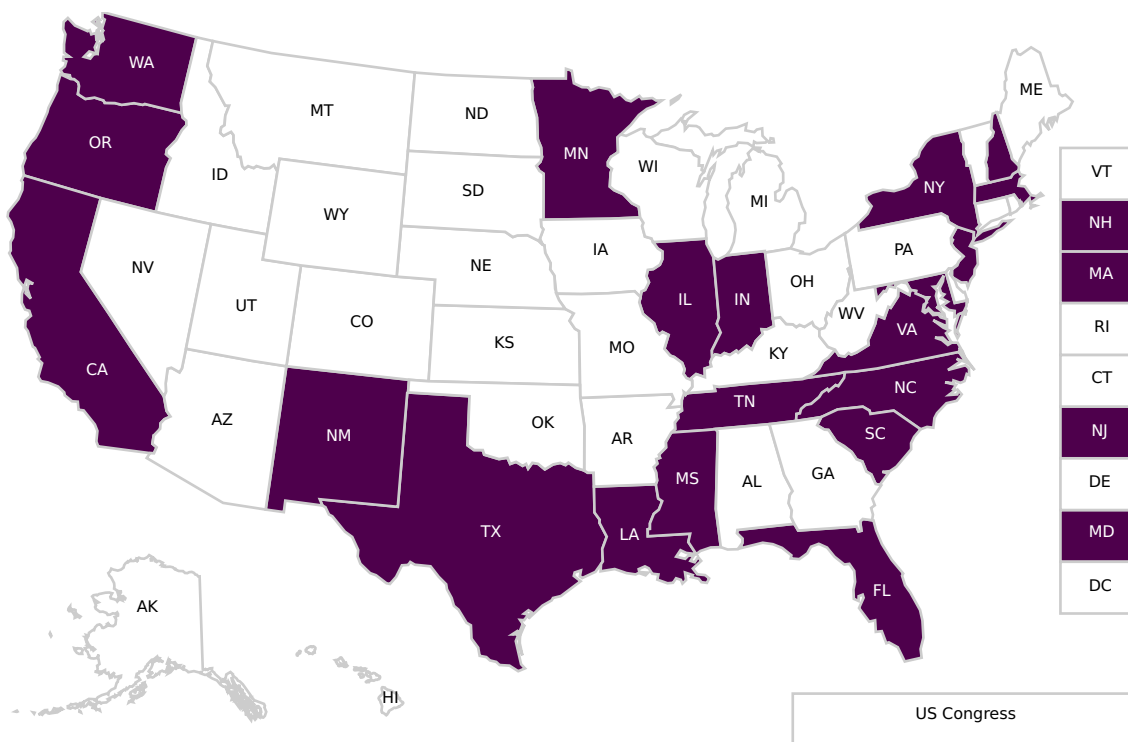


# 2019 Medicaid Reform Legislation

Last Updated: April 19, 2019

## Bills by State



## Medicaid Reform

### Medicaid Reform (41)

| State | Bill Number | Last Action                                                                                                 | Status    | Position |
|-------|-------------|-------------------------------------------------------------------------------------------------------------|-----------|----------|
| CA    | SB 446      | From Committee With Authors Amendments Read Second Time And Amended Re Referred To Com On Health 2019 04 11 | In Senate | Support  |

**Primary Sponsors**  
Jeff Stone

**Bill Summary:** Last edited by Allie Jo Shipman at Mar 8, 2019, 1:41 AM  
This bill provides that hypertension medication management services are a covered pharmacist service under the Medi-Cal program, as specified.

**Labels:** Compensation for Services

| State | Bill Number | Last Action                | Status    | Position |
|-------|-------------|----------------------------|-----------|----------|
| FL    | HB 5009     | Received Sj 335 2019 04 09 | In Senate | None     |

#### Primary Sponsors

M.L. Magar, House Committee on Appropriations

| State | Bill Number | Last Action                                            | Status   | Position |
|-------|-------------|--------------------------------------------------------|----------|----------|
| IL    | HB 1442     | Rule 19 A Re Referred To Rules Committee<br>2019 04 12 | In House | Support  |

#### 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 |
|-------|-------------|----------------------------------------|----------|----------|
| IL    | HB 3811     | Referred To Rules Committee 2019 03 19 | In House | Support  |

#### Primary Sponsors

Mark Batinick

**Bill Summary:** Last edited by Allie Jo Shipman at Mar 21, 2019, 11:59 AM  
This bill provides that a pharmacist may dispense a 12-month supply of hormonal contraceptives to a patient who is age 17 or older pursuant to a standing order. It also requires a group or individual policy of accident and health insurance or managed care plan to provide coverage for patient care services for hormonal contraceptives provided by a pharmacist.

