SENATE BILL 724

J3 8lr2052 CF HB 120

By: Senators Klausmeier and Della

Introduced and read first time: February 1, 2008

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 29, 2008

CHAPTER ____

1 AN ACT concerning

2

Pharmacy Benefits Managers - Transparency Disclosures

3 FOR the purpose of requiring a pharmacy benefits manager to disclose in writing 4 certain information to a prospective purchaser and a purchaser; specifying the manner in which certain disclosures must be provided; providing that a 5 6 pharmacy benefits manager need not make certain disclosures unless and until 7 the prospective purchaser or the purchaser agrees in writing to maintain 8 certain information as confidential; providing that certain agreements may 9 include certain remedies and certain persons; requiring a contract executed by a 10 pharmacy benefits manager for the provision of pharmacy benefits management services to include certain items; requiring the Commissioner to adopt certain 11 regulations on or before a certain date; requiring certain pharmacy benefits 12 13 managers to provide certain information and offer to provide a certain report to a certain purchaser before entering into a contract with the purchaser under 14 15 certain circumstances; requiring a pharmacy benefits manager to provide 16 certain reports to a certain purchaser under certain circumstances; providing that this Act does not diminish the authority of the Office of the Attorney 17 General or the Maryland Insurance Commissioner to obtain and use certain 18 19 information in certain proceedings; making certain provisions of law applicable 20 to health maintenance organizations; defining certain terms; and generally relating to regulation of pharmacy benefits managers. 21

22 BY adding to

23

Article – Insurance

Section 15–1601 through 15–1609 <u>15–1605</u> to be under the new subtitle "Subtitle 16. Pharmacy Benefits Managers"

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.



$\frac{1}{2}$	Annotated Code of Maryland (2006 Replacement Volume and 2007 Supplement)	
3 4 5 6 7	BY adding to Article – Health – General Section 19–706(ppp) Annotated Code of Maryland (2005 Replacement Volume and 2007 Supplement)	
8 9	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:	
10	Article - Insurance	
11	SUBTITLE 16. PHARMACY BENEFITS MANAGERS.	
12	15–1601.	
13	(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS	
14	INDICATED.	
15	(B) "BENEFICIARY" MEANS AN INDIVIDUAL ON WHOSE BEHALF A	
16	PURCHASER ENTERS INTO AN AGREEMENT WITH A PHARMACY BENEFITS	
17	MANAGER.	
18	(C) "LABELER" MEANS A PERSON THAT:	
19	(1) RECEIVES PRESCRIPTION DRUGS FROM A MANUFACTURER OR	
20	WHOLESALER AND REPACKAGES THOSE DRUGS FOR LATER RETAIL SALE; AND	
21	(2) HAS A LABELER CODE FROM THE U.S. FOOD AND DRUG	
22	ADMINISTRATION UNDER 21 CFR § 207.20.	
23	(D) (1) "PHARMACY BENEFITS MANAGEMENT SERVICES" MEANS THE	
24	ADMINISTRATION OR MANAGEMENT OF PRESCRIPTION DRUG BENEFITS.	
25	(2) "PHARMACY BENEFITS MANAGEMENT SERVICES" INCLUDES:	
26	(I) PROCUREMENT OF PRESCRIPTION DRUGS AT A	
27	NEGOTIATED RATE FOR DISPENSATION WITHIN THE STATE;	
28	(II) PROCESSING OF PRESCRIPTION DRUG CLAIMS;	
29	(III) ADMINISTRATION OF PAYMENTS RELATED TO	
30	PRESCRIPTION DRUG CLAIMS; AND	

