(8lr2049)

**ENROLLED BILL** 

J3

-Finance/Health and Government Operations-

Introduced by Senators Klausmeier, Della, and Pugh

Read and Examined by Proofreaders:

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nted to the Governor, for his approval this	and p	Seal	Great	the	with	Sealed
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President.						

CHAPTER \_\_\_\_\_

## 1 AN ACT concerning

 $\mathbf{2}$ 

# Pharmacy Benefits Managers – Registration

3 FOR the purpose of requiring a <del>person</del> pharmacy benefits manager to register with the Maryland Insurance Commissioner before the person acts as or represents 4 itself as a pharmacy benefits manager providing pharmacy benefits 5 6 management services in the State; exempting certain managed care 7 organizations, insurers, nonprofit health service plans, and health maintenance organizations, and affiliates, subsidiaries, or other related entities of certain 8 insurers, nonprofit health service plans, and health maintenance organizations 9 from certain provisions of this Act under certain circumstances; requiring an 10 11 applicant for registration to file an application on a certain form and pay to the Commissioner a certain fee; requiring the Commissioner to register certain 12 13 applicants pharmacy benefits managers; providing for the expiration and renewal of a registration; prohibiting a pharmacy benefits manager from taking 14 15certain actions; authorizing the Commissioner to deny, suspend, or revoke a

### EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber / conference committee amendments.



registration or refuse to renew a registration under certain circumstances and 1 2 subject to certain hearing provisions; authorizing the Commissioner, if a 3 registration is suspended or revoked, to permit the continued operation of a pharmacy benefits manager for a certain period of time under certain 4 circumstances; requiring a pharmacy benefits manager to register as a third  $\mathbf{5}$ 6 party administrator or a private review agent under certain circumstances; requiring a certain pharmacy benefits manager to pay and adjust claims 7 8 according to certain statutory requirements; prohibiting an insurer, a nonprofit 9 health service plan, or a health maintenance organization a purchaser from entering into an agreement with a pharmacy benefits manager that has not 10 registered with the Commissioner; requiring authorizing the Commissioner to 11 conduct a certain examination in accordance with certain provisions of law; 12requiring a pharmacy benefits manager to maintain certain books and records 13for a certain period and in accordance with certain standards; requiring the 14 Commissioner to adopt certain regulations on or before a certain date; 15authorizing the Commissioner to issue a certain order; authorizing an order of 16 the Commissioner to be served in a certain manner under certain 17circumstances; providing that a request for a hearing on a certain order does not 18 stay a certain portion of the order; authorizing the Commissioner to file a 19 certain petition in circuit court; authorizing the Commissioner to recover certain 20 fees and costs under certain circumstances; providing certain penalties; altering 21the definition of a "nonresident pharmacy" to include a pharmacy benefits 22manager under certain provisions of law; requiring a nonresident pharmacy to 23meet certain requirements: making certain provisions of law applicable to 24health maintenance organizations; allowing a certain person to continue to act 25as a pharmacy benefits manager without registering with the Commissioner 26 under certain circumstances; defining certain terms; and generally relating to 27regulation and registration of pharmacy benefits managers. 28

- 29 BY adding to
- 30 Article Insurance
- 31Section 15–1601 through <a href="https://doi.org/10.1609"><u>15–1613</u></a> 15–1609 to be under the new subtitle32"Subtitle 16. Pharmacy Benefits Managers"
- 33 Annotated Code of Maryland
- 34 (2006 Replacement Volume and 2007 Supplement)
- 35 BY adding to
- 36 Article Health General
- 37 Section 19–706(ppp)
- 38 Annotated Code of Maryland
- 39 (2005 Replacement Volume and 2007 Supplement)
- 40 BY repealing and reenacting, with amendments,
- 41 Article Health Occupations
- 42 Section 12–101(m) and 12–403(e) and (f)
- 43 Annotated Code of Maryland
- 44 (2005 Replacement Volume and 2007 Supplement)