Labels: [Birth Control](#) [Compensation for Services](#)  
[Scope of Practice](#)

| State | Bill Number | Last Action                                                        | Status   | Position |
|-------|-------------|--------------------------------------------------------------------|----------|----------|
| IN    | HB 1249     | First Reading Referred To Committee On<br>Public Health 2019 01 10 | In House | Support  |

#### Primary Sponsors

Steve Davisson

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 1, 2019, 3:59 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 |
|-------|-------------|---------------------------------------------------------------------------------|----------|----------|
| LA    | HB 557      | Read By Title Under The Rules Referred To The Committee On Insurance 2019 04 08 | In House | None     |

**Primary Sponsors**  
Bernard LeBas

| State | Bill Number | Last Action                                                                                                                            | Status    | Position |
|-------|-------------|----------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|
| LA    | SB 48       | Introduced In The Senate Read By Title Rules Suspended Read Second Time And Referred To The Committee On Health And Welfare 2019 04 08 | In Senate | None     |

**Primary Sponsors**  
T-Fred Mills

| State | Bill Number | Last Action                                                               | Status   | Position |
|-------|-------------|---------------------------------------------------------------------------|----------|----------|
| MA    | H 3551      | Hearing Scheduled For 04 11 2019 From 01 00 Pm 04 00 Pm In A 1 2019 04 04 | In House | None     |

| State | Bill Number | Last Action                                                    | Status          | Position |
|-------|-------------|----------------------------------------------------------------|-----------------|----------|
| MD    | HB 1324     | First Reading House Rules And Executive Nominations 2019 02 15 | Failed sine die | Support  |

**Primary Sponsors**  
Erek Barron

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 21, 2019, 2:35 PM  
This bill would create a prescription drug reimbursement floor in Medicaid managed care of NADAC plus the Medicaid fee-for-service defined dispensing fee.

**Labels:** Medicaid Reimbursement Floor

| State | Bill Number | Last Action                                                                 | Status          | Position |
|-------|-------------|-----------------------------------------------------------------------------|-----------------|----------|
| MD    | SB 497      | Unfavorable Report By Education Health And Environmental Affairs 2019 03 11 | Failed sine die | Support  |

**Primary Sponsors**  
Antonio Hayes

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 6, 2019, 9:21 PM  
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 |
| MD    | SB 1039     | Unfavorable Report By Finance Withdrawn<br>2019 03 20 | Failed sine die | None     |

**Primary Sponsors**  
Ed Reilly

Labels: Medicaid Reimbursement Floor NADAC+

|       |             |                           |          |          |
|-------|-------------|---------------------------|----------|----------|
| State | Bill Number | Last Action               | Status   | Position |
| MN    | HF 2414     | Second Reading 2019 04 12 | In House | None     |

**Primary Sponsors**  
Tina Liebling, Diane Loeffler

|       |             |                                                                               |          |          |
|-------|-------------|-------------------------------------------------------------------------------|----------|----------|
| State | Bill Number | Last Action                                                                   | Status   | Position |
| MN    | HF 2791     | Referred By Chair To Health And Human<br>Services Finance Division 2019 04 01 | In House | None     |

**Primary Sponsors**  
Kelly Morrison, Dave Baker

|       |             |                                                                        |           |          |
|-------|-------------|------------------------------------------------------------------------|-----------|----------|
| State | Bill Number | Last Action                                                            | Status    | Position |
| MN    | SF 1778     | Referred To Health And Human Services<br>Finance And Policy 2019 02 27 | In Senate | None     |

**Primary Sponsors**  
Michelle Benson

|       |             |                                                                                                              |           |          |
|-------|-------------|--------------------------------------------------------------------------------------------------------------|-----------|----------|
| State | Bill Number | Last Action                                                                                                  | Status    | Position |
| MN    | SF 2302     | Comm Report To Pass As Amended And Re<br>Refer To Health And Human Services Finance<br>And Policy 2019 04 03 | In Senate | None     |

