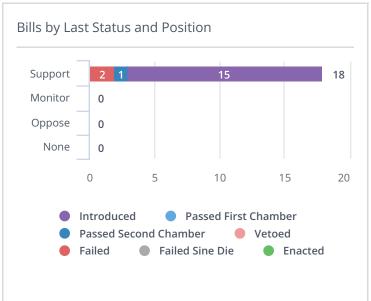


2019 Medicaid Reform Legislation

Last Updated: February 15, 2019





Medicaid Reform

Medicaid Reform (18)

State IL	Bill Number HB 1442	Last Action Added Co Sponsor Rep Robyn Gabel 2019 02 14	Status In House	Position Support
Brimary Sn	ooncore	Pill Summany: Last adited by Allia to Shipman at Eob 6, 2010, 5:20 PM		

Primary Sponsors Michelle Mussman Bill Summary: Last edited by Allie Jo Shipman at Feb 6, 2019, 5:30 PM This bill changes the definition of the practice of pharmacy to allow a pharmacist to dispense a 12-month supply of hormonal contraceptives to a patient pursuant to a standing order. It also requires pharmacists to complete an ACPE-accredited training program prior to dispensing under the standing order. This bill requires certain health insurance plans to provide coverage for patient care services provided by a pharmacist for hormonal contraceptives assessment and consultation. It requires the state Medicaid program (both FFS and managed care) to cover these services at a rate of reimbursement of 85% of the physician fee schedule.

Labels: Birth Control Compensation for Services

Scope of Practice

State Bill Number Last Action Status Position Authored By Representative Davisson 2019 01 IN HB 1249 In House Support 10 **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 3:59 PM Steve Davisson This bill would carve Medicaid prescription drug benefits out of managed care and require them to be administered by the state under fee-for-service. Labels: (Medicaid Carve-Out Hearing 2 26 At 1 00 P M Education Health And MD SB 497 In Senate Support Environmental Affairs 2019 02 08 Bill Summary: Last edited by Allie Jo Shipman at Feb 6, 2019, 9:21 PM **Primary Sponsors** Antonio Hayes This bill modifies the definition of "practice of pharmacy" to include prescribing and dispensing medications as an aid for tobacco use cessation. It also requires Maryland Medical Assistance Programs to provide coverage for pharmacist services rendered under this section to the same extent as services rendered by any other licensed health care practitioner. Labels: (Compensation for Services Scope of Practice **Tobacco Cessation** State Bill Number Last Action Status Position HB 335 Died In Committee 2019 02 05 MS Failed Support **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 4:12 PM **Becky Currie** This bill would carve Medicaid prescription drug benefits out of managed care and require them to be administered by the state under fee-for-service Medicaid Carve-Out Labels: (Bill Number State Position Status Executive Session 02 21 2019 02 00 Pm Lob 302 NH HB 659 In House Support 2019 02 13 **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 4:17 PM Ed Butler This bill requires health carriers to annually report specific data to the insurance commissioner. This data includes spread pricing, drug

rebates, and PBM administrative fees.

Labels: (Transparency and Disclosure

State Bill Number Last Action Status Position Introduced Referred To Assembly Health And NJ A 2590 In Assembly Support Senior Services Committee 2018 02 01 **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 4:35 PM Raj Mukherji This bill is an "any willing pharmacy" bill that requires Medicaid managed care organizations to allow all pharmacies in the state to fill for all covered medications if they accept the terms and conditions of the MCO. The Senate companion to this bill is S 961. Labels: (**Patient Protections** Bill Number Last Action Position State Status S 961 Introduced In The Senate Referred To Senate In Senate NJ Support **Health Human Services And Senior Citizens** Committee 2018 01 16 **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 4:35 PM Joe Vitale, Vin Gopal This bill is an "any willing pharmacy" bill that requires Medicaid managed care organizations to allow all pharmacies in the state to fill for all covered medications if they accept the terms and conditions of the MCO. The Assembly companion to this bill is A 2590.

Labels: Patient Protections

 State
 Bill Number
 Last Action
 Status
 Position

 NM
 SB 184
 Spac Reported By Committee With Do Pass
 In Senate
 Support

Recommendation 2019 02 08

Primary SponsorsJerry Ortiz y Pino

Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 4:37 PM This bill would carve Medicaid prescription drug benefits out of managed care and require them to be administered by the state under fee-for-service.

Labels: (Medicaid Carve-Out

State Bill Number Last Action Status Position

NY A 2007 Referred To Ways And Means 2019 01 18 In Assembly Support

Primary Sponsors

Joint 2016 General Budget Conference Committee

Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 4:54 PM This bill limits payments to PBMs to the actual ingredient cost, a dispensing fee, and an administrative fee per claim in managed care. It prohibits PBM spread pricing in managed care and requires the PBM to report all sources of income to the health care plan, including rebates. This bill also requires PBMs to be licensed by the superintendent of insurance and to submit annual reports to the superintendent, and it provides additional oversight authority to the superintendent. The Senate companion to this bill is S 1507. (Budget Bill)

Labels: Registration/Licensure Transparency and Disclosure

State Bill Number Last Action Status Position Referred To Finance 2019 01 18 NY S 1507 In Senate Support **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 4:54 PM Joint 2016 General Budget Conference Committee This bill limits payments to PBMs to the actual ingredient cost, a dispensing fee, and an administrative fee per claim in managed care. It prohibits PBM spread pricing in managed care and requires the PBM to report all sources of income to the health care plan, including rebates. This bill also requires PBMs to be licensed by the superintendent of insurance and to submit annual reports to the superintendent, and it provides additional oversight authority to the superintendent. The Assembly companion to this bill is A 2007. (Budget Bill) Registration/Licensure Transparency and Disclosure Labels: State Bill Number Status Position SC H 3844 Referred To Committee On Medical Military In House Support Public And Municipal Affairs House Journal Page 25 2019 02 05 Bill Summary: Last edited by Allie Jo Shipman at Feb 7, 2019, 8:49 PM **Primary Sponsors** Todd Rutherford

This bill allows pharmacists to dispense a self-administered hormonal contraceptive or administer an injectable hormonal contraceptive pursuant to a standing order to a patient over the age of 18 or under 18 who has evidence of a previous prescription from a practitioner for a self-administered or injectable hormonal contraceptive. This bill also states that pharmacist services are a benefit under the state Medicaid program and requires the department to establish a fee schedule for the aforementioned pharmacist services at a reimbursement rate of 70% of the fee schedule for physician services. The Senate companion bill is S 448.