1	BY repealing and reenacting, without amendments,
$\frac{2}{3}$	<del>Article – Health Occupations</del> <del>Section 12–403(a), (b)(17), (d), and (g)</del>
3 4	Annotated Code of Maryland
$\frac{1}{5}$	(2005 Replacement Volume and 2007 Supplement)
6	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
7	MARYLAND, That the Laws of Maryland read as follows:
8	Article – Insurance
9	SUBTITLE 16. PHARMACY BENEFITS MANAGERS.
10	15-1601.
11	(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
12	INDICATED.
13	(B) "BENEFICIARY" MEANS AN INDIVIDUAL WHO RECEIVES
14	PRESCRIPTION DRUG COVERAGE OR BENEFITS FROM A PURCHASER.
15	(C) <b>"ERISA"</b> HAS THE MEANING STATED IN § 8–301 OF THIS ARTICLE.
16	(B) (1) "Pharmacy benefits management services" means the
17	ADMINISTRATION OR MANAGEMENT OF PRESCRIPTION DRUG BENEFITS,
18	(2) "Pharmacy benefits management services" includes:
19	(I) PROCUREMENT OF PRESCRIPTION DRUGS AT A
20	NEGOTIATED RATE FOR DISPENSATION WITHIN THE STATE;
21	(II) PROCESSING OF PRESCRIPTION DRUG CLAIMS;
22	(III) ADMINISTRATION OF PAYMENTS RELATED TO
23	PRESCRIPTION DRUG CLAIMS; AND
24	(IV) NEGOTIATING OR ENTERING INTO CONTRACTUAL
25	ARRANGEMENTS WITH PHARMACIES OR PHARMACISTS.
26	(D) "NONPROFIT HEALTH MAINTENANCE ORGANIZATION" HAS THE
27	MEANING STATED IN § 6–121(A) OF THIS ARTICLE.
28	(E) (1) "PHARMACY BENEFITS MANAGEMENT SERVICES" MEANS:

	4 SENATE BILL 722
$egin{array}{c} 1 \\ 2 \end{array}$	(I) <u>THE PROCUREMENT OF PRESCRIPTION DRUGS AT A</u> <u>NEGOTIATED RATE FOR DISPENSATION WITHIN THE STATE TO BENEFICIARIES;</u>
$3 \\ 4 \\ 5$	(II) <u>THE ADMINISTRATION OR MANAGEMENT OF</u> <u>PRESCRIPTION DRUG COVERAGE PROVIDED BY A PURCHASER FOR</u> <u>BENEFICIARIES; AND</u>
6 7	(III) ANY OF THE FOLLOWING SERVICES PROVIDED WITH REGARD TO THE ADMINISTRATION OF PRESCRIPTION DRUG COVERAGE:
8	<b><u>1.</u></b> MAIL SERVICE PHARMACY;
9 10 11	2. <u>CLAIMS PROCESSING, RETAIL NETWORK</u> <u>MANAGEMENT, AND PAYMENT OF CLAIMS TO PHARMACIES FOR PRESCRIPTION</u> <u>DRUGS DISPENSED TO BENEFICIARIES;</u>
$\begin{array}{c} 12\\ 13 \end{array}$	<u>3.</u> <u>CLINICAL FORMULARY DEVELOPMENT AND</u> <u>MANAGEMENT SERVICES;</u>
14	4. <u>REBATE CONTRACTING AND ADMINISTRATION;</u>
$\begin{array}{c} 15\\ 16\end{array}$	<b><u>5.</u></b> <u>PATIENT</u> <u>COMPLIANCE, THERAPEUTIC</u> <u>INTERVENTION, AND GENERIC SUBSTITUTION PROGRAMS; OR</u>
17	6. DISEASE MANAGEMENT PROGRAMS.
18 19 20 21	(2) "PHARMACY BENEFITS MANAGEMENT SERVICES" DOES NOT INCLUDE ANY SERVICE PROVIDED BY A NONPROFIT HEALTH MAINTENANCE ORGANIZATION THAT OPERATES AS A GROUP MODEL, PROVIDED THAT THE SERVICE:
22 23	(I) IS PROVIDED SOLELY TO A MEMBER OF THE NONPROFIT HEALTH MAINTENANCE ORGANIZATION; AND
24 25	(II) IS FURNISHED THROUGH THE INTERNAL PHARMACY OPERATIONS OF THE NONPROFIT HEALTH MAINTENANCE ORGANIZATION.
26 27	(G) (F) "PHARMACY BENEFITS MANAGER" MEANS A PERSON THAT PERFORMS PHARMACY BENEFITS MANAGEMENT SERVICES.
28 29	( <del>d)</del> ( <del>1)</del> "Utilization review" has the meaning stated in § 15–10B–01 of this title.
30	(2) "UTILIZATION REVIEW" INCLUDES:

1	(I) DRUG UTILIZATION MANAGEMENT;
2	(II) DRUC UTILIZATION REVIEW SERVICES; AND
3	(III) STEP PROTOCOL THERAPY MANAGEMENT.
4	(G) (1) "PURCHASER" MEANS THE STATE EMPLOYEE AND RETIREE
<b>5</b>	HEALTH AND WELFARE BENEFITS PROGRAM, AN INSURER, A NONPROFIT
6	HEALTH SERVICE PLAN, OR A HEALTH MAINTENANCE ORGANIZATION THAT:
7	(I) PROVIDES PRESCRIPTION DRUG COVERAGE OR
8	BENEFITS IN THE STATE; AND
9	(II) ENTERS INTO AN AGREEMENT WITH A PHARMACY
10	BENEFITS MANAGER FOR THE PROVISION OF PHARMACY BENEFITS
11	MANAGEMENT SERVICES.
12	(2) "PURCHASER" DOES NOT INCLUDE A PERSON THAT PROVIDES
13	PRESCRIPTION DRUG COVERAGE OR BENEFITS THROUGH PLANS SUBJECT TO
14	<b>ERISA</b> AND DOES NOT PROVIDE PRESCRIPTION DRUG COVERAGE OR BENEFITS
15	THROUGH INSURANCE, UNLESS THE PERSON IS A MULTIPLE EMPLOYER
16	WELFARE ARRANGEMENT AS DEFINED IN § 514(B)(6)(A)(II) OF ERISA.
17	15–1602.
18	(A) THE PROVISIONS OF THIS SUBTITLE DO NOT APPLY TO A MANAGED
19	CARE ORGANIZATION AUTHORIZED BY TITLE 15, SUBTITLE 1 OF THE HEALTH-
20	General Article.
21	(B) THE PROVISIONS OF THIS SUBTITLE DO NOT APPLY TO AN INSURER,
22	<del>A NONPROFIT HEALTH SERVICE PLAN, OR A HEALTH MAINTENANCE</del>
23	ORGANIZATION OR AN AFFILIATE, SUBSIDIARY, OR OTHER RELATED ENTITY OF
24	AN INSURER, A NONPROFIT HEALTH SERVICE PLAN, OR A HEALTH
25	MAINTENANCE ORGANIZATION ACTING OR REPRESENTING ITSELF AS A
26	PHARMACY BENEFITS MANAGER IF:
27	(1) THE INSURER, NONPROFIT HEALTH SERVICE PLAN, OR
28	HEALTH MAINTENANCE ORGANIZATION OR THE AFFILIATE, SUBSIDIARY, OR
29	OTHER RELATED ENTITY OF THE INSURER, NONPROFIT HEALTH SERVICE PLAN,
30	OR HEALTH MAINTENANCE ORGANIZATION DIRECTLY OFFERS OR PROVIDES
31	PHARMACY BENEFITS MANAGEMENT SERVICES; AND

1(2)THE PHARMACY BENEFITS MANAGEMENT SERVICES ARE2OFFERED OR PROVIDED ONLY TO ENROLLEES, SUBSCRIBERS, OR INSUREDS3WHO ALSO ARE COVERED BY HEALTH BENEFITS OFFERED OR PROVIDED BY THE4INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH MAINTENANCE5ORGANIZATION.

6 <del>15-1603.</del>

7(A) A PERSON PHARMACY BENEFITS MANAGERSHALL REGISTER WITH8THE COMMISSIONER BEFORE THE PERSON ACTS AS OR REPRESENTS ITSELFAS9A PHARMACY BENEFITS MANAGERIN THE STATEBEFORE PROVIDING10PHARMACY BENEFITS MANAGEMENT SERVICES IN THE STATE TO PURCHASERS.

11 (B) AN APPLICANT FOR REGISTRATION SHALL:

12 (1) FILE WITH THE COMMISSIONER AN APPLICATION ON THE 13 FORM THAT THE COMMISSIONER PROVIDES; AND

14(2)PAY TO THE COMMISSIONER A REGISTRATION FEE SET BY THE15COMMISSIONER.

16 (C) THE COMMISSIONER SHALL REGISTER EACH APPLICANT THAT
17 MEETS THE REQUIREMENTS ESTABLISHED BY THE COMMISSIONER BY
18 REGULATION SUBJECT TO THE PROVISIONS OF § 15–1604 OF THIS SUBTITLE,
19 THE COMMISSIONER SHALL REGISTER EACH PHARMACY BENEFITS MANAGER
20 THAT MEETS THE REQUIREMENTS OF THIS SECTION.

21 **15–1604.** 

22 (A) A REGISTRATION EXPIRES AT THE END OF EVERY OTHER JUNE 30, 23 UNLESS IT IS RENEWED AS PROVIDED IN THIS SECTION.