**Primary Sponsors**  
John Marty

Labels: NADAC+

|       |             |                                                                        |           |          |
|-------|-------------|------------------------------------------------------------------------|-----------|----------|
| State | Bill Number | Last Action                                                            | Status    | Position |
| MN    | SF 2767     | Referred To Health And Human Services<br>Finance And Policy 2019 04 01 | In Senate | None     |

**Primary Sponsors**  
Mark Koran, Chris Eaton

| State | Bill Number | Last Action                  | Status | Position |
|-------|-------------|------------------------------|--------|----------|
| MS    | HB 335      | Died In Committee 2019 02 05 | Failed | Support  |

**Primary Sponsors**  
Becky Currie

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 1, 2019, 4:12 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 |
|-------|-------------|--------------------------------------------------------------------------------------------------------------------------|----------|----------|
| NC    | HB 588      | Ref To The Com On Finance If Favorable Appropriations If Favorable Rules Calendar And Operations Of The House 2019 04 04 | In House | None     |

**Primary Sponsors**  
Donny Lambeth, Jason Saine, Chuck McGrady, Johnson

| State | Bill Number | Last Action                                         | Status    | Position |
|-------|-------------|-----------------------------------------------------|-----------|----------|
| NC    | SB 452      | Re Ref Com On Appropriations Base Budget 2019 04 03 | In Senate | None     |

**Primary Sponsors**  
Harry Brown, Kathy Harrington, Brent Jackson

| State | Bill Number | Last Action                                          | Status | Position |
|-------|-------------|------------------------------------------------------|--------|----------|
| NH    | HB 659      | Inexpedient To Legislate Ma Vv 03 19 2019 2019 03 19 | Failed | Support  |

**Primary Sponsors**  
Ed Butler

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 1, 2019, 4:17 PM  
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 |
|-------|-------------|---------------------------------------------------------------------------------|-------------|----------|
| NJ    | A 2590      | Introduced Referred To Assembly Health And Senior Services Committee 2018 02 01 | In Assembly | Support  |

**Primary Sponsors**  
Raj Mukherji

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 1, 2019, 4:35 PM  
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](#)

| State | Bill Number | Last Action                                                                                                | Status    | Position |
|-------|-------------|------------------------------------------------------------------------------------------------------------|-----------|----------|
| NJ    | S 961       | Introduced In The Senate Referred To Senate Health Human Services And Senior Citizens Committee 2018 01 16 | In Senate | Support  |

**Primary Sponsors**  
Joe Vitale, Vin Gopal

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 1, 2019, 4:35 PM  
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      | Action Postponed Indefinitely 2019 02 08 | Failed | Support  |

**Primary Sponsors**  
Jerry 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      | Substitute S 1507 Action Signed Chap 57 2019 04 12 | Enacted | 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 |
|-------|-------------|---------------------------|---------|----------|
| NY    | S 1507      | Signed Chap 57 2019 04 12 | Enacted | Support  |

**Primary Sponsors**  
Senate Committee on Budget and Revenues

**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 Assembly companion to this bill is A 2007. (Budget Bill)

Labels: Registration/Licensure Transparency and Disclosure

| State | Bill Number | Last Action                                               | Status   | Position |
|-------|-------------|-----------------------------------------------------------|----------|----------|
| OR    | HB 2679     | Referred To Ways And Means By Order Of Speaker 2019 04 11 | In House | None     |

| State | Bill Number | Last Action                                                                   | Status   | Position |
|-------|-------------|-------------------------------------------------------------------------------|----------|----------|
| OR    | HB 3093     | Referred To Health Care With Subsequent Referral To Ways And Means 2019 03 01 | In House | None     |

| State | Bill Number | Last Action                                                     | Status    | Position |
|-------|-------------|-----------------------------------------------------------------|-----------|----------|
| OR    | SB 872      | Referred To Ways And Means By Order Of The President 2019 03 29 | In Senate | None     |

| State | Bill Number | Last Action                                            | Status   | Position |
|-------|-------------|--------------------------------------------------------|----------|----------|
| SC    | H 3844      | Member S Request Name Added As Sponsor Rose 2019 03 11 | In House | Support  |

