HOUSE BILL 880

J5 EMERGENCY BILL 4lr2605 HB 382/23 - HGO CF 4lr2729

By: Delegates S. Johnson and A. Johnson

Introduced and read first time: February 2, 2024 Assigned to: Health and Government Operations

A BILL ENTITLED

4	A TAT		•
l	AN	ACT	concerning

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Pharmacy Benefits Administration – Maryland Medical Assistance Program and
Pharmacy Benefits Managers

- FOR the purpose of altering the reimbursement levels for drug products that the Maryland Medical Assistance Program is required to establish and that pharmacy benefits managers that contract with a pharmacy on behalf of a managed care organization are required to reimburse the pharmacy; altering the definition of "purchaser" for purposes of certain provisions of law regulating pharmacy benefits managers to include certain insurers, nonprofit health service plans, and health maintenance organizations; and generally relating to pharmacy benefits administration.
- 11 BY repealing and reenacting, with amendments,
- 12 Article Health General
- 13 Section 15–118(b)
- 14 Annotated Code of Maryland
- 15 (2023 Replacement Volume)
- 16 BY adding to
- 17 Article Health General
- 18 Section 15–118(f)
- 19 Annotated Code of Maryland
- 20 (2023 Replacement Volume)
- 21 BY repealing and reenacting, with amendments,
- 22 Article Insurance
- 23 Section 15–1601(s)
- 24 Annotated Code of Maryland
- 25 (2017 Replacement Volume and 2023 Supplement)
- 26 BY adding to
- 27 Article Insurance

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



- 1 Section 15–1632 2 Annotated Code of Maryland 3 (2017 Replacement Volume and 2023 Supplement) SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, 4 That the Laws of Maryland read as follows: 5 6 Article - Health - General 7 15–118. 8 [Except] Subject to Paragraph (2) of this subsection and **EXCEPT** as provided under paragraph [(2)] (3) of this subsection, the Program shall 9 establish [maximum] reimbursement levels for the drug products for which there is a 10 generic equivalent authorized under § 12–504 of the Health Occupations Article, based on 11 12 the cost of the generic product]. 13 EXCEPT AS PROVIDED IN PARAGRAPH (4) OF THIS SUBSECTION, 14 MINIMUM REIMBURSEMENT LEVELS ESTABLISHED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL BE AT LEAST EQUAL TO THE NATIONAL AVERAGE DRUG 15 ACQUISITION COST OF THE GENERIC PRODUCT PLUS THE FEE-FOR-SERVICE 16 PROFESSIONAL DISPENSING FEE DETERMINED BY THE DEPARTMENT IN 17 ACCORDANCE WITH THE MOST RECENT IN-STATE COST-OF-DISPENSING SURVEY. 18 19 [If] EXCEPT AS PROVIDED IN PARAGRAPH (4) OF THIS 20 SUBSECTION, IF a prescriber directs a specific brand name drug, the reimbursement level shall be based on the [cost] NATIONAL AVERAGE DRUG ACQUISITION COST of the 21brand name product PLUS THE FEE-FOR-SERVICE PROFESSIONAL DISPENSING FEE 22 DETERMINED BY THE DEPARTMENT IN ACCORDANCE WITH THE MOST RECENT 23 24IN-STATE COST-OF-DISPENSING SURVEY. PARAGRAPHS (2) AND (3) OF THIS SUBSECTION DO NOT APPLY TO: 25 **(4)** 26 **(I)** A PHARMACY OWNED BY, OR UNDER THE SAME CORPORATE 27 AFFILIATION, AS A PHARMACY BENEFITS MANAGER; OR
- 28 (II)A MAIL ORDER PHARMACY.
- 29 THE PROVISIONS OF § 15–1632 OF THE INSURANCE ARTICLE APPLY TO 30 A MANAGED CARE ORGANIZATION THAT USES A PHARMACY BENEFITS MANAGER TO 31 MANAGE PRESCRIPTION DRUG COVERAGE BENEFITS ON BEHALF OF THE MANAGED 32 CARE ORGANIZATION.

- 1 15–1601.
- 2 (s) (1) "Purchaser" means a person that offers a plan or program in the State,
- 3 including the State Employee and Retiree Health and Welfare Benefits Program, AN
- 4 INSURER, A NONPROFIT HEALTH SERVICE PLAN, OR A HEALTH MAINTENANCE
- 5 **ORGANIZATION,** that:
- 6 [(1)] (I) provides prescription drug coverage or benefits in the State; and
- 7 [(2)] (II) enters into an agreement with a pharmacy benefits manager for
- 8 the provision of pharmacy benefits management services.
- 9 (2) "PURCHASER" DOES NOT INCLUDE A NONPROFIT HEALTH
- 10 MAINTENANCE ORGANIZATION THAT:
- 11 (I) OPERATES AS A GROUP MODEL;
- 12 (II) PROVIDES SERVICES SOLELY TO A MEMBER OR PATIENT OF
- 13 THE NONPROFIT HEALTH MAINTENANCE ORGANIZATION; AND
- 14 (III) FURNISHES SERVICES THROUGH THE INTERNAL PHARMACY
- 15 OPERATIONS OF THE NONPROFIT HEALTH MAINTENANCE ORGANIZATION.
- 16 **15–1632.**
- A PHARMACY BENEFITS MANAGER THAT CONTRACTS WITH A PHARMACY ON
- 18 BEHALF OF A MANAGED CARE ORGANIZATION, AS DEFINED IN § 15–101 OF THE
- 19 HEALTH GENERAL ARTICLE, SHALL REIMBURSE THE PHARMACY AN AMOUNT
- 20 THAT IS AT LEAST EQUAL TO THE NATIONAL AVERAGE DRUG ACQUISITION COST
- 21 PLUS THE FEE-FOR-SERVICE PROFESSIONAL DISPENSING FEE DETERMINED BY THE
- 22 MARYLAND DEPARTMENT OF HEALTH FOR THE MARYLAND MEDICAL ASSISTANCE
- 23 Program in accordance with the most recent in-State
- 24 COST-OF-DISPENSING SURVEY.
- 25 SECTION 2. AND BE IT FURTHER ENACTED, That this Act is an emergency
- 26 measure, is necessary for the immediate preservation of the public health or safety, has
- been passed by a yea and nay vote supported by three-fifths of all the members elected to
- 28 each of the two Houses of the General Assembly, and shall take effect from the date it is
- 29 enacted.