24 **<u>15–1603.</u>** 

25(A)A PHARMACY BENEFITS MANAGER REGISTRATION EXPIRES ON THE26ANNIVERSARY DATE THAT OCCURS ON THE DATE 2 YEARS FOLLOWING THE27DATE THE COMMISSIONER ISSUED THE REGISTRATION, UNLESS IT IS RENEWED28AS PROVIDED UNDER THIS SECTION.

(B) BEFORE A REGISTRATION EXPIRES, THE REGISTRANT MAY RENEW
IT FOR AN ADDITIONAL 2-YEAR TERM, IF THE REGISTRANT A PHARMACY
BENEFITS MANAGER MAY RENEW ITS REGISTRATION FOR AN ADDITIONAL
2-YEAR TERM, IF THE PHARMACY BENEFITS MANAGER:

1	(1) OTHERWISE IS ENTITLED TO BE REGISTERED;
T	(1) OTHERWISE IS ENTITLED TO BE REGISTERED;
2	(2) FILES WITH THE COMMISSIONER A RENEWAL APPLICATION
3	ON THE FORM THAT THE COMMISSIONER REQUIRES; AND
0	on the Form that the commissionen negotices, and
4	(3) PAYS TO THE COMMISSIONER A RENEWAL FEE SET BY THE
5	Commissioner.
6	(C) AN APPLICATION FOR RENEWAL OF A <u>PHARMACY BENEFITS</u>
<b>7</b>	MANAGER REGISTRATION SHALL BE CONSIDERED TIMELY IF MADE IN A TIMELY
8	<u>manner if it is</u> postmarked on or before <del>June 30 of the year of</del> <del>the</del>
9	RENEWAL THE DATE THE PHARMACY BENEFITS MANAGER'S REGISTRATION
10	EXPIRES.
11	(D) SUBJECT TO THE PROVISIONS OF § 15–1604 OF THIS SUBTITLE, THE
12	COMMISSIONER SHALL RENEW THE REGISTRATION OF EACH PHARMACY
13	<b>BENEFITS MANAGER THAT MEETS THE REQUIREMENTS OF THIS SECTION.</b>
14	<u>15–1604.</u>
15	
15 16	(A) SUBJECT TO THE HEARING PROVISIONS OF TITLE 2 OF THIS
16 17	ARTICLE, THE COMMISSIONER MAY DENY A REGISTRATION TO A PHARMACY
17 18	BENEFITS MANAGER APPLICANT OR REFUSE TO RENEW, SUSPEND, OR REVOKE
18 19	THE REGISTRATION OF A PHARMACY BENEFITS MANAGER IF THE PHARMACY
$\frac{19}{20}$	<b>BENEFITS MANAGER, OR AN OFFICER, DIRECTOR, OR EMPLOYEE OF THE</b> PHARMACY BENEFITS MANAGER:
20	PHARMACI DENEFIIS MANAGER:
21	(1) <del>knowingly</del> makes a material misstatement or
22	MISREPRESENTATION IN AN APPLICATION FOR REGISTRATION;
23	(2) FRAUDULENTLY OR DECEPTIVELY OBTAINS OR ATTEMPTS TO
24	OBTAIN A REGISTRATION;
25	(3) IN CONNECTION WITH THE ADMINISTRATION OF PHARMACY
26	BENEFITS MANAGEMENT SERVICES, COMMITS FRAUD OR ENGAGES IN ILLEGAL
27	OR DISHONEST ACTIVITIES; OR
28	(4) <u>VIOLATES ANY PROVISION OF THIS SUBTITLE OR A</u>
29	<b>REGULATION ADOPTED UNDER THIS SUBTITLE.</b>
0.0	
30	(B) THIS SECTION DOES NOT LIMIT ANY OTHER REGULATORY
31	AUTHORITY OF THE COMMISSIONER UNDER THIS ARTICLE.