1	(IV) NEGOTIATING OR ENTERING INTO CONTRACTUAL
2	ARRANGEMENTS WITH PHARMACY PROVIDERS.
3	(E) "PHARMACY BENEFITS MANAGER" MEANS A PERSON THAT
4	PERFORMS PHARMACY BENEFITS MANAGEMENT SERVICES.
5	(F) "Prospective purchaser" means a person to which a
6	PHARMACY BENEFITS MANAGER OFFERS TO PROVIDE PHARMACY BENEFITS
7	MANAGEMENT SERVICES.
0	(g) (1) "Tringviagon" agrang a program myag grampog and
8	(G) (1) "PURCHASER" MEANS A PERSON THAT ENTERS INTO AN
9 10	AGREEMENT WITH A PHARMACY BENEFITS MANAGER FOR THE PROVISION OF
LU	PHARMACY BENEFITS MANAGEMENT SERVICES.
11	(2) "PURCHASER" INCLUDES THE STATE.
12	(H) "Trade secret" has the meaning stated in § 11-1201 of the
13	Commercial Law Article.
14	15-1602.
15	(A) THE PROVISIONS OF THIS SUBTITLE DO NOT APPLY TO A MANAGED
16	CARE ORGANIZATION AUTHORIZED BY TITLE 15, SUBTITLE 1 OF THE HEALTH -
17	GENERAL ARTICLE.
18	(B) THE PROVISIONS OF THIS SUBTITLE DO NOT APPLY TO AN INSURER,
19	NONPROFIT HEALTH SERVICE PLAN, OR HEALTH MAINTENANCE ORGANIZATION,
20	OR AN AFFILIATE, SUBSIDIARY, OR OTHER RELATED ENTITY OF AN INSURER,
21	NONPROFIT HEALTH SERVICE PLAN, OR HEALTH MAINTENANCE ORGANIZATION
22	ACTING OR REPRESENTING ITSELF AS A PHARMACY BENEFITS MANAGER IF:
23	(1) THE INSURER, NONPROFIT HEALTH SERVICE PLAN, OR
24	HEALTH MAINTENANCE ORGANIZATION OR THE AFFILIATE, SUBSIDIARY, OR
25	OTHER RELATED ENTITY OF THE INSURER, NONPROFIT HEALTH SERVICE PLAN,
26	OR HEALTH MAINTENANCE ORGANIZATION DIRECTLY OFFERS OR PROVIDES
27	PHARMACY BENEFITS MANAGEMENT SERVICES; AND
28	(2) THE PHARMACY BENEFITS MANAGEMENT SERVICES ARE
29	OFFERED OR PROVIDED ONLY TO ENROLLEES, SUBSCRIBERS, OR INSUREDS
30	WHO ALSO ARE COVERED BY HEALTH BENEFITS OFFERED OR PROVIDED BY THE
31	INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH MAINTENANCE
32	OPCANIZATION

(1)

IN THE AGGREGATE;

1	(A) A PHARMACY BENEFITS MANAGER SHALL DISCLOSE TO A
2	PROSPECTIVE PURCHASER IN WRITING:
3	(1) THE AMOUNT OF ALL REBATES, ADMINISTRATIVE FEES,
$\frac{3}{4}$	DETAILING PAYMENTS, EDUCATIONAL PAYMENTS, AND OTHER RETROSPECTIVE
5	DISCOUNTS THAT THE PHARMACY BENEFITS MANAGER ESTIMATES IT WOULD
6	
7	RECEIVE, DIRECTLY OR INDIRECTLY, FROM PHARMACEUTICAL MANUFACTURERS OR LABELERS IN CONNECTION WITH PRESCRIPTION DRUG
8	BENEFITS SPECIFIC TO THE PROSPECTIVE PURCHASER, IF THE PROSPECTIVE
9	PURCHASER WERE TO CONTRACT WITH THE PHARMACY BENEFITS MANAGER;
J	TOTOTOTOTO CONTINUE I WITH THE FIRMWING I BENEFITS WENVIOLE,
10	(2) THE NATURE, TYPE, AND AMOUNT OF ALL OTHER REVENUE
11	THAT THE PHARMACY BENEFITS MANAGER ESTIMATES IT WOULD RECEIVE,
12	DIRECTLY OR INDIRECTLY, FROM PHARMACEUTICAL MANUFACTURERS OR
13	LABELERS IN CONNECTION WITH PRESCRIPTION DRUG BENEFITS SPECIFIC TO
14	THE PROSPECTIVE PURCHASER, IF THE PROSPECTIVE PURCHASER WERE TO
15	CONTRACT WITH THE PHARMACY BENEFITS MANAGER;
16	(3) ANY ADMINISTRATIVE OR OTHER FEES THAT WOULD BE
17	CHARGED BY THE PHARMACY BENEFITS MANAGER TO THE PROSPECTIVE
18	PURCHASER;
19	(4) ANY ARRANGEMENTS WITH PRESCRIBING PROVIDERS.
20	(-,,,,,,,,
21	MEDICAL GROUPS, INDIVIDUAL PRACTICE ASSOCIATIONS, PHARMACY
22	PROVIDERS, OR OTHER PERSONS THAT ARE ASSOCIATED WITH ACTIVITIES OF THE PHARMACY BENEFITS MANAGER TO ENCOURAGE FORMULARY COMPLIANCE
23	OR OTHERWISE MANAGE PRESCRIPTION DRUG BENEFITS; AND
20	ON OTHERWISE MENTION DIVER BENEFITS, AND
24	(5) A LIST OF ANY DRUGS THAT THE PHARMACY BENEFITS
25	MANAGER, DIRECTLY OR INDIRECTLY, REPACKAGED AND ASSIGNED NEW OR
26	DIFFERENT NATIONAL DRUG CODE NUMBERS INCLUDING, FOR EACH DRUG ON
27	THE LIST:
28	(I) THE DRUG NAME AND STRENGTH;
2.0	
29	(II) THE ORIGINAL NATIONAL DRUG CODE NUMBER AND
30	THE NEW NATIONAL DRUG CODE NUMBER; AND
31	(III) WHE ODICINAL DDICE AND WHE NEW DDICE
OΙ	(III) THE ORIGINAL PRICE AND THE NEW PRICE.
32	(B) THE DISCLOSURE REQUIRED UNDER SUBSECTION (A)(1) OF THIS
33	SECTION SHALL BE PROVIDED:
	SECTION SIMILIDE I IVO (IDED)

