- 1 SB344
- 2 211975-1
- 3 By Senators Butler and Beasley
- 4 RFD: Banking and Insurance
- 5 First Read: 16-MAR-21

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8	SYNOPSIS:	Under existing law, pharmacy benefits
9		managers must be licensed by the Department of
10		Insurance. Pharmacy benefits managers provide
11		claims processing services or prescription drug and
12		other pharmacist services, or both, to health
13		benefit plans.
14		This bill would require insureds to receive
15		certain prescription drug rebates and discounts.
16		This bill would prohibit a pharmacy benefits
17		manager from reimbursing a pharmacy in an amount
18		less than the amount the pharmacy benefits manager
19		reimburses an affiliated pharmacy of the pharmacy
20		benefits manager and from paying a pharmacy for
21		prescription drugs an amount different than the
22		amount the pharmacy benefits manager contracted
23		with the health benefit plan to charge the health
24		benefit plan for those same prescription drugs.
25		This bill would prohibit a pharmacy benefits
26		manager from requiring or steering an insured to

use a mail-order pharmacy or a pharmacy affiliated

1 with a pharmacy benefits manager, with certain 2 exceptions. This bill would require a pharmacy benefits 3 manager to act as a fiduciary and annually report 4 5 drug rebate information to health insurers and 6 health benefit plans. 7 This bill would prohibit a pharmacy benefits 8 manager from imposing conditions to influence an insured in selecting a certain pharmacy or 9 10 otherwise limiting an insured's ability to select a pharmacy of his or her choice. 11 12 This bill would prohibit a pharmacy benefits 13 manager from limiting certain powers of a pharmacy 14 or pharmacist to provide pharmacist services to 15 insureds. 16 This bill would provide further for the 17 Commissioner of Insurance to enforce laws relating 18 to pharmacy benefits managers and would provide civil penalties for violations. 19 2.0 This bill would also provide conforming 21 changes to definitions. 22 23 A BILL 24 TO BE ENTITLED 25 AN ACT

1 Relating to health care; to amend Sections 3 through 2 5 of Act 2019-457, 2019 Regular Session, now appearing as Sections 27-45A-3, 27-45A-4, and 27-45A-5, Code of Alabama 3 1975; to amend and renumber Section 6 of Act 2019-457, 2019 4 5 Regular Session, now appearing as Section 27-45A-6, Code of Alabama 1975; and to add Sections 27-45A-6, 27-45A-7, 6 27-45A-8, 27-45A-9, 27-45A-10, 27-45A-11, and 27-45A-13 to the 7 Code of Alabama 1975; to renumber Section 7 of Act 2019-457, 8 9 2019 Regular Session, now appearing as Section 27-45A-7, Code 10 of Alabama 1975; to require insureds to receive certain prescription drug rebates and discounts; to prohibit a 11 pharmacy benefits manager from reimbursing a pharmacy in an 12 13 amount less than the amount the pharmacy benefits manager reimburses an affiliated pharmacy of the pharmacy benefits 14 15 manager and from paying a pharmacy for prescription drugs an amount different than the contracted amount; to prohibit 16 17 pharmacy benefits managers from steering an insured to use a 18 mail-order pharmacy or a pharmacy benefits manager affiliate, with certain exceptions; to require a pharmacy benefits 19 20 manager to act as a fiduciary to its clients and report 21 certain drug rebates; to prohibit pharmacy benefits managers 22 from limiting an insured's ability to select a pharmacy of his 23 or her choice; to prohibit a pharmacy benefits manager from 24 limiting certain powers of a pharmacy or pharmacist; to revise 25 definitions; to provide further for the Commissioner of Insurance to enforce laws relating to pharmacy benefits 26