32 **<u>15–1605.</u>** 

1	A PHARMACY BENEFITS MANAGER MAY NOT SHIP, MAIL, OR DELIVER
2	PRESCRIPTION DRUGS OR DEVICES TO A PERSON IN THE STATE THROUGH A
3	NONRESIDENT PHARMACY UNLESS THE NONRESIDENT PHARMACY HOLDS A
4	PERMIT ISSUED IN ACCORDANCE WITH THE PROVISIONS OF § 12–403 OF THE
5	HEALTH OCCUPATIONS ARTICLE.
6	<del>15–1605.</del>
7	A PHARMACY BENEFITS MANAGER MAY NOT:
8	(1) <b>VIOLATE ANY PROVISION OF THIS ARTICLE APPLICABLE TO</b>
9	THE PHARMACY BENEFITS MANAGER;
U	
10	(2) VIOLATE ANY REGULATION ADOPTED UNDER THIS ARTICLE
11	APPLICABLE TO THE PHARMACY BENEFITS MANAGER;
12	(3) KNOWINGLY FAIL TO COMPLY WITH ANY ORDER OF THE
13	Commissioner;
14	(4) OBTAIN OR ATTEMPT TO OBTAIN A REGISTRATION BASED ON
15	INACCURATE INFORMATION;
16	(5) FRAUDULENTLY OR DECEPTIVELY OBTAIN OR USE A
17	REGISTRATION;
18	(6) FAIL TO PROTECT THE CONFIDENTIALITY OF MEDICAL
19	RECORDS IN ACCORDANCE WITH APPLICABLE STATE AND FEDERAL LAWS; OR
20	(7) ACT AS A PHARMACY BENEFITS MANAGER WITHOUT FIRST
21	REGISTERING WITH THE COMMISSIONER.
22	15–1606.
ດາ	
$\frac{23}{24}$	(A) SUBJECT TO THE HEARING PROVISIONS OF TITLE 2 OF THIS ADDICLE THE COMMISSIONED MAY DENV SUSPEND OF DEVOKE A
$\frac{24}{25}$	ARTICLE, THE COMMISSIONER MAY DENY, SUSPEND, OR REVOKE A
25 26	REGISTRATION OR REFUSE TO RENEW A REGISTRATION IF THE APPLICANT OR REGISTRANT VIOLATES ANY PROVISION OF § 15–1605 OF THIS SUBTITLE.
40	REUISTRANT VIULATES ANT FRUVISIUN UF 3 19-1009 UF THIS SUBTITLE.
<b>27</b>	(B) IF THE REGISTRATION OF A PHARMACY BENEFITS MANAGER IS
21 28	SUSPENDED OR REVOKED, THE COMMISSIONER, TO PROTECT THE INTERESTS
28 29	OF BENEFICIARIES AND PHARMACIES AND PHARMACISTS, MAY PERMIT THE
40	OF DEALE TOTAL TELEVISION AND THE THE TAKEN THE THE

30 CONTINUED OPERATION OF THE PHARMACY BENEFITS MANAGER FOR A

1	LIMITED PERIOD, NOT TO EXCEED 60 DAYS, UNDER CONDITIONS AND
2	RESTRICTIONS DETERMINED BY THE COMMISSIONER.
3	(A) WHENEVER THE COMMISSIONER CONSIDERS IT ADVISABLE, THE
4	COMMISSIONER MAY EXAMINE THE AFFAIRS, TRANSACTIONS, ACCOUNTS, AND
5	RECORDS OF A REGISTERED PHARMACY BENEFITS MANAGER.
0	RECORDS OF A REGISTERED I HARMACT DENEFTIS MANAGER.
6	(B) THE EXAMINATION SHALL BE CONDUCTED IN ACCORDANCE WITH §
<b>7</b>	2–207 OF THIS ARTICLE.
8	<u>(C)</u> <u>The expense of the examination shall be paid in</u>
9	ACCORDANCE WITH § 2–208 OF THIS ARTICLE.
10	
10	(D) THE REPORTS OF THE EXAMINATION AND INVESTIGATION SHALL BE
11	ISSUED IN ACCORDANCE WITH § 2–209 OF THIS ARTICLE.
12	15–1607.
13	(A) A PHARMACY BENEFITS MANAGER SHALL REGISTER WITH THE
14	COMMISSIONER AS A THIRD PARTY ADMINISTRATOR UNDER TITLE 8, SUBTITLE
15	<b>3 OF THIS ARTICLE IF THE PHARMACY BENEFITS MANAGER:</b>
16	(1) PROCESSES PRESCRIPTION DRUG CLAIMS; OR
17	(2) ADMINISTERS PAYMENTS RELATED TO PRESCRIPTION DRUG
18	CLAIMS:
10	
19	(B) A PHARMACY BENEFITS MANAGER THAT PROCESSES PRESCRIPTION
20	DRUG CLAIMS OR ADMINISTERS PAYMENTS RELATED TO PRESCRIPTION DRUG
21	CLAIMS SHALL:
22	(1) PAY CLAIMS IN ACCORDANCE WITH § 15–1005 OF THIS TITLE;
23	AND
24	(2) ADJUST CLAIMS IN ACCORDANCE WITH § 15-1008 OF THIS
$\frac{24}{25}$	
20	TITLE.
26	<del>15–1608.</del>
27	A PHARMACY BENEFITS MANAGER THAT CONDUCTS UTILIZATION REVIEW
28	SHALL OBTAIN FROM THE COMMISSIONER A CERTIFICATE OF REGISTRATION AS
29	A PRIVATE REVIEW AGENT UNDER SUBTITLE 10B OF THIS TITLE.