Labels: Birth Control Compensation for Services Scope of Practice

State Bill Number Status Position Assigned To S C Life Health Insurance TN HB 1179 In House Support

Subcommittee 2019 02 13

Primary Sponsors

Bryan Terry

Bill Summary: Last edited by Allie Jo Shipman at Feb 7, 2019, 8:25 PM This bill would effectively carve Medicaid prescription drug benefits out of managed care and require them to be administered by the state under fee-for-service. The Senate companion bill is S 987.

Labels: (Medicaid Carve-Out State TN Bill Number

Last Action

Status

In Senate

Position Support

SB 650

Passed On Second Consideration Refer To Senate Commerce And Labor Committee 2019 02 07

ee 2019

Primary Sponsors

Shane Reeves

Bill Summary: Last edited by Allie Jo Shipman at Feb 6, 2019, 3:21 PM This bill amends provisions related to fair pharmacy audits to clarify that clerical errors are not prima facie evidence of fraud and to prohibit recoupment for the cost of the drug or dispensed product except in certain circumstances. This bill also prohibits claims adjudication fees unless apparent and assessed at the time of claims processing; prohibits contract terms requiring a pharmacist to dispense a drug to a patient; prohibits a PBM from notifying patients of the removal of a pharmacy from a network prior to notifying the pharmacy; and mandates PBMs notify network pharmacies of material changes to contract provisions at least 30 days prior to the effective date. This bill requires the state comptroller to perform an annual audit of PBMs providing services funded by the state. It also requires contract terms between PBMs and pharmacies to be mutually agreed upon; prohibits false or misleading advertisements or representation by PBMs; prohibits PBMs from failing to make payments to pharmacies removed from a network if services by the pharmacy were properly rendered; prohibits PBMs from reimbursing non-affiliated pharmacies less than it reimburses itself or affiliated pharmacies; and prohibits PBMs from designating a drug as a specialty drug based solely on cost.

Labels: (

Fair Pharmacy Audits

Patient Protections

Transparency and Disclosure

State TN SB 987

Last Action

Passed On Second Consideration Refer To

Senate Commerce And Labor Committee 2019

02 11

Status

In Senate

Support

Primary Sponsors Shane Reeves **Bill Summary:** Last edited by Allie Jo Shipman at Feb 7, 2019, 8:25 PM This bill would effectively carve Medicaid prescription drug benefits out of managed care and require them to be administered by the state under fee-for-service. The House companion bill is HB 1179.

Labels:

Medicaid Carve-Out

State Bill Number VA HB 1700 Last Action Senate Senators Norment Hanger Saslaw Howell Newman Ruff Wagner 2019 02 13

Passed Senate

Status

Position Support

Primary Sponsors

Chris Jones

Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 5:10 PM This bill requires Medicaid managed care organizations to provide quarterly reports to the state related to pharmacy claims. It requires claims-level data on drug cost reimbursement, dispensing fees, copayments, and the amount charged to the plan sponsor (state). It also requires an itemization of all administrative fees, rebates, and processing charges associated with each claim. This bill also requires third party administrators for state employee health plans to provide similar information to state employees through an explanation of benefits and to provide aggregate data to the state related to the differences in amounts paid to pharmacies by the PBM, charged to the TPA by the PBM, and charged to the state by the TPA. (Budget Bill)

Transparency and Disclosure Labels: (

Bill Number State VA

Status

Position

HB 2516

House Left In Commerce And Labor 2019 02 05

Appropriations At 3 30 Pm 2019 01 14

Failed

Support

Primary Sponsors Keith Hodges

Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 5:19 PM This bill requires health insurance issuers to apply any price spread by a PBM as an administrative cost and not a health benefit for the purposes of calculating the anticipated loss ratio. It allows only the amount paid to the pharmacy to be counted as a health benefit.

Labels: (

MLR

Transparency and Disclosure

State WA Bill Number **HB 1108**

Public Hearing In The House Committee On

Position

In House

Status

Support

Primary Sponsors Timm Ormsby

Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 5:23 PM This bill requires managed care organizations to report prescription drug-specific information to the state, including the actual amounts paid to pharmacies for dispensed drugs, the cost invoiced to the health plan (state), and individual rebates collected for prescription drugs dispensed. It also requires managed care organizations to use a state-established preferred drug list (PDL). The Senate companion bill is S 5154. (Budget Bill)

Labels:

Transparency and Disclosure

State Bill Number Last Action Status Position Public Hearing In The Senate Committee On WA SB 5154 In Senate Support Ways Means At 3 30 Pm 2019 01 15 **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 5:24 PM **Christine Rolfes** This bill requires managed care organizations to report prescription drug-specific information to the state, including the actual amounts paid to pharmacies for dispensed drugs, the cost invoiced to the health plan (state), and individual rebates collected for prescription drugs dispensed. It also requires managed care organizations to use a state-established

Bill)

Labels: Transparency and Disclosure

preferred drug list (PDL). The House companion bill is HB 1108. (Budget

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