1	managers; and to provide civil penalties for certain
2	violations; and to make conforming changes to definitions.
3	BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:
4	Section 1. Sections 3 through 5 of Act 2019-457,
5	2019 Regular Session, now appearing as Sections 27-45A-3,
6	27-45A-4, and 27-45A-5, Code of Alabama 1975, are amended to
7	read as follows:
8	"\$27-45A-3.
9	"For purposes of this chapter, the following words
10	shall have the following meanings:
11	"(1) CLAIMS PROCESSING SERVICES. The administrative
12	services performed in connection with the processing and
13	adjudicating of claims relating to pharmacist services that
14	include any of the following:
15	"a. Receiving payments for pharmacist services.
16	"b. Making payments to pharmacists or pharmacies for
17	pharmacist services.
18	"c. Both paragraphs a. and b.
19	"(2) CLIENT. A health insurer, payor, or health
20	benefit plan.
21	"(3) COVERED INDIVIDUAL. Any individual or family
22	member covered under a health benefit plan.
23	"(4) ENROLLEE. An individual named on a policy or
24	certificate of coverage under a health benefit plan.
25	"(5) HEALTH BENEFIT PLAN. As defined in Section
26	27-54A-2.

1	" $\frac{(2)}{(6)}$ OTHER PRESCRIPTION DRUG OR DEVICE SERVICES.
2	Services, other than claims processing services, provided
3	directly or indirectly, whether in connection with or separate
4	from claims processing services, including without limitation,
5	but not limited to, any of the following:
6	"a. Negotiating rebates, discounts, or other
7	financial incentives and arrangements with drug companies.
8	"b. Disbursing or distributing rebates.
9	"c. Managing or participating in incentive programs
10	or arrangements for pharmacist services.
11	"d. Negotiating or entering into contractual
12	arrangements with pharmacists or pharmacies, or both.
13	"e. Developing formularies.
14	"f. Designing prescription benefit programs.
15	"g. Advertising or promoting services.
16	" (3) (7) PHARMACIST. An individual licensed as a
17	pharmacist by the State Board of Pharmacy As defined in
18	<u>Section 34-23-1</u> .
19	" $\frac{(4)}{(8)}$ PHARMACIST SERVICES. Products, goods, and
20	services, or any combination of products, goods, and services,
21	provided as a part of the practice of pharmacy.
22	"(5)(9) PHARMACY. The place licensed by the State
23	Board of Pharmacy in which drugs, chemicals, medicines,
24	prescriptions, and poisons are compounded, dispensed, or sold
25	at retail As defined in Section 34-23-1.
26	"(6)(10) PHARMACY BENEFITS MANAGER. a. A person,
27	business, or entity, including a wholly or partially owned or

1 controlled subsidiary of a pharmacy benefits manager, that 2 provides claims processing services or other prescription drug 3 or device services, or both, to covered individuals who are employed in or are residents of this state, for health benefit 4 5 plans. "b. Pharmacy benefits manager does not include any 6 7 of the following: "1. A healthcare facility licensed in Alabama this 8 9 state. 10 "2. A healthcare professional licensed in Alabama 11 this state. "3. A consultant who only provides advice as to the 12 13 selection or performance of a pharmacy benefits manager. 14 "(11) PHARMACY BENEFITS MANAGER AFFILIATE. A pharmacy or pharmacist that, directly or indirectly, through 15 one or more intermediaries, is owned or controlled by, or is 16 17 under common ownership or control with a pharmacy benefits 18 manager. "\$27-45A-4. 19 20 "(a) (1) Effective January 1, 2020, to conduct 21 business in this state, a pharmacy benefits manager must be licensed by the commissioner. To initially obtain a license or 22 23 renew a license, a pharmacy benefits manager shall submit all 24 of the following: 25 "a.(1) A nonrefundable fee not to exceed \$500 five

hundred dollars (\$500).

- "b.(2) A copy of the licensee's corporate charter,

 articles of incorporation, or other charter document.
- "c.(3) A completed licensure form adopted by the

 commissioner containing:

5 "1.a. The name and address of the licensee.

"2.b. The name, address, and official position of an employee who will serve as the primary contact for the Department of Insurance.

"3.c. Any additional contact information deemed appropriate by the commissioner or reasonably necessary to verify the information contained in the application.

"(2) The licensee shall inform the commissioner by any means acceptable to the commissioner of any change in the information required by this subsection within 30 days of the change. Failure to timely inform the commissioner of a change shall result in a penalty against the licensee in the amount of fifty dollars (\$50).