30 <del>15-1609.</del>

1 AN INSURER, A NONPROFIT HEALTH SERVICE PLAN, OR A HEALTH 2 MAINTENANCE ORGANIZATION MAY NOT ENTER INTO AN AGREEMENT WITH A 3 PHARMACY BENEFITS MANAGER THAT HAS NOT REGISTERED WITH THE 4 Commissioner. 5 **15-1610** 6 <del>(A)</del> WHENEVER THE COMMISSIONER CONSIDERS IT ADVISABLE, THE 7 **COMMISSIONER SHALL EXAMINE THE AFFAIRS, TRANSACTIONS, ACCOUNTS,** 8 RECORDS, AND ASSETS OF EACH PHARMACY BENEFITS MANAGER. 9 <del>(B)</del> THE EXAMINATION SHALL BE CONDUCTED IN ACCORDANCE WITH § 10 2-207 OF THIS ARTICLE. 11 <del>(C)</del> THE EXPENSE OF THE EXAMINATION SHALL BE PAID IN ACCORDANCE WITH § 2-208 OF THIS ARTICLE. 12 13 (D) THE REPORTS OF THE EXAMINATION AND INVESTIGATION SHALL BE 14 **ISSUED IN ACCORDANCE WITH § 2–209 OF THIS ARTICLE.** 15 <del>15-1611.</del> 16 A PHARMACY BENEFITS MANAGER SHALL MAINTAIN ADEQUATE BOOKS 17 AND RECORDS ABOUT EACH PURCHASER FOR WHICH THE PHARMACY BENEFITS 18 **MANAGER PROVIDES PHARMACY BENEFITS MANAGEMENT SERVICES:** 19 <del>(1)</del> IN ACCORDANCE WITH PRUDENT STANDARDS OF RECORD 20 **KEEPING**; 21 <del>(2)</del> FOR THE DURATION OF THE AGREEMENT BETWEEN THE 22PHARMACY BENEFITS MANAGER AND THE PURCHASER; AND 23(3) FOR 3 YEARS AFTER THE PHARMACY BENEFITS MANAGER 24**CEASES TO PROVIDE PHARMACY BENEFITS MANAGEMENT SERVICES TO THE** 25PURCHASER. 26 **15\_1612** 27**ON OR BEFORE APRIL 1, 2009, THE COMMISSIONER SHALL ADOPT** 28REGULATIONS TO IMPLEMENT THIS SUBTITLE. 29 **15-1613** 

1	In addition to the penalties authorized by § 15-1606 of this
<b>2</b>	SUBTITLE, THE COMMISSIONER MAY ASSESS A CIVIL PENALTY NOT EXCEEDING
3	\$10,000 FOR EACH VIOLATION OF THIS SUBTITLE.
4	A PHARMACY BENEFITS MANAGER SHALL MAINTAIN ADEQUATE BOOKS
5	AND RECORDS ABOUT EACH PURCHASER FOR WHICH THE PHARMACY BENEFITS
6	MANAGER PROVIDES PHARMACY BENEFITS MANAGEMENT SERVICES:
_	
7	(1) IN ACCORDANCE WITH PRUDENT STANDARDS OF RECORD
8	<u>KEEPING;</u>
9	
	(2) FOR THE DURATION OF THE AGREEMENT BETWEEN THE
10	PHARMACY BENEFITS MANAGER AND THE PURCHASER; AND
11	(3) FOR 3 YEARS AFTER THE PHARMACY BENEFITS MANAGER
12	CEASES TO PROVIDE PHARMACY BENEFITS MANAGEMENT SERVICES FOR THE
13	PURCHASER.
10	<u>r unumsen.</u>
14	15-1608.
15	(A) IF THE COMMISSIONER DETERMINES THAT A PHARMACY BENEFITS
16	MANAGER HAS VIOLATED ANY PROVISION OF THIS SUBTITLE OR ANY
17	<b>REGULATION ADOPTED UNDER THIS SUBTITLE, THE COMMISSIONER MAY ISSUE</b>
18	AN ORDER THAT REQUIRES THE PHARMACY BENEFITS MANAGER TO:
19	(1) CEASE AND DESIST FROM THE IDENTIFIED VIOLATION AND
20	FURTHER SIMILAR VIOLATIONS;
21	(2) TAKE SPECIFIC AFFIRMATIVE ACTION TO CORRECT THE
22	VIOLATION; OR
22	
23	(3) MAKE RESTITUTION OF MONEY, PROPERTY, OR OTHER ASSETS
24	TO A PERSON THAT HAS SUFFERED FINANCIAL INJURY BECAUSE OF THE
25	VIOLATION.
96	$(\mathbf{p})$ $(1)$ AN OPPER OF THE CONDUCTIONED ICCURE INDER THE
26 97	(B) (1) AN ORDER OF THE COMMISSIONER ISSUED UNDER THIS
27 28	SECTION MAY BE SERVED ON A PHARMACY BENEFITS MANAGER THAT IS
	REGISTERED UNDER THIS SUBTITLE IN THE MANNER PROVIDED IN § 2–204 OF
29	THIS ARTICLE.
30	(2) AN ORDER OF THE COMMISSIONER ISSUED UNDER THIS
31	SECTION MAY BE SERVED ON A PHARMACY BENEFITS MANAGER THAT IS NOT
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32 REGISTERED UNDER THIS SUBTITLE IN THE MANNER PROVIDED IN § 4–206 OR §