**Primary Sponsors**  
Todd Rutherford

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 7, 2019, 8:49 PM  
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 | Last Action                                                                                          | Status   | Position |
|-------|-------------|------------------------------------------------------------------------------------------------------|----------|----------|
| TN    | HB 1179     | Taken Off Notice For Cal In S C Life Health Insurance Subcommittee Of Insurance Committee 2019 04 03 | In House | Support  |

**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 | Bill Number | Last Action                                                                         | Status    | Position |
|-------|-------------|-------------------------------------------------------------------------------------|-----------|----------|
| TN    | SB 650      | Placed On Senate Finance Ways And Means Committee Calendar For 4 23 2019 2019 04 18 | In Senate | Support  |

**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 | Bill Number | Last Action                                                                        | Status    | Position |
|-------|-------------|------------------------------------------------------------------------------------|-----------|----------|
| TN    | SB 987      | Assigned To General Subcommittee Of Senate Commerce And Labor Committee 2019 04 02 | 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 | Last Action                                  | Status   | Position |
|-------|-------------|----------------------------------------------|----------|----------|
| TX    | HB 3388     | Reported Favorably As Substituted 2019 04 17 | In House | None     |

**Primary Sponsors**  
J.D. Sheffield, Greg Bonnen, Four Price, Cole Hefner, Richard Raymond

**Labels:** Medicaid Carve-Out Patient Protections

| State | Bill Number | Last Action                        | Status   | Position |
|-------|-------------|------------------------------------|----------|----------|
| TX    | HB 3401     | Withdrawn From Schedule 2019 04 03 | In House | None     |

**Primary Sponsors**  
Richard Raymond

**Labels:** Medicaid Carve-Out Patient Protections



| State | Bill Number | Last Action                                              | Status   | Position |
|-------|-------------|----------------------------------------------------------|----------|----------|
| TX    | HB 3441     | Comm Report Sent To Local Consent Calendar<br>2019 04 16 | In House | Support  |

**Primary Sponsors**  
Eddie Lucio

**Bill Summary:** Last edited by Allie Jo Shipman at Mar 8, 2019, 1:03 AM  
This bill prohibits an insurer from denying reimbursement to a pharmacist for the provision of a service or procedure within the pharmacist's scope of practice if the service is covered by the insurer when provided by a physician, advanced practice nurse, or physician's assistant.

Labels: [Compensation for Services](#)

| State | Bill Number | Last Action                    | Status    | Position |
|-------|-------------|--------------------------------|-----------|----------|
| TX    | SB 2262     | Referred To Finance 2019 03 21 | In Senate | None     |

**Primary Sponsors**  
Lois Kolkhorst

Labels: [Medicaid Carve-Out](#)

| State | Bill Number | Last Action                    | Status    | Position |
|-------|-------------|--------------------------------|-----------|----------|
| TX    | SB 2267     | Referred To Finance 2019 03 21 | In Senate | None     |

**Primary Sponsors**  
Lois Kolkhorst

Labels: [Medicaid Carve-Out](#)

| State | Bill Number | Last Action                                                             | Status        | Position |
|-------|-------------|-------------------------------------------------------------------------|---------------|----------|
| VA    | HB 1700     | Governor Governors Action Deadline Midnight<br>March 26 2019 2019 03 18 | Passed Senate | 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)

Labels: [Transparency and Disclosure](#)

| State | Bill Number | Last Action                                 | Status | Position |
|-------|-------------|---------------------------------------------|--------|----------|
| VA    | HB 2516     | House Left In Commerce And Labor 2019 02 05 | 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 | Bill Number | Last Action                                                                   | Status   | Position |
|-------|-------------|-------------------------------------------------------------------------------|----------|----------|
| WA    | HB 1108     | Public Hearing In The House Committee On Appropriations At 3 30 Pm 2019 01 14 | In House | 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 |
|-------|-------------|----------------------------------------------------------------------------|-----------|----------|
| WA    | SB 5154     | Public Hearing In The Senate Committee On Ways Means At 3 30 Pm 2019 01 15 | In Senate | Support  |

**Primary Sponsors**  
Christine Rolfes

**Bill Summary:** Last edited by Allie Jo Shipman at Feb 1, 2019, 5:24 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 House companion bill is HB 1108. (Budget Bill)

Labels: [Transparency and Disclosure](#)

Powered by

**FiscalNote**