First Regular Session Seventy-third General Assembly STATE OF COLORADO

REREVISED

This Version Includes All Amendments Adopted in the Second House HOUSE BILL 21-1237

LLS NO. 21-0210.01 Jason Gelender x4330

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A BILL FOR AN ACT

101 **CONCERNING THE CREATION OF A COMPETITIVE PHARMACY BENEFITS**

102 MANAGER MARKETPLACE.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <u>http://leg.colorado.gov.</u>)

The department of personnel (department) is required to contract for the services of a pharmacy benefit manager (PBM) for group benefit plans provided pursuant to the "State Employees Group Benefits Act" (state employee group benefits plans) and to procure a technology platform with the required capabilities for conducting a PBM reverse auction and the related services of a technology platform operator.

3rd

Amended 2nd Reading April 30, 2021

HOUSE

Reading Unamended May 17, 2021

SENATE

The department is required to repurpose the technology platform used to conduct the reverse auction over the duration of the PBM services contract to perform reviews of all invoiced PBM prescription drug claims, and to identify all deviations from the specific terms of the PBM services contract. The department is required to reconcile the electronically adjudicated pharmacy claims with PBM invoices to ensure that state payments do not exceed the terms specified in any PBM services contract.

Each PBM reverse auction is required to be completed and the PBM services contract awarded to the winning PBM within a specified timeline.

The department may perform a market check for providing PBM services during the term of the current PBM services contract to ensure continuing competitiveness of incumbent prescription drug pricing over the life of a PBM services contract.

To ensure that the department does not incur additional expenditures associated with the requirements of the bill, the department is required to implement a no-pay option that obligates the winning PBM to pay the cost of the technology platform and related technology platform operator services by assessing a per-prescription fee and requiring the PBM to pay these fees to the technology operator over the duration of the PBM services contract.

The bill allows other health plans to use the processes and procedures established in the bill individually, collectively, or as a joint purchasing group with the state employee group benefits plans.

After completion of the first state employees group benefits plans PBM reverse auction, self-funded private sector employer or multi-employer health plans have the option to participate in a joint purchasing pool with state employees for conduct of subsequent PBM reverse auctions.

The state employees group benefits plans and any self-funded public or private sector health plans that opt to participate with the state employees group benefits plans in a joint PBM reverse auction purchasing pool shall retain full autonomy over determination of their respective prescription drug formularies and pharmacy benefit designs and shall not be required to adopt a common prescription drug formulary or common prescription pharmacy benefit design.

Any PBM providing services to the department or a self-funded public or private sector employee health plan is required to provide the department and the plan access to complete pharmacy claims data necessary to conduct the reverse auction and carry out their administrative and management duties.

Be it enacted by the General Assembly of the State of Colorado:

1	SECTION 1. In Colorado Revised Statutes, add part 12 to article
2	50 of title 24 as follows:
3	PART 12
4	COLORADO COMPETITIVE PHARMACY
5	BENEFIT MANAGERS MARKETPLACE
6	24-50-1201. Short title. The short title of this part 12 is the
7	"Colorado Competitive Pharmacy Benefit Managers
8	MARKETPLACE ACT".
9	24-50-1202. Legislative declaration - intent. (1) THE GENERAL
10	ASSEMBLY HEREBY FINDS AND DECLARES THAT IT IS THE INTENT OF THIS
11	ACT TO OPTIMIZE PRESCRIPTION DRUG SAVINGS BY THE STATE BY
12	REQUIRING THE FOLLOWING:
13	(a) The adoption of a dynamically competitive reverse
14	AUCTION PROCESS FOR STATE HEALTH PLAN SELECTION OF PHARMACY
15	BENEFIT MANAGERS;
16	(b) The electronic review and validation of pharmacy
17	BENEFIT MANAGER CLAIMS AS THE FOUNDATION FOR RECONCILING
18	PHARMACY BILLS; AND
19	(c) The technology-driven evaluation of incumbent
20	PHARMACY BENEFIT MANAGER PRESCRIPTION DRUG PRICING BASED ON
21	BENCHMARK COMPARATORS DERIVED FROM PHARMACY BENEFIT
22	MANAGER REVERSE AUCTION PROCESSES CONDUCTED IN THE UNITED
23	STATES OVER THE PREVIOUS TWELVE MONTHS.
24	24-50-1203. Definitions. As used in this part 12, unless the
25	CONTEXT OTHERWISE REQUIRES:
26	(1) "AWP" MEANS AVERAGE WHOLESALE PRICE.
27	(2) "DEPARTMENT" MEANS THE DEPARTMENT OF PERSONNEL.

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(3) "GNC" MEANS GUARANTEED NET COST.

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2 (4) "MARKET CHECK" MEANS A TECHNOLOGY-DRIVEN
3 EVALUATION OF AN INCUMBENT PBM'S PRESCRIPTION DRUG PRICING
4 BASED ON BENCHMARK COMPARATORS DERIVED FROM PBM REVERSE
5 AUCTION PROCESSES CONDUCTED IN THE UNITED STATES OVER THE
6 PREVIOUS TWELVE MONTHS.

7 (5) "NADAC" MEANS NATIONAL AVERAGE DRUG ACQUISITION8 COST.

9 (6) "NIST" MEANS NATIONAL INSTITUTE OF STANDARDS AND
10 TECHNOLOGY.

(7) "PARTICIPANT BIDDING AGREEMENT" MEANS AN ONLINE
AGREEMENT THAT DETAILS COMMON DEFINITIONS, PRESCRIPTION DRUG
CLASSIFICATIONS, RULES, DATA ACCESS AND USE RIGHTS, AND OTHER
OPTIMAL CONTRACT TERMS BENEFITTING THE STATE THAT ALL PBM
BIDDERS MUST ACCEPT AS A PREREQUISITE FOR PARTICIPATION IN A PBM
REVERSE AUCTION.

17 (8) "PHARMACY BENEFIT MANAGER" OR "PBM" MEANS