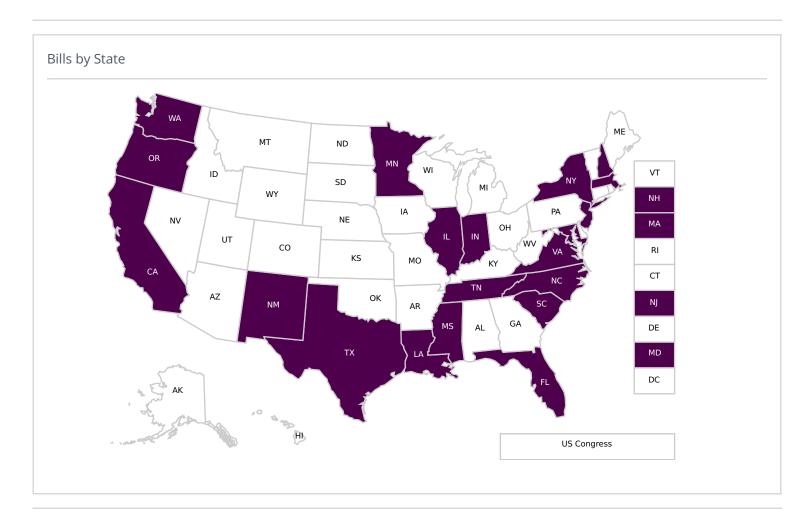


2019 Medicaid Reform Legislation

Last Updated: April 11, 2019



Medicaid Reform

| Medicaid Ref | form (41) | | | | |
|--------------------------------|-----------------------|---|---|------------------|--|
| State CA | Bill Number SB 446 | Last Action Set For Hearing April 24 2019 04 05 | Status In Senate | Position Support | |
| Primary Sponsors Jeff Stone | | This bill provide | 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 Received Sj 335 2019 04 09 FL HB 5009 In Senate None **Primary Sponsors** M.L. Magar, House Committee on Appropriations State Bill Number Last Action Status Position IL HB 1442 Placed On Calendar Order Of 3rd Reading In House Support Short Debate 2019 03 26 **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 6, 2019, 5:30 PM Michelle Mussman 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 Referred To Rules Committee 2019 03 19 IL HB 3811 In House Support **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Mar 21, 2019, 11:59 AM Mark Batinick 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 In House Support

Public Health 2019 01 10

Primary SponsorsSteve 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 LA | Bill Number HB 557 | Last Action Read By Title Under The Rules Referred To T Committee On Insurance 2019 04 08 | Status The In House | Position None |
|--------------------------------|------------------------|--|--|--|
| Primary Spons Bernard LeBas | | | | |
| State LA | Bill Number SB 48 | Last Action Introduced In The Senate Read By Title Rule Suspended Read Second Time And Referred The Committee On Health And Welfare 2019 04 08 | То | Position None |
| Primary Spons T-Fred Mills | sors | | | |
| State MA | Bill Number H 3551 | Last Action Hearing Scheduled For 04 11 2019 From 01 Pm 04 00 Pm In A 1 2019 04 04 | Status 00 In House | Position None |
| State MD | Bill Number HB 1324 | Last Action First Reading House Rules And Executive Nominations 2019 02 15 | Status In House | Position Support |
| Primary Spons Erek Barron | sors | This bill would cre Medicaid manage defined dispensir | eate a prescription druged care of NADAC plus t | oman at Feb 21, 2019, 2:35 PM greimbursement floor in the Medicaid fee-for-service |
| State MD | Bill Number SB 497 | Last Action Unfavorable Report By Education Health And Environmental Affairs 2019 03 11 | Status In Senate | Position Support |
| Primary Spons Antonio Hayes | | This bill modifies prescribing and d cessation. It also provide coverage | the definition of "pract ispensing medications requires Maryland Med for pharmacist service | oman at Feb 6, 2019, 9:21 PM ice of pharmacy" to include as an aid for tobacco use dical Assistance Programs to s rendered under this section to any other licensed health care |

Labels: Compensation for Services

Tobacco Cessation

Scope of Practice

| State MD | Bill Number SB 1039 | Last Action Unfavorable Report By Finance Withdrawn 2019 03 20 | Status In Senate | Position None | |
|---|---|--|---------------------------|-------------------------|--|
| Primary Sponsors Ed Reilly | | Labels: Medicaid R | eimbursement Floor | NADAC+ | |
| State M N | Bill Number HF 2414 | Last Action Committee Report To Adopt As Amended And Re Refer To Taxes 2019 04 10 | Status In House | Position None | |
| Primary Sponsors Tina Liebling, Dian | | | | | |
| State M N | Bill Number HF 2791 | Last Action Referred By Chair To Health And Human Services Finance Division 2019 04 01 | Status In House | Position None | |
| | Primary Sponsors Kelly Morrison, Dave Baker | | | | |
| State MN | Bill Number SF 1778 | Referred To Health And Human Services Finance And Policy 2019 02 27 | Status In Senate | Position None | |
| Primary Sponsors Michelle Benson | | | | | |
| State MN | Bill Number SF 2302 | Last Action Comm Report To Pass As Amended And Re Refer To Health And Human Services Finance And Policy 2019 04 03 | Status In Senate | Position None | |
| Primary Sponsors John Marty | | Labels: NADAC+ |) | | |
| State M N | Bill Number SF 2767 | Referred To Health And Human Services Finance And Policy 2019 04 01 | Status In Senate | Position None | |
| Primary Sponsors Mark Koran, Chris | | | | | |