1	4-207 OF THIS ARTICLE FOR SERVICE ON AN UNAUTHORIZED INSURER THAT
2	DOES AN ACT OF INSURANCE BUSINESS IN THE STATE.
3	(3) A REQUEST FOR A HEARING ON ANY ORDER ISSUED UNDER
4	THIS SECTION DOES NOT STAY THAT PORTION OF THE ORDER THAT REQUIRES
<b>5</b>	THE PHARMACY BENEFITS MANAGER TO CEASE AND DESIST FROM CONDUCT
6	IDENTIFIED IN THE ORDER.
Ū	
<b>7</b>	(4) THE COMMISSIONER MAY FILE A PETITION IN THE CIRCUIT
8	COURT OF ANY COUNTY TO ENFORCE AN ORDER ISSUED UNDER THIS SECTION,
9	WHETHER OR NOT A HEARING HAS BEEN REQUESTED OR, IF REQUESTED,
10	WHETHER OR NOT A HEARING HAS BEEN HELD.
20	
11	(5) IF THE COMMISSIONER PREVAILS IN AN ACTION BROUGHT
12	UNDER THIS SECTION, THE COMMISSIONER MAY RECOVER, FOR THE USE OF
13	THE STATE, REASONABLE ATTORNEY'S FEES AND THE COSTS OF THE ACTION.
14	(C) IN ADDITION TO ANY OTHER ENFORCEMENT ACTION TAKEN BY THE
15	COMMISSIONER UNDER THIS SECTION, THE COMMISSIONER MAY IMPOSE A
16	CIVIL PENALTY NOT EXCEEDING \$10,000 FOR EACH VIOLATION OF THIS
17	SUBTITLE.
18	(D) THIS SECTION DOES NOT LIMIT ANY OTHER REGULATORY
19	AUTHORITY OF THE COMMISSIONER UNDER THIS ARTICLE.
20	<u>15–1609.</u>
21	A PURCHASER MAY NOT ENTER INTO AN AGREEMENT WITH A PHARMACY
22	<u>BENEFITS MANAGER THAT HAS NOT REGISTERED WITH THE COMMISSIONER.</u>
23	Article – Health – General
24	19–706.
05	
25	(PPP) THE PROVISIONS OF TITLE 15, SUBTITLE 16 OF THE INSURANCE
26	ARTICLE APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.
07	Article Health Occurrentians
27	Article – Health Occupations
28	$\frac{12-101}{12}$
40	
29	(m) (1) "Nonresident pharmacy" means a pharmacy located outside this
30	State that, in the normal course of business, as determined by the Board, ships, mails,
31	or delivers drugs or devices to a person in this State pursuant to a prescription.

