## **HOUSE BILL 1429**

J1 8lr2505

By: **Delegate James** 

Introduced and read first time: February 11, 2008 Assigned to: Rules and Executive Nominations

## A BILL ENTITLED

1 AN ACT concerning

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## Maryland Medical Assistance Program - Pharmacy Dispensing Fees

3 FOR the purpose of requiring the Department of Health and Mental Hygiene to set 4 certain pharmacy dispensing fees for multiple source drugs under the Maryland 5 Medical Assistance Program at certain times and in a certain manner: 6 establishing certain standards for setting pharmacy dispensing fees for multiple 7 source drugs under the Maryland Medical Assistance Program; requiring the 8 Department to set certain pharmacy dispensing fees in an amount that reflects 9 the findings of a certain survey; requiring the Department to set certain 10 pharmacy dispensing fees by utilizing certain information; authorizing the 11 Department to create certain incentives in setting certain pharmacy dispensing fees; defining a certain term; and generally relating to pharmacy dispensing 12 fees under the Maryland Medical Assistance Program. 13

- 14 BY repealing and reenacting, without amendments,
- 15 Article Health General
- 16 Section 15–101(h)
- 17 Annotated Code of Maryland
- 18 (2005 Replacement Volume and 2007 Supplement)
- 19 BY adding to

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- 20 Article Health General
- 21 Section 15–118.1
- 22 Annotated Code of Maryland
- 23 (2005 Replacement Volume and 2007 Supplement)
- 24 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
- 25 MARYLAND, That the Laws of Maryland read as follows:

Article - Health - General



1	15–101.
2	(h) "Program" means the Maryland Medical Assistance Program.
3	15–118.1.
4	(A) (1) In this section, "operational costs" means pharmacy
5	COSTS ASSOCIATED WITH ENSURING THAT POSSESSION OF THE APPROPRIATE
6	COVERED OUTPATIENT MEDICATION IS TRANSFERRED TO THE PATIENT.
7	(2) "OPERATIONAL COSTS" INCLUDES COSTS INCURRED:
8	(I) IN PREPARING AND DISPENSING A PRESCRIPTION
9	THROUGH:
10	1. CHECKING ON PATIENT PROGRAM COVERAGE AT
11	THE POINT-OF-SALE;
	THE CONTROL OF MALE,
12	2. PACKAGING AND LABELING PRESCRIPTIONS;
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13 14	3. COMPOUNDING THE PRESCRIPTION, IF
14	NECESSARY;
15	4. SPECIAL PACKAGING AND SPECIAL SUPPLIES,
16	INCLUDING UNIT DOSES, BLISTER PACKS, BINGO CARDS, SYRINGES, AND
17	INHALERS;
18	5. DELIVERY TO THE PATIENT;
19	6. MAINTAINING COMPLIANCE WITH FEDERAL AND
20	STATE PROGRAM LAWS AND REGULATIONS, SUCH AS LAWS AND REGULATIONS
21	UNDER MEDICAID AND HIPAA;
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22 23	7. COVERING OVERHEAD EXPENSES, SUCH AS SALARIES, UTILITIES, AND RENT;
20	SALARIES, UTILITIES, AND RENT,
24	8. CONTINUING EDUCATION AND TRAINING OF
25	PHARMACISTS; AND
26	9. MAINTAINING PHARMACY EQUIPMENT; AND
27	(II) IN ASSURING THE PATIENT'S PROPER USE OF THE
28	MEDICATION PRESCRIBED THROUGH:

1	1. Drug utilization review;
2	2. Preferred drug list compliance;
3	3. Counseling the patient;
4	4. Consulting with the physician; and
5 6	5. PROVIDING MEDICATION THERAPY MANAGEMENT TO THE PATIENT.
7 8 9 10 11 12	(B) WITHIN 45 DAYS OF IMPLEMENTATION OF THE AVERAGE MANUFACTURER PRICE-BASED FEDERAL UPPER LIMITS ON PHARMACY REIMBURSEMENT FOR MULTIPLE SOURCE DRUGS MANDATED UNDER THE FEDERAL DEFICIT REDUCTION ACT OF 2005, AND EVERY 2 YEARS THEREAFTER, THE DEPARTMENT SHALL SET PHARMACY DISPENSING FEES FOR MULTIPLE SOURCE DRUGS UNDER THE PROGRAM THAT:
13 14	(1) ARE FAIR, TRANSPARENT, AND REASONABLE AND PROVIDE A REASONABLE PROFIT;
15 16 17 18	(2) ARE ADEQUATE TO ENSURE THAT AN INDIVIDUAL COVERED UNDER THE PROGRAM HAS ACCESS TO PRESCRIPTION DRUGS AND PHARMACY SERVICES AT THE SAME LEVEL AS STATE RESIDENTS WHO ARE NOT ENROLLED IN THE PROGRAM;
19 20	(3) ARE CONSISTENT WITH EFFICIENCY, ECONOMY, AND QUALITY OF CARE; AND
21 22 23 24	(4) In combination with the savings to the State derived from the average manufacturer price-based federal upper limits, are revenue and cost-neutral for the State in the first 12 months in which the fee is implemented.
25 26 27 28 29 30	(C) In setting the initial pharmacy dispensing fees under this section, the Department shall set the fees in an amount that reflects the findings of the 2006 Cost of Dispensing Survey conducted by the University of Maryland School of Pharmacy on behalf of the Department, adjusted by the annual inflation in the health care cost inflation rate.
31	(D) IN DETERMINING A REASONABLE LEVEL FOR SUBSEQUENT

PHARMACY DISPENSING FEES SET UNDER THIS SECTION, THE DEPARTMENT

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1	SHALL SET THE PHARMACY DISPENSING FEES BY UTILIZING INFORMATION ON
2	THE COST OF DISPENSING A PRESCRIPTION IN THE STATE DERIVED FROM:
3	(1) DATA REGARDING PROFESSIONAL SALARIES AND FEES;
4	(2) SURVEYS OF OPERATIONAL COSTS; AND
5	(3) Analyses regarding overhead costs, profits, and
6	RELATED INFORMATION.
7	(E) IN SETTING REASONABLE PHARMACY DISPENSING FEES FOR
8	MULTIPLE SOURCE DRUGS UNDER THIS SECTION, THE DEPARTMENT MAY
9	CREATE ADDITIONAL INCENTIVES DESIGNED TO ENCOURAGE THE UTILIZATION
10	OF LOWER-COST MULTIPLE SOURCE PRESCRIPTION DRUGS AND TO COVER
11	OTHER COSTS ASSOCIATED WITH DISPENSING PRESCRIPTION DRUGS UNDER
12	THE PROGRAM, INCLUDING THOSE COSTS RELATED TO:
13	(1) BAD DEBT;
14	(2) UNCOLLECTED CO-PAYMENTS;
15	(3) PAYMENT LAG TIMES UNDER THE PROGRAM;
16	(4) HIGHER RATES OF REJECTED CLAIMS; AND
17	(5) COORDINATION OF A PATIENT'S BENEFITS.
18	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
19	October 1, 2008.