State Bill Number Last Action Status Position **HB 335** Died In Committee 2019 02 05 Failed MS 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 **Labels:** (Medicaid Carve-Out Bill Number Status Position State Last Action Ref To The Com On Finance If Favorable NC HB 588 In House None Appropriations If Favorable Rules Calendar And Operations Of The House 2019 04 04 **Primary Sponsors** Donny Lambeth, Jason Saine, Chuck McGrady, Johnson State Bill Number Status Position NC SB 452 Re Ref Com On Appropriations Base Budget In Senate None 2019 04 03 **Primary Sponsors** Harry Brown, Kathy Harrington, Brent Jackson Bill Number State Status Position Failed NH HB 659 Inexpedient To Legislate Ma Vv 03 19 2019 Support 2019 03 19 **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 Position A 2590 Introduced Referred To Assembly Health And In Assembly Support NJ 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

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

In Senate

Position Support

NJ

S 961

Introduced In The Senate Referred To Senate 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 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 NM

SB 184

Last Action

Spac Reported By Committee With Do Pass

Recommendation 2019 02 08

Status

Position

In Senate

Support

Primary Sponsors Jerry Ortiz y Pino

Joe Vitale, Vin Gopal

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 NY Bill Number
A 2007

Last Action

Governor 2019 04 01

Substitute S 1507 Action Delivered To

Status

In Assembly

Position

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

Delivered To Governor 2019 04 01

Passed Assembly

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)

Lahels

Registration/Licensure

Transparency and Disclosure

| State OR | Bill Number HB 2679 | Last Action Referred To Ways And Means By Order Of Speaker 2019 04 11 | Status In House | Position None |
|-----------------------------------|------------------------|---|--|--|
| State OR | Bill Number HB 3093 | Last Action Referred To Health Care With Subsequent Referral To Ways And Means 2019 03 01 | Status In House | Position None |
| State OR | Bill Number SB 872 | Last Action Referred To Ways And Means By Order Of Ti President 2019 03 29 | _{Status} ne In Senate | Position None |
| State SC | Bill Number H 3844 | Last Action Member S Request Name Added As Sponsor Rose 2019 03 11 | Status In House | Position Support |
| Primary Spo Todd Ruther | | This bill allows ph contraceptive or a pursuant to a star who has evidence self-administered states that pharm program and requ aforementioned p | armacists to dispense administer an injectable administer an injectable administer to a patient of a previous prescriptor injectable hormonal acist services are a becuires the department to charmacist services at for physician services. | pman at Feb 7, 2019, 8:49 PM a self-administered hormonal e hormonal contraceptive at over the age of 18 or under 18 bition from a practitioner for a al contraceptive. This bill also nefit under the state Medicaid to establish a fee schedule for the a reimbursement rate of 70% of The Senate companion bill is S ation for Services |
| State TN | Bill Number HB 1179 | Last Action Taken Off Notice For Cal In S C Life Health Insurance Subcommittee Of Insurance Committee 2019 04 03 | Status In House | Position Support |
| Primary Spo Bryan Terry | | This bill would eff of managed care | ectively carve Medicaid | pman at Feb 7, 2019, 8:25 PM d prescription drug benefits out e administered by the state anion bill is S 987. |

Labels: Medicaid Carve-Out

State

TN

Bill Number SB 650 Last Action

Status

In Senate

Position Support

Recommended For Passage With Amendment S Refer To Senate Finance Ways And Means Committee Ayes 9 Nays 0 Pnv 0 2019 04 02

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

In Senate

Assigned To General Subcommittee Of Senate Commerce And Labor Committee 2019 04 02

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 TX

Bill Number HB 3388 Last Action

Status In House Position None

Primary Sponsors

J.D. Sheffield, Greg Bonnen, Four Price, Cole Hefner, Richard

Raymond

Labels:

Medicaid Carve-Out

Patient Protections

State TX

Bill Number HB 3401

Withdrawn From Schedule 2019 04 03

Left Pending In Committee 2019 04 03

Status In House Position None

Primary Sponsors Richard Raymond

Labels: (

Medicaid Carve-Out

Patient Protections

State Bill Number Last Action Status Position Reported Favorably As Substituted 2019 04 09 TX HB 3441 In House Support Bill Summary: Last edited by Allie Jo Shipman at Mar 8, 2019, 1:03 AM **Primary Sponsors** Eddie Lucio 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 Rill Number Last Action Position State Status TX SB 2262 Referred To Finance 2019 03 21 In Senate None Medicaid Carve-Out Labels: **Primary Sponsors** Lois Kolkhorst State Bill Number Last Action Status Position SB 2267 Referred To Finance 2019 03 21 TX In Senate None Labels: (Medicaid Carve-Out **Primary Sponsors** Lois Kolkhorst Position ۷A HB 1700 Governor Governors Action Deadline Midnight **Passed Senate** Support March 26 2019 2019 03 18 **Primary Sponsors** Bill Summary: Last edited by Allie Jo Shipman at Feb 1, 2019, 5:10 PM Chris Jones 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 VA | Bill Number HB 2516 | Last Action Status Position House Left In Commerce And Labor 2019 02 05 Failed Support |
|--------------------------------------|------------------------|--|
| Primary Sponsors Keith Hodges | S | 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 | Last Action Status Position Public Hearing In The House Committee On In House Support Appropriations At 3 30 Pm 2019 01 14 |
| Primary Sponsors Timm Ormsby | S | 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 WA | Bill Number SB 5154 | Last Action Status Position Public Hearing In The Senate Committee On In Senate Support Ways Means At 3 30 Pm 2019 01 15 |
| Primary Sponsors Christine Rolfes | S | 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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