"(3)(b) Upon receipt of a completed licensure form and the licensure fee, the commissioner shall issue a license. The license may be in paper or electronic form and shall clearly indicate the expiration date of the licensure. Licenses are nontransferable. Notwithstanding any provision of law to the contrary, the licensure form and license shall be public records.

"(4) (c) The license shall be initially renewed in accordance with a schedule prescribed by the commissioner and shall thereafter be subject to renewal on a biennial basis.

The commissioner shall adopt by rule an initial licensure fee not to exceed five hundred dollars (\$500) and a renewal fee not to exceed five hundred dollars (\$500), both of which shall be nonrefundable.

"(d) The licensee shall inform the commissioner by any means acceptable to the commissioner of any change in the information required under subsection (a) within 30 days of the change. Failure to timely inform the commissioner of a change shall result in a civil penalty against the licensee in the amount of fifty dollars (\$50).

"(e) The commissioner may revoke or suspend a license or may impose civil penalties for a violation of this chapter, as determined by the commissioner in accordance with rules adopted by the commissioner.

"(5)(f) All documents, materials, or other information, and copies thereof, in the possession or control of the department that are obtained by or disclosed to the commissioner or any other person in the course of an application, examination, or investigation made pursuant to this chapter shall be confidential by law and privileged, shall not be subject to any open records, freedom of information, sunshine, or other public record disclosure laws, and shall not be subject to subpoena or discovery. This subdivision only applies to disclosure of confidential documents by the department and does not create any privilege in favor of any other party.

1	"(g)(1) Fees collected pursuant to this section
2	shall be deposited in the State Treasury to the credit of the
3	Insurance Department Fund.
4	"(2) Civil penalties collected pursuant to this
5	chapter shall be deposited in the State Treasury to the credit
6	of the State General Fund.
7	"\$27-45A-5.
8	" (a) A pharmacy or pharmacist may provide a covered
9	person with information regarding the amount of the covered
10	person's cost share for a prescription drug. Neither a
11	pharmacy nor a pharmacist shall be proscribed by a pharmacy
12	benefits manager from discussing any such information or for
13	selling a more affordable alternative to the covered person if
14	such an alternative is available.
15	"(b) A health benefit plan that covers prescription
16	drugs may not include a provision that requires an enrollee to
17	make a payment for a prescription drug at the point of sale in
18	an amount that exceeds the lessor of the following:
19	"(1) the <u>The</u> contracted co-payment <u>copayment</u> amount;
20	or .
21	"(2) $\frac{\text{the}}{\text{The}}$ amount an individual would pay for a
22	prescription if that individual were paying with cash.
23	"(c) For purposes of this section, the following
24	words have the following meanings:
25	"(1) COVERED PERSON. Any individual, family, or
26	family member on whose behalf third-party payment or

_	prepayment of neutrin of medical expenses is provided under a
2	health benefit plan.
3	" (2) ENROLLEE. A person named on a policy or
4	certificate of coverage under a health benefit plan.
5	" (3) HEALTH BENEFIT PLAN. As defined in Section
6	27-54A-2. "
7	Section 2. Sections 27-45A-6, 27-45A-7, 27-45A-8,
8	27-45A-9, 27-45A-10, and 27-45A-11, are added to the Code of
9	Alabama 1975, to read as follows:
10	\$27-45A-6.
11	A pharmacy or pharmacist may provide a covered
12	individual with information regarding the amount of the
13	covered individual's cost share for a prescription drug.
14	\$27-45A-7.
15	A pharmacy benefits manager may not do either of the
16	following:
17	(1) Reimburse a pharmacy or pharmacist in the state
18	an amount less than the amount that the pharmacy benefits
19	manager reimburses a pharmacy benefits manager affiliate for
20	providing the same pharmacist services.
21	(2) Conduct spread pricing in this state. For
22	purposes of this subdivision, "spread pricing" means the model
23	of prescription drug pricing in which a pharmacy benefits
24	manager charges a health benefit plan a contracted price for
25	prescription drugs, and the contract price for the
26	prescription drugs differs from the amount the pharmacy

benefits manager, directly or indirectly, pays the pharmacy or
pharmacist for pharmacist services.

