

# HOUSE BILL 1290

C3  
HB 1103/17 – HGO

8lr2657  
CF 8lr3408

---

By: **Delegates Sample–Hughes, Kipke, Barron, Anderton, Bromwell, Carozza, Ghrist, Jacobs, Mautz, Otto, Pena–Melnyk, and K. Young**

Introduced and read first time: February 9, 2018

Assigned to: Health and Government Operations

---

## A BILL ENTITLED

1 AN ACT concerning

2 **Health Insurance and Pharmacy Benefits Managers – Reimbursement for and**  
3 **Provision of Pharmacy Services**

4 FOR the purpose of authorizing a pharmacist or a pharmacy to decline to dispense a  
5 prescription drug or provide a pharmacy service to a certain member if the amount  
6 reimbursed by a certain insurer, nonprofit health service plan, or health  
7 maintenance organization is less than a certain acquisition cost; prohibiting a  
8 pharmacy benefits manager from reimbursing a pharmacy or pharmacist for a  
9 product or a pharmacy service in an amount less than a certain amount; defining a  
10 certain term; providing for the application of this Act; and generally relating to  
11 reimbursement for pharmacy services by insurers and pharmacy benefits managers  
12 and provision of pharmacy services.

13 BY adding to

14 Article – Insurance  
15 Section 15–1012 and 15–1632  
16 Annotated Code of Maryland  
17 (2017 Replacement Volume)

18 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,  
19 That the Laws of Maryland read as follows:

20 **Article – Insurance**

21 **15–1012.**

22 (A) IN THIS SECTION, “MEMBER” MEANS AN INDIVIDUAL ENTITLED TO  
23 HEALTH CARE BENEFITS FOR PRESCRIPTION DRUGS OR PHARMACY SERVICES  
24 UNDER A POLICY OR CONTRACT ISSUED OR DELIVERED IN THE STATE BY AN ENTITY

---

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 SUBJECT TO THIS SECTION.

2 (B) (1) THIS SECTION APPLIES TO:

3 (I) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT  
4 PROVIDE COVERAGE FOR PRESCRIPTION DRUGS AND PHARMACY SERVICES UNDER  
5 HEALTH INSURANCE POLICIES OR CONTRACTS THAT ARE ISSUED OR DELIVERED IN  
6 THE STATE; AND

7 (II) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE  
8 COVERAGE FOR PRESCRIPTION DRUGS AND PHARMACY SERVICES UNDER  
9 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.

10 (2) AN INSURER, A NONPROFIT HEALTH SERVICE PLAN, OR A HEALTH  
11 MAINTENANCE ORGANIZATION THAT PROVIDES COVERAGE FOR PRESCRIPTION  
12 DRUGS AND PHARMACY SERVICES THROUGH A PHARMACY BENEFITS MANAGER IS  
13 SUBJECT TO THE REQUIREMENTS OF THIS SECTION.

14 (C) IF THE AMOUNT REIMBURSED BY AN ENTITY SUBJECT TO THIS SECTION  
15 FOR A PRESCRIPTION DRUG OR PHARMACY SERVICE IS LESS THAN THE PHARMACY  
16 ACQUISITION COST FOR THE SAME PRESCRIPTION DRUG OR PHARMACY SERVICE,  
17 THE PHARMACIST OR PHARMACY MAY DECLINE TO DISPENSE THE PRESCRIPTION  
18 DRUG OR PROVIDE THE PHARMACY SERVICE TO A MEMBER.

19 15-1632.

20 A PHARMACY BENEFITS MANAGER MAY NOT REIMBURSE A PHARMACY OR  
21 PHARMACIST FOR A PRODUCT OR A PHARMACY SERVICE IN AN AMOUNT LESS THAN  
22 THE AMOUNT THE PHARMACY BENEFITS MANAGER REIMBURSES ITSELF OR AN  
23 AFFILIATE FOR THE SAME PRODUCT OR PHARMACY SERVICE.

24 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect  
25 October 1, 2018.