$\frac{1}{2}$	(2) FOR EACH THERAPEUTIC CLASS OF DRUGS ON A LIST OF SPECIFIED THERAPEUTIC CLASSES; AND
$\frac{3}{4}$	(3) FOR FIVE INDIVIDUAL PRESCRIBED DRUGS IN EACH THERAPEUTIC CLASS OF DRUGS AS REQUESTED BY THE PURCHASER.
5	(C) A THERAPEUTIC CLASS SHALL INCLUDE AT LEAST TWO DRUGS.
6	15-1604.
7	(A) AT LEAST QUARTERLY, A PHARMACY BENEFITS MANAGER SHALL
8	DISCLOSE TO A PURCHASER IN WRITING:
9	(1) THE AMOUNT OF ALL REBATES, ADMINISTRATIVE FEES,
10	DETAILING PAYMENTS, EDUCATIONAL PAYMENTS, AND OTHER RETROSPECTIVE
11	DISCOUNTS THAT THE PHARMACY BENEFITS MANAGER RECEIVES, DIRECTLY OR
12	INDIRECTLY, FROM PHARMACEUTICAL MANUFACTURERS OR LABELERS IN
13	CONNECTION WITH PRESCRIPTION DRUG BENEFITS SPECIFIC TO THE
14	PURCHASER;
15	(2) THE NATURE, TYPE, AND AMOUNT OF ALL OTHER REVENUE
16	THAT THE PHARMACY BENEFITS MANAGER RECEIVES, DIRECTLY OR
17	INDIRECTLY, FROM PHARMACEUTICAL MANUFACTURERS OR LABELERS IN
18	CONNECTION WITH PRESCRIPTION DRUG BENEFITS SPECIFIC TO THE
19	PURCHASER;
20	(3) ANY PRESCRIPTION DRUG UTILIZATION INFORMATION
21	RELATED TO UTILIZATION BY THE PURCHASER'S BENEFICIARIES OR
22	AGGREGATE UTILIZATION DATA THAT IS NOT SPECIFIC TO AN INDIVIDUAL
23	BENEFICIARY, PRESCRIBER, OR PURCHASER;
24	(4) ANY ADMINISTRATIVE OR OTHER FEES CHARGED BY THE
25	PHARMACY BENEFITS MANAGER TO THE PURCHASER;
26	(5) ANY ARRANGEMENTS WITH PRESCRIBING PROVIDERS,
27	MEDICAL GROUPS, INDIVIDUAL PRACTICE ASSOCIATIONS, PHARMACY
28	PROVIDERS, OR OTHER PERSONS THAT ARE ASSOCIATED WITH ACTIVITIES OF
29	THE PHARMACY BENEFITS MANAGER TO ENCOURAGE FORMULARY COMPLIANCE
30	OR OTHERWISE MANAGE PRESCRIPTION DRUG BENEFITS;
31	(6) A LIST OF ANY DRUGS THAT THE PHARMACY BENEFITS
32	MANAGER, DIRECTLY OR INDIRECTLY, REPACKAGED AND ASSIGNED NEW OR
33	DIFFERENT NATIONAL DRUG CODE NUMBERS INCLUDING, FOR EACH DRUG ON

THE LIST:

1	(I) THE DRUG NAME AND STRENGTH;
2	(II) THE ORIGINAL NATIONAL DRUG CODE NUMBER AND
3	THE NEW NATIONAL DRUG CODE NUMBER; AND
J	THE NEW INTIONIE BROW CODE NONBERGIAND
4	(HI) THE ORIGINAL PRICE AND THE NEW PRICE; AND
5	(7) A LIST OF PRESCRIPTIONS FOR WHICH THERE WAS A
6	DIFFERENCE BETWEEN THE PRICE PAID TO A RETAIL PHARMACY AND THE
7	AMOUNT THAT WAS BILLED TO THE PURCHASER INCLUDING, FOR EACH
8	PRESCRIPTION:
9	(I) THE PRESCRIPTION NUMBER;
10	(H) THE DATE THE PRESCRIPTION WAS PROCESSED BY THE
11	PHARMACY BENEFITS MANAGER;
12	(HI) THE NATIONAL DRUG CODE NUMBER;
13	(IV) THE BENEFICIARY'S NAME; AND
14	(V) THE PRICE PAID TO THE RETAIL PHARMACY AND THE
15	AMOUNT BILLED TO THE PURCHASER.
16	(b) The place of the protection there are desired (1)(1) or mind
10 17	(B) THE DISCLOSURE REQUIRED UNDER SUBSECTION (A)(1) OF THIS SECTION SHALL BE PROVIDED:
11	SECTION SHALL BE PROVIDED;
18	(1) IN THE AGGREGATE;
19	(2) FOR EACH THERAPEUTIC CLASS OF DRUGS ON A LIST OF
20	SPECIFIED THERAPEUTIC CLASSES; AND
21	(3) FOR FIVE INDIVIDUAL PRESCRIBED DRUGS IN EACH
22	THERAPEUTIC CLASS OF DRUGS AS REQUESTED BY THE PURCHASER.
23	(C) A THERAPEUTIC CLASS SHALL INCLUDE AT LEAST TWO DRUGS.
24	15–1605.
25	(A) EXCEPT FOR UTILIZATION INFORMATION, AND EXCEPT AS
26	PROVIDED IN SUBSECTION (D) OF THIS SECTION, A PHARMACY BENEFITS
² 7	MANAGER NEED NOT MAKE THE DISCLOSURES REQUIRED UNDER §§ 15–1603
28	AND 15-1604 OF THIS SUBTITLE UNLESS AND UNTIL THE PROSPECTIVE
29	PURCHASER OR THE PURCHASER AGREES IN WRITING TO MAINTAIN AS

1	CONFIDENTIAL ANY PROPRIETARY INFORMATION DISCLOSED BY THE
2	PHARMACY BENEFITS MANAGER.
3	(B) THE AGREEMENT UNDER SUBSECTION (A) OF THIS SECTION MAY:
4	(1) PROVIDE FOR EQUITABLE AND LEGAL REMEDIES IN THE
5	EVENT OF A VIOLATION OF THE AGREEMENT; AND
6	(2) INCLUDE PERSONS WITH WHICH THE PROSPECTIVE
7	PURCHASER OR PURCHASER CONTRACTS TO PROVIDE CONSULTING SERVICES
8	RELATING TO PHARMACY BENEFITS MANAGEMENT SERVICES.
9	(C) PROPRIETARY INFORMATION INCLUDES:
10	(1) TRADE SECRETS; AND
l1	(2) INFORMATION ABOUT PRICING, COSTS, REVENUES, TAXES,
12	MARKET SHARE, NEGOTIATING STRATEGIES, CUSTOMERS, AND PERSONNEL
13	HELD BY A PHARMACY BENEFITS MANAGER AND USED FOR ITS BUSINESS
L 4	PURPOSES.
15	(D) THIS SECTION DOES NOT DIMINISH THE AUTHORITY OF THE OFFICE
l 6	OF THE ATTORNEY GENERAL OR THE COMMISSIONER TO OBTAIN INFORMATION
L 7	AND USE THE INFORMATION IN ANY PROCEEDING.
18	15–1606.
L9	A CONTRACT EXECUTED BY A PHARMACY BENEFITS MANAGER FOR THE
20	PROVISION OF PHARMACY BENEFITS MANAGEMENT SERVICES SHALL INCLUDE:
21	(1) THE AMOUNT OF THE TOTAL REVENUES, REBATES, AND
22	DISCOUNTS IDENTIFIED IN §§ 15-1603 AND 15-1604 OF THIS SUBTITLE THAT
23	WILL BE PASSED ON TO THE PURCHASER;
24	(2) THE MAXIMUM ALLOWABLE COST AND AVERAGE WHOLESALE
25	PRICE RESOURCES USED TO DETERMINE THE PRICE PAID TO A PHARMACY AND
26	BILLED TO THE PURCHASER;
27	(3) THE CONDITIONS UNDER WHICH BENEFICIARY UTILIZATION
28	DATA MAY BE DISCLOSED OR SOLD BY THE PHARMACY BENEFITS MANAGER TO
29	ANY PERSON OTHER THAN THE PURCHASER;