3 \$27-45A-8.

- (a) A pharmacy benefits manager may not do any of the following:
 - (1) Require a covered individual, as a condition of payment or reimbursement, to purchase pharmacist services, including, but not limited to, prescription drugs, exclusively through a mail-order pharmacy or pharmacy benefits manager affiliate.
 - (2) Use a covered individual's pharmacy services data collected pursuant to the provision of claims processing services for the purpose of soliciting, marketing, or referring the covered individual to a mail-order pharmacy or pharmacy benefits manager affiliate, provided this subdivision shall not limit a health benefit plan's use of pharmacy services data for the purpose of administering the health benefit plan.
 - (3) Order a covered individual, orally or in writing, including through online messaging, to a mail-order pharmacy or pharmacy benefits manager affiliate.
 - (4) Offer or implement plan designs that require a covered individual to use a mail-order pharmacy or pharmacy benefits manager affiliate.
 - (5) Offer or implement plan designs that increase plan or patient costs if the covered individual chooses not to use a mail-order pharmacy or pharmacy benefits manager

affiliate. The prohibition in this subdivision includes
requiring a covered individual to pay the full cost for a
prescription drug when the covered individual chooses not to
use a mail-order pharmacy or pharmacy benefits manager
affiliate.

(b) Subsection (a) shall not apply to limited distribution drugs and specialty drugs.

\$27-45A-9.

2.0

- (a) A pharmacy benefits manager is a fiduciary to its clients and shall do all of the following:
- (1) Discharge the duty as a fiduciary in accordance with federal and state law.
- (2) Disclose to its clients all direct or indirect payments relating to the dispensing of prescription drugs or classes or brands of drugs.
- (3) Notify its clients in writing of any activity, policy, or practice of the pharmacy benefits manager that directly or indirectly presents any conflict of interest or inability to comply with the duties imposed by this section, but in no event does the notification exempt the pharmacy benefits manager from compliance with all other provisions of this chapter.
- (b) A pharmacy benefits manager shall report annually to each of its clients both of the following:
- (1) The aggregate amount of all rebates that the pharmacy benefits manager received from pharmaceutical

- 1 manufacturers in connection with claims if administered on 2 behalf of the client.
 - (2) The aggregate amount of the rebates the pharmacy benefits manager received from pharmaceutical manufacturers that did not pass through to the client.

\$27-45A-10.

A pharmacy benefits manager may not do any of the following:

- (1) Prohibit or limit any covered individual from selecting a pharmacy or pharmacist of his or her choice who meets and agrees to the terms and requirements in the pharmacy benefits manager's contract.
- (2) Deny a pharmacy or pharmacist the right to participate as a contract provider if the pharmacy or pharmacist meets and agrees to the terms and requirements in the pharmacy benefits manager's contract and agrees to the terms of reimbursement in the contract.
- (3) Order a covered individual to any pharmacy benefits manager affiliate of that pharmacy benefits manager or another pharmacy benefits manager, provided this subdivision shall not apply to limited distribution drugs and specialty drugs.
- (4) Impose upon a covered individual any copayment, amount of reimbursement, number of days of a drug supply for which reimbursement will be allowed, or any other payment, restriction, limitation, or condition relating to purchasing pharmacist services from any pharmacy or pharmacist, including

prescription drugs, that is more costly or more restrictive than that which would be imposed upon the covered individual if the same pharmacist services were purchased from a mail-order pharmacy, a pharmacy benefits manager affiliate, or any other pharmacy or pharmacist that is willing to provide the same pharmacist services for the same cost and copayment as any mail-order service, provided this subdivision shall not apply to limited distribution drugs and specialty drugs.

\$27-45A-11.

