

ARIZONA HOUSE OF REPRESENTATIVES

Fifty-fifth Legislature First Regular Session

Senate: HHS DP 8-0-0-0 | 3rd Read 28-1-1-0

<u>SB 1356</u>: pharmacy benefit managers; prohibited fees Sponsor: Senator Barto, LD 15 Committee on Health & Human Services

<u>Overview</u>

Prohibits a pharmacy benefit manager (PBM) from charging or holding a pharmacist or pharmacy responsible for fees related to the claims adjudication process.

<u>History</u>

A PBM is a person, business or other entity that, pursuant to a contract or under an employment relationship with an insurer or third-party payer, either directly or through an intermediary manages the prescription drug coverage provided by the insurer or other third-party payor, including: 1) the processing and payment of claims for prescription drugs; 2) the performance of drug utilization review; 3) the processing of drug prior authorization requests; 4) the adjudication of appeals or grievances related to prescription drug coverage; 5) contracting with network pharmacies; and 6) controlling the cost of covered prescription drugs (A.R.S. § 20-3321).

Statute provides that a PBM is prohibited from: 1) prohibiting a pharmacist or pharmacy from providing an insured individual information on the amount of the insured's cost share for the insured's prescription drug and the clinical efficacy of a more affordable alternative; 2) penalizing a pharmacy or pharmacist for disclosing such information to an insured; and 3) requiring a pharmacist or pharmacy to charge or collect from an insured a copayment that exceeds the total submitted charged by the network pharmacy (A.R.S. § 44-1752)

Provisions

- 1. Prohibits a PBM, on behalf of itself, plan sponsor or insurer, from charging or holding a pharmacist or pharmacy responsible for a fee for any step of or component or mechanism related to the claims adjudication process, including:
 - a) Adjudicating a pharmacy benefit claim;
 - b) Processing or transmitting a pharmacy benefit claim; and
 - c) Developing, managing or participating in a claims processing or adjudication network. (Sec. 1)
- 2. Allows a pharmacy to submit a complaint of a violation to the Director of the Department of Financial Institutions (Director) provided that the pharmacy includes supporting documentation at the time the complaint is filed. (Sec. 1)
- 3. Requires the Director to investigate complaints and allows the Director to examine and audit the books and records of a PBM to determine if a violation has occurred. (Sec. 1)
- 4. Permits the Director, if a PBM has committed a violation, to:
 - a) Seek an injunction in a court of competent jurisdiction and apply for temporary and permanent orders that the director determines necessary to restrain the PBM from continuing to commit the violation; and

| Prop 105 (45 votes) | Prop 108 (40 votes) | Emergency (40 votes) | Fiscal Note |
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- b) Issue a cease and desist order on the PBM. (Sec. 1)
- 5. Subjects a PBM who commits a violation of fee prohibitions to specified penalties. (Sec. 1)
- 6. Allows a person to bring a civil action for damages against a PBM who committed a violation in a court of competent jurisdiction. (Sec. 1)
- 7. Specifies that the above provisions apply to contracts entered into, amended, extended or renewed after the effective date of this act. (Sec. 2)