12

1	(2) "Nonresident pharmacy" includes a pharmacy
2	BENEFITS MANAGER, LOCATED WITHIN OR OUTSIDE THIS STATE, THAT IS
3	REGULATED UNDER TITLE 15, SUBTITLE 16 OF THE INSURANCE ARTICLE, IF
4	THE PHARMACY BENEFITS MANAGER SHIPS, MAILS, OR DELIVERS DRUGS OR
5	DEVICES TO A PERSON IN THIS STATE PURSUANT TO A PRESCRIPTION.
6	<del>12-403.</del>
7	(a) This section does not require a nonresident pharmacy to violate the laws
8	or regulations of the state in which it is located.
9	(b) Except as otherwise provided in this section, a pharmacy for which a
10	<del>pharmacy permit has been issued under this title:</del>
11	(17) With regard to a prescription drug that is delivered in this State by
12	the United States mail, a common carrier, or a delivery service and is not personally
13	hand delivered directly to a patient or to the agent of the patient at the residence of
14	the patient or at another location designated by the patient, shall:
15	(i) Provide a general written notice in each shipment of a
16	prescription drug that alerts a consumer that, under certain circumstances, a
17	medication's effectiveness may be affected by exposure to extremes of heat, cold, or
18	humidity; and
19	(ii) Provide a specific written notice in each shipment of a
20	prescription drug that provides a consumer with a toll-free or local consumer access
21	telephone number accessible during regular hours of operation, which is designed to
22	respond to consumer questions pertaining to medications;
23	(d) A nonresident pharmacy shall hold a pharmacy permit issued by the
24	Board.
25	(e) (1) In order to obtain a pharmacy permit from the Board, a
26	nonresident pharmacy, TO THE EXTENT APPLICABLE, shall:
27	(i) Submit an application to the Board on the form that the
28	Board requires;
29	(ii) Pay to the Board an application fee set by the Board;
30	(iii) Submit a copy of the most recent inspection report resulting
31	from an inspection conducted by the regulatory or licensing agency of the state in
32	which the nonresident pharmacy is located; and
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1	(iv) On the required permit application, identify the name and
<b>2</b>	current address of an agent located in this State officially designated to accept service
3	<del>of process.</del>
4	(2) A nonresident pharmacy shall report a change in the name or
<b>5</b>	<del>address of the resident agent in writing to the Board 30 days prior to the change.</del>
6	(f) A nonresident pharmacy, TO THE EXTENT APPLICABLE, shall:
<b>7</b>	(1) Comply with the laws of the state in which it is located;
8	(2) On an annual basis and within 30 days after a change of office,
9	corporate officer, or pharmacist, disclose to the Board the location, names, and titles of
10	all principal corporate officers and all pharmacists who are dispensing prescriptions
11	<del>for drugs or devices to persons in this State;</del>
12	(3) Comply with all lawful directions and requests for information
13	from the regulatory or licensing agency of the state in which it is located and all
14	<del>requests for information made by the Board pursuant to this section;</del>
15	(4) Maintain at all times a valid, unexpired permit to conduct a
16	<del>pharmacy in compliance with the laws of the state in which it is located;</del>
17	(5) Maintain its records of prescription drugs or devices dispensed to
18	<del>patients in this State so that the records are readily retrievable;</del>
19	(6) During its regular hours of operation, but not less than 6 days a
20	week, and for a minimum of 40 hours per week, provide toll-free telephone service to
21	facilitate communication between patients in this State and a pharmacist who has
22	access to the patient's prescription records;
23	(7) Disclose its toll-free telephone number on a label affixed to each
24	<del>container of drugs or devices;</del>
25	(8) Comply with the laws of this State relating to the confidentiality of
26	prescription records if there are no laws relating to the confidentiality of prescription
27	records in the state in which the nonresident pharmacy is located; [and]
28	(9) Comply with the requirements of subsection (b)(17) of this section;
29	AND
30	(10) <b>Require each employee or contractor to be licensed</b>
31	TO PRACTICE PHARMACY IF THE EMPLOYEE OR CONTRACTOR PRACTICES
32	PHARMACY FOR OR ON BEHALF OF THE NONRESIDENT PHARMACY.

1 (g) Subject to the hearing provisions of § 12-411 of this subtitle, if a 2 pharmacy or a nonresident pharmacy is operated in violation of this section, the Board 3 may suspend the applicable pharmacy permit until the pharmacy complies with this 4 section.

5 SECTION 2. AND BE IT FURTHER ENACTED, That a person acting as a 6 pharmacy benefits manager in the State on the effective date of this Act may continue 7 to act as a pharmacy benefits manager in the State without being registered with the 8 Maryland Insurance Commissioner, as required under Section 1 of this Act, if the 9 person:

- 10 (1) registers with the Commissioner on or before July 1, 2009; and
- 11 (2) complies with all other applicable provisions of this Act.

12 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect 13 October 1, 2008.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.