill also requires each (i) insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis; (ii) corporation providing individual or group accident and sickness subscription contracts; and (iii) health maintenance organization providing a health care plan for health care services to provide coverage for telemedicine services regardless of the originating site and whether the patient is accompanied by a health care provider at the time such services are provided. The bill also provides that no health care provider who provides health care services via telemedicine services shall be required to use proprietary technology or applications to be reimbursed for providing telemedicine services, and require the Department of Medical Assistance Services to continue to reimburse health care providers for Medicaid-covered services delivered via audio-only equipment and by telemedicine services until July 1, 2021.

Primary Sponsors

Siobhan Dunnivant

State	Bill Number	Last Action	Status
VT	H 279	Read First Time And Referred To The Committee On Health Care 2021 02 17	In House

Title Introduction Date: 2021-02-17
An act relating to miscellaneous changes affecting the duties of the Department of Vermont Health Access

Primary Sponsors

Lori Houghton

State	Bill Number	Last Action	Status
VT	H 439	House Message Governor Approved Bill On June 8 2021 2021 05 21	Enacted

Title
(Act 74) An act relating to making appropriations for the support of government

Introduction Date: 2021-03-31

State	Bill Number	Last Action	Status
WA	HB 1093	Public Hearing In The House Committee On Appropriations At 3 30 Pm 2021 01 14	In House

Title
Making 2019-2021 fiscal biennium second supplemental operating appropriations.

Introduction Date: 2021-01-06

Primary Sponsors
Timm Ormsby

State	Bill Number	Last Action	Status
WA	SB 5091	Public Hearing In The Senate Committee On Ways Means At 4 00 Pm 2021 01 12	In Senate

Title
Making 2019-2021 fiscal biennium second supplemental operating appropriations.

Introduction Date: 2021-01-06

Primary Sponsors
Christine Rolfes

State	Bill Number	Last Action	Status
WI	SB 133	Fiscal Estimate Received 2021 03 09	In Senate

Title
Medical Assistance coverage of COVID-19 testing and vaccine administration by pharmacies. (FE)

Description
An Act to create 49.45 (39n) of the statutes;

Primary Sponsors
Janet Bewley, Melissa Agard, Tim Carpenter, Jon Erpenbach, LaTonya Johnson, Chris Larson, Brad Pfaff, Janis Ringhand, Kelda Roys, Jeff Smith, Bob Wirch

Bill Summary: Last edited by [deactivated]Ademola Are at Feb 25, 2021, 3:07 PM

Requires Department of Health Services to ensure that vaccines against SARS-CoV-2 coronavirus and tests for COVID-19 that are otherwise covered and reimbursed under the Medical Assistance program are covered and reimbursed when administered by a pharmacy

Introduction Date: 2021-02-24