(4) ANY ADMINISTRATIVE OR OTHER FEES:

30

1	(I)	CHARGED BY THE PHARMACY BENEFITS MANAGER TO
2	THE PURCHASER; OR	
3	(II)	COLLECTED BY THE PHARMACY BENEFITS MANAGER ON
4	BEHALF OF THE PURCE	
_	DELINE OF THE PORT	
5	(5) (1)	THE CONDITIONS UNDER WHICH AN AUDIT WILL BE
6	CONDUCTED OF THE	CONTRACT FOR PHARMACY BENEFITS MANAGEMENT
7	SERVICES;	
8	(11)	WHO WILL COMPLICE THE AUDIT, AND
0	(11)	WHO WILL CONDUCT THE AUDIT; AND
9	(III)	WHO WILL PAY FOR THE AUDIT;
	(/	,
10	(6) ANY	REVENUES, REBATES, OR DISCOUNTS RECEIVED,
11	DIRECTLY OR INDIRE	CTLY, BY THE PHARMACY BENEFITS MANAGER FROM
12	PERSONS OTHER THA	N PHARMACEUTICAL MANUFACTURERS AND LABELERS
13	THAT ARE SPECIFIC TO) THE PHARMACY BENEFITS MANAGEMENT SERVICES TO
14	BE PROVIDED TO THE I	PURCHASER;
15	(7) THE	PROCESS FOR THE DEVELOPMENT OF FORMULARIES,
16		NGES TO FORMULARIES, AND APPROVAL OF CHANGES BY
17	THE PURCHASER; AND	
	,	
18	(8) AN A	GREEMENT TO PROVIDE TO THE PURCHASER A LIST OF
19	PRESCRIPTIONS FOR V	VIIICH THERE WAS A DIFFERENCE BETWEEN THE PRICE
20	PAID TO A RETAIL PHA	RMACY AND THE AMOUNT THAT WILL BE OR WAS BILLED
21	TO THE PURCHASER IN	CLUDING, FOR EACH PRESCRIPTION:
22	(I)	THE PRESCRIPTION NUMBER;
23	(II)	THE DATE THE PRESCRIPTION DRUG WAS PROCESSED
$\frac{25}{24}$	BY THE PHARMACY BE	
4 1	157 — 1115 — 1131 (70 74 (57 — 57 57)	VEFTIS MANUACIT
25	(III)	THE NATIONAL DRUG CODE NUMBER;
26	(IV)	THE BENEFICIARY'S NAME; AND
27	(V)	THE PRICE PAID TO THE RETAIL PHARMACY AND THE
28	AMOUNT BILLED TO TH	
29	15-1607.	

1	ALL DISCLOSURES MADE UNDER THIS SUBTITLE SHALL COMPLY WITH
2	THE PRIVACY STANDARDS OF THE FEDERAL HEALTH INSURANCE PORTABILITY
3	AND ACCOUNTABILITY ACT.
4	15-1608.
5	On or before April 1, 2009, the Commissioner shall adopt
6	REGULATIONS TO IMPLEMENT THIS SUBTITLE.
7	15-1609.
8	(A) THE COMMISSIONER MAY ASSESS A CIVIL PENALTY NOT EXCEEDING
9	\$10,000 FOR EACH VIOLATION OF THIS SUBTITLE.
10	(B) IN ADDITION TO OR INSTEAD OF ASSESSING A CIVIL PENALTY, THE
11	COMMISSIONER MAY REQUIRE THE PHARMACY BENEFITS MANAGER TO MAKE
12	RESTITUTION TO ANY PERSON WHO HAS SUFFERED FINANCIAL INJURY BECAUSE
13	OF THE VIOLATION OF THIS SUBTITLE.
14	<u>15–1601.</u>
15	(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
16	INDICATED.
17	(B) "BENEFICIARY" MEANS AN INDIVIDUAL WHO RECEIVES
18	PRESCRIPTION DRUG COVERAGE OR BENEFITS FROM A PURCHASER.
19	(C) "ERISA" HAS THE MEANING STATED IN § 8–301 OF THIS ARTICLE.
20	(D) (1) "MANUFACTURER PAYMENTS" MEANS ANY COMPENSATION
21	OR REMUNERATION A PHARMACY BENEFITS MANAGER RECEIVES FROM OR ON
22	BEHALF OF A PHARMACEUTICAL MANUFACTURER.
23	(2) "MANUFACTURER PAYMENTS" INCLUDES:
24	(I) PAYMENTS RECEIVED IN ACCORDANCE WITH
25	AGREEMENTS WITH PHARMACEUTICAL MANUFACTURERS FOR FORMULARY
26	PLACEMENT AND, IF APPLICABLE, DRUG UTILIZATION;
_•	
27	(II) REBATES, REGARDLESS OF HOW CATEGORIZED;
28	(III) MARKET SHARE INCENTIVES;
29	(IV) COMMISSIONS;

