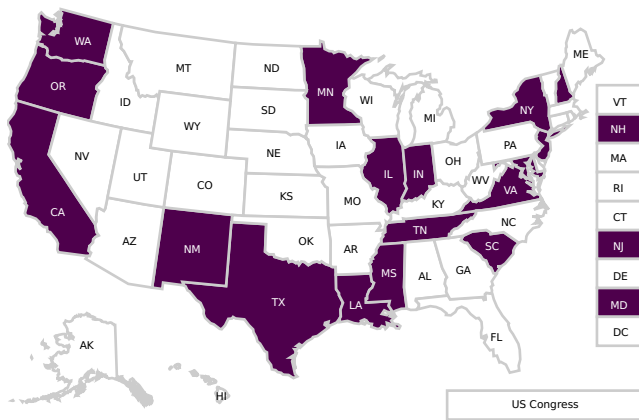


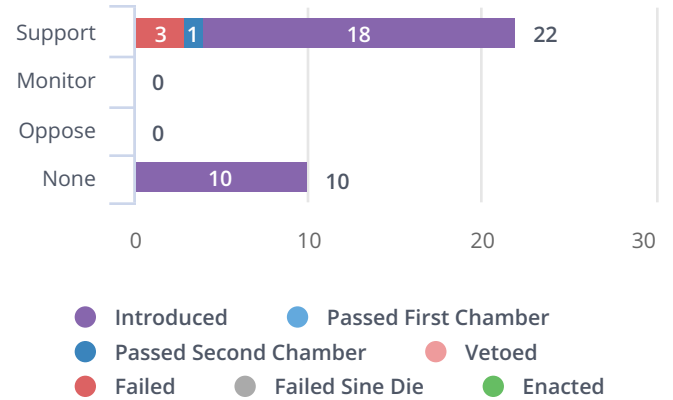
2019 Medicaid Reform Legislation

Last Updated: March 29, 2019

Bills by State



Bills by Last Status and Position



Medicaid Reform

Medicaid Reform (32)

State	Bill Number	Last Action	Status	Position
CA	SB 446	Set For Hearing April 10 2019 03 26	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
IL	HB 1442	Placed On Calendar Order Of 3rd Reading Short Debate 2019 03 26	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 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	SB 48	Prefiled And Under The Rules Provisionally Referred To The Committee On Health And Welfare 2019 03 22	In Senate	None

Primary Sponsors
T-Fred Mills

State	Bill Number	Last Action	Status	Position
MD	HB 1324	First Reading House Rules And Executive Nominations 2019 02 15	In House	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	In Senate	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 2019 03 20	In Senate	None

Primary Sponsors
Ed Reilly

Labels: Medicaid Reimbursement Floor
NADAC+

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

Primary Sponsors
Michelle Benson

State	Bill Number	Last Action	Status	Position
MN	SF 2302	Referred To Human Services Reform Finance And Policy 2019 03 11	In Senate	None

Primary Sponsors
John Marty

Labels: NADAC+

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
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	Spac Reported By Committee With Do Pass Recommendation 2019 02 08	In Senate	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	Print Number 2007 B 2019 03 11	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
NY	S 1507	Print Number 1507 B 2019 03 12	In Senate	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 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	Work Session Held 2019 03 25	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:

State	Bill Number	Last Action	Status	Position
TN	HB 1179	Placed On S C Cal Life Health Insurance Subcommittee For 4 3 2019 2019 03 27	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:

State	Bill Number	Last Action	Status	Position
TN	SB 650	Action Deferred In Senate Commerce And Labor Committee To 4 2 2019 2019 03 26	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	Action Deferred In Senate Commerce And Labor Committee To 4 2 2019 2019 03 26	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	Scheduled For Public Hearing On 2019 04 03	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	Scheduled For Public Hearing On 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	Left Pending In Committee 2019 03 26	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 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](#)

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