A pharmacy benefits manager may not do any of the following:

- (1) Prohibit a pharmacist or pharmacy from providing a covered individual specific information on the amount of the covered individual's cost share for the covered individual's prescription drug and the clinical efficacy of a more affordable alternative drug if one is available, or penalize a pharmacist or pharmacy for disclosing this information to a covered individual or for selling to a covered individual a more affordable alternative if one is available.
- (2) Prohibit a pharmacist or pharmacy from offering and providing delivery services to a covered individual as an ancillary service of the pharmacy.
- (3) Charge or hold a pharmacist or pharmacy responsible for a fee or penalty relating to an audit conducted pursuant to The Pharmacy Audit Integrity Act,
 Article 8 of Chapter 23 of Title 34, provided this prohibition

does not restrict recoupments made in accordance with the
Pharmacy Audit Integrity Act.

- (4) Charge a pharmacist or pharmacy a point-of-sale or retroactive fee or otherwise recoup funds from a pharmacy in connection with claims for which the pharmacy has already been paid, unless the recoupment is made pursuant to an audit conducted in accordance with the Pharmacy Audit Integrity Act.
- (5) Penalize or retaliate against a pharmacist or pharmacy for exercising rights under this chapter or the Pharmacy Audit Integrity Act.
- (6) Knowingly make a misrepresentation to an insured, pharmacist, pharmacy, dispenser, or dispenser service.
- (7) Impose credentialing or accreditation standards on a pharmacist or pharmacy beyond or more onerous than those set by the Alabama State Board of Pharmacy or charging a pharmacy a fee in connection with network enrollment, provided this subdivision shall not prohibit a pharmacy benefits manager from setting minimum requirements for participating in a pharmacy network.

Section 3. Section 6 of Act 2019-457, 2019 Regular Session, now appearing as Section 27-45A-6 of the Code of Alabama 1975, is amended and renumbered to read as follows:

"\$27-45A-6. <u>\$27-45A-12.</u>

"(a) The commissioner may adopt reasonable rules necessary to implement $\frac{27-45A-4}{27-45A-4}$ and $\frac{27-45A-5}{27-45A-5}$ this chapter.

1	" (b) The rules adopted under this chapter shall set
2	penalties or civil fines for violations of Sections 27-45A-4
3	and 27-45A-5 and the rules implementing this chapter
4	including, without limitation, monetary fines and the
5	suspension or revocation of a license.

"(c) The fees collected pursuant to this chapter shall be deposited in the State Treasury to the credit of the Insurance Department Fund. Any civil fine or penalty collected shall be deposited in the State Treasury to the credit of the State General Fund.

"(b) The powers and duties set forth in this chapter shall be in addition to all other authority of the commissioner."

Section 4. Section 27-24A-13 is added to the Code of Alabama 1975, to read as follows:

\$27-45A-13.

- (a) A person claiming to be adversely affected by an act or practice prohibited by the Pharmacy Audit Integrity

 Act, Article 8 of Chapter 23 of Title 34 or this chapter may file a complaint with the Commissioner of Insurance.
- (b) If, upon investigation, the commissioner finds that a violation of the Pharmacy Audit Integrity Act or this chapter has occurred, either on his or her own initiative or in response to a complaint filed under subsection (a), the commissioner shall take appropriate enforcement action which may include suspending or revoking a license or imposing a civil penalty not to exceed five thousand dollars (\$5,000) for

each act or violation, or both. Each violation shall be a 1 2 separate offense. Section 5. Section 7 of Act 2019-457, 2019 Regular 3 4 Session, now appearing as Section 27-45A-7 of the Code of Alabama 1975, is renumbered as follows: 5 "\$27-45A-7. \$27-45A-14. 6 7 "(a) This chapter is applicable to a contract or health benefit plan issued, renewed, recredentialed, amended, 8 or extended on and after January 1, 2020. 9 10 "(b) A contract existing on the date of licensure of the pharmacy benefits manager shall comply with the 11 requirements of this chapter as a condition of licensure for 12 13 the pharmacy benefits manager. 14 "(c) Nothing in this chapter is intended or shall be 15 construed to be in conflict with existing relevant federal law." 16 17 Section 6. This act shall become effective on the

first day of the third month following its passage and approval by the Governor, or its otherwise becoming law.

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