1	(V) FEES UNDER PRODUCTS AND SERVICES AGREEMENTS;
2 3	(VI) ANY FEES RECEIVED FOR THE SALE OF UTILIZATION DATA TO A PHARMACEUTICAL MANUFACTURER; AND
4	(VII) ADMINISTRATIVE OR MANAGEMENT FEES.
5 6	(3) "MANUFACTURER PAYMENTS" DOES NOT INCLUDE PURCHASE DISCOUNTS BASED ON INVOICED PURCHASE TERMS.
7 8	(E) "Nonprofit health maintenance organization" has the meaning stated in § 6–121(a) of this article.
9	(F) (1) "PHARMACY BENEFITS MANAGEMENT SERVICES" MEANS:
10 11	(I) THE PROCUREMENT OF PRESCRIPTION DRUGS AT A NEGOTIATED RATE FOR DISPENSATION WITHIN THE STATE TO BENEFICIARIES;
12 13 14	(II) THE ADMINISTRATION OR MANAGEMENT OF PRESCRIPTION DRUG COVERAGE PROVIDED BY A PURCHASER FOR BENEFICIARIES; AND
15 16	(III) ANY OF THE FOLLOWING SERVICES PROVIDED WITH REGARD TO THE ADMINISTRATION OF PRESCRIPTION DRUG COVERAGE:
17	1. MAIL SERVICE PHARMACY;
18 19 20	2. CLAIMS PROCESSING, RETAIL NETWORK MANAGEMENT, AND PAYMENT OF CLAIMS TO PHARMACIES FOR PRESCRIPTION DRUGS DISPENSED TO BENEFICIARIES;
21 22	3. <u>CLINICAL FORMULARY DEVELOPMENT AND MANAGEMENT SERVICES</u> ;
23	4. REBATE CONTRACTING AND ADMINISTRATION;
24 25	5. PATIENT COMPLIANCE, THERAPEUTIC INTERVENTION, AND GENERIC SUBSTITUTION PROGRAMS; OR
26	6. <u>DISEASE MANAGEMENT PROGRAMS.</u>
27 28 29 30	(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:

1	(I) IS PROVIDED SOLELY TO A MEMBER OF THE NONPROFIT
2	HEALTH MAINTENANCE ORGANIZATION; AND
3	(II) IS FURNISHED THROUGH THE INTERNAL PHARMACY
4	OPERATIONS OF THE NONPROFIT HEALTH MAINTENANCE ORGANIZATION.
	OI DIWITTOTIC OF TIME IVOITE WOLLT TIME WITH VEHICLE CHAIR TENTED TO
5	(G) "PHARMACY BENEFITS MANAGER" MEANS A PERSON THAT
6	PERFORMS PHARMACY BENEFITS MANAGEMENT SERVICES.
7	(H) "PROPRIETARY INFORMATION" MEANS:
8	(1) A TRADE SECRET;
9	(2) CONFIDENTIAL COMMERCIAL INFORMATION; OR
10	(3) CONFIDENTIAL FINANCIAL INFORMATION.
1	(I) (1) "PURCHASER" MEANS THE STATE EMPLOYEE AND RETIREE
12	HEALTH AND WELFARE BENEFITS PROGRAM, AN INSURER, A NONPROFIT
13	HEALTH SERVICE PLAN, OR A HEALTH MAINTENANCE ORGANIZATION THAT:
l4 l5	(I) PROVIDES PRESCRIPTION DRUG COVERAGE OR
LU	BENEFITS IN THE STATE; AND
16	(II) ENTERS INTO AN AGREEMENT WITH A PHARMACY
L 7	BENEFITS MANAGER FOR THE PROVISION OF PHARMACY BENEFITS
L8	MANAGEMENT SERVICES.
19	(2) "PURCHASER" DOES NOT INCLUDE A PERSON THAT PROVIDES
	PRESCRIPTION DRUG COVERAGE OR BENEFITS THROUGH PLANS SUBJECT TO
21	ERISA AND DOES NOT PROVIDE PRESCRIPTION DRUG COVERAGE OR BENEFITS
22	THROUGH INSURANCE, UNLESS THE PERSON IS A MULTIPLE EMPLOYER
23	WELFARE ARRANGEMENT AS DEFINED IN § 514(B)(6)(A)(II) OF ERISA.
) 1	(1) "Departe quadrug governage" agrang a governage provincia
24 25	(J) "REBATE SHARING CONTRACT" MEANS A CONTRACT BETWEEN A PHARMACY BENEFITS MANAGER AND A PURCHASER UNDER WHICH THE
26	PHARMACY BENEFITS MANAGER AGREES TO SHARE MANUFACTURER PAYMENTS
27	WITH THE PURCHASER.
28	(K) "TRADE SECRET" HAS THE MEANING STATED IN § 11–1201 OF THE
29	COMMERCIAL LAW ARTICLE.

<u>15–1602.</u>

1	THE PROVISIONS OF §§ 15–1603 THROUGH 15–1606 OF THIS SUBTITLE DO
2	NOT APPLY TO A PHARMACY BENEFITS MANAGER WHEN PROVIDING PHARMACY
3	BENEFITS MANAGEMENT SERVICES TO A PURCHASER THAT IS AFFILIATED WITH
4	THE PHARMACY BENEFITS MANAGER THROUGH COMMON OWNERSHIP WITHIN
5	AN INSURANCE HOLDING COMPANY.
	ANT THE COMMITTEE OF THE CONTRACTOR OF THE CONTR
6	<u>15–1603.</u>
7	(A) BEFORE ENTERING INTO A CONTRACT WITH A PURCHASER, A
8	PHARMACY BENEFITS MANAGER:
O	I HAIMIAGI DENEFTIS MANAGER.
9	(1) AS APPLICABLE, SHALL INFORM THE PURCHASER THAT THE
10	PHARMACY BENEFITS MANAGER MAY:
10	I HARMAOT DENETTIS MANAGERMAT.
11	(I) SOLICIT AND RECEIVE MANUFACTURER PAYMENTS;
	<u> </u>
12	(II) PASS THROUGH OR RETAIN THE MANUFACTURER
13	PAYMENTS DEPENDING ON THE CONTRACT TERMS WITH A PURCHASER;
	THE WILLIAM STATES OF THE CONTINUE TO THE WILLIAM WITH THE CHOLD SHOW,
14	(III) SELL AGGREGATE UTILIZATION INFORMATION; AND
	(AII)
15	(IV) SHARE AGGREGATE UTILIZATION INFORMATION WITH
16	OTHER ENTITIES; AND
	
17	(2) SHALL OFFER TO PROVIDE TO THE PURCHASER A REPORT
18	THAT CONTAINS THE:
	_
19	(I) NET REVENUE OF THE PHARMACY BENEFITS MANAGER
20	FROM SALES OF PRESCRIPTION DRUGS TO PURCHASERS MADE THROUGH THE
21	PHARMACY BENEFITS MANAGER'S NETWORK OF CONTRACTUALLY AFFILIATED
22	RETAIL PHARMACIES OR THROUGH THE PHARMACY BENEFITS MANAGER'S MAIL
23	ORDER PHARMACIES, WITH RESPECT TO THE PHARMACY BENEFITS MANAGER'S
24	ENTIRE CLIENT BASE OF PURCHASERS; AND
25	(II) AMOUNT OF ALL MANUFACTURER PAYMENTS EARNED
26	BY THE PHARMACY BENEFITS MANAGER.
27	(B) (1) If A PURCHASER REQUESTS THE INFORMATION DESCRIBED
28	IN SUBSECTION (A)(2) OF THIS SECTION, A PHARMACY BENEFITS MANAGER
29	SHALL PROVIDE THE INFORMATION BEFORE ENTERING INTO A CONTRACT WITH
30	THE PURCHASER.
- •	ALLE A VAVOIDIMINIO
31	(2) NOTWITHSTANDING THE PROVISIONS OF PARAGRAPH (1) OF
32	THIS SUBSECTION, IF A PHARMACY BENEFITS MANAGER REQUIRES A
	III III III III III III III III I

NONDISCLOSURE AGREEMENT UNDER WHICH A PURCHASER AGREES THAT THE

- 1 INFORMATION DESCRIBED IN SUBSECTION (A)(2) OF THIS SECTION IS
- 2 PROPRIETARY INFORMATION, THE PHARMACY BENEFITS MANAGER MAY NOT BE
- 3 REQUIRED TO PROVIDE THE INFORMATION UNTIL THE PURCHASER HAS SIGNED
- 4 THE NONDISCLOSURE AGREEMENT.
- 5 **15–1604.**
- 6 (A) IF A PURCHASER HAS A REBATE SHARING CONTRACT, A PHARMACY
- 7 BENEFITS MANAGER SHALL OFFER TO PROVIDE THE PURCHASER A REPORT FOR
- 8 EACH FISCAL QUARTER AND EACH FISCAL YEAR THAT CONTAINS THE AMOUNT
- 9 **OF THE:**
- 10 (1) NET REVENUE OF THE PHARMACY BENEFITS MANAGER FROM
- 11 SALES OF PRESCRIPTION DRUGS TO PURCHASERS MADE THROUGH THE
- 12 PHARMACY BENEFITS MANAGER'S NETWORK OF CONTRACTUALLY AFFILIATED
- 13 RETAIL PHARMACIES OR THROUGH THE PHARMACY BENEFITS MANAGER'S MAIL
- 14 ORDER PHARMACIES, WITH RESPECT TO THE PHARMACY BENEFITS MANAGER'S
- 15 <u>ENTIRE CLIENT BASE OF PURCHASERS</u>;
- 16 (2) TOTAL PRESCRIPTION DRUG EXPENDITURES APPLICABLE TO
- 17 THE PURCHASER;
- 18 (3) TOTAL MANUFACTURER PAYMENTS EARNED BY THE
- 19 PHARMACY BENEFITS MANAGER DURING THE APPLICABLE REPORTING PERIOD;
- 20 **AND**
- 21 (4) TOTAL REBATES APPLICABLE TO THE PURCHASER DURING
- 22 THE APPLICABLE REPORTING PERIOD.
- 23 (B) If the exact amount of each item to be reported under
- 24 SUBSECTION (A) OF THIS SECTION IS NOT KNOWN BY THE PHARMACY BENEFITS
- 25 MANAGER AT THE TIME OF ITS REPORT, THE PHARMACY BENEFITS MANAGER
- 26 SHALL OFFER TO PROVIDE:
- 27 (1) ITS CURRENT BEST ESTIMATE OF THE AMOUNT OF EACH ITEM;
- 28 **AND**
- 29 (2) AN UPDATED REPORT CONTAINING THE EXACT AMOUNT OF
- 30 EACH ITEM IMMEDIATELY AFTER IT BECOMES AVAILABLE.
- 31 (C) (1) A PHARMACY BENEFITS MANAGER SHALL PROVIDE THE
- 32 INFORMATION DESCRIBED IN SUBSECTIONS (A) AND (B) OF THIS SECTION IF
- 33 REQUESTED BY THE PURCHASER.

1	(2) NOTWITHSTANDING THE PROVISIONS OF PARAGRAPH (1) OF
2	THIS SUBSECTION, IF A PHARMACY BENEFITS MANAGER REQUIRES A
3	NONDISCLOSURE AGREEMENT UNDER WHICH A PURCHASER AGREES THAT THE
4	INFORMATION IN SUBSECTIONS (A) AND (B) OF THIS SECTION IS PROPRIETARY
5	INFORMATION, THE PHARMACY BENEFITS MANAGER MAY NOT BE REQUIRED TO
6	PROVIDE THE INFORMATION UNTIL THE PURCHASER HAS SIGNED THE
7	NONDISCLOSURE AGREEMENT.
8	<u>15–1605.</u>
9	THIS SUBTITLE DOES NOT DIMINISH THE AUTHORITY OF THE OFFICE OF
10	THE ATTORNEY GENERAL OR THE COMMISSIONER TO OBTAIN INFORMATION
11	RELATING TO A PHARMACY BENEFITS MANAGER AND USE THE INFORMATION IN
12	ANY PROCEEDING.
13	Article – Health – General
14	19–706.
15	(PPP) THE PROVISIONS OF TITLE 15, SUBTITLE 16 OF THE INSURANCE
16	ARTICLE APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.
17 18	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2008.
	Approved:
	Governor.
	President of the Senate.

Speaker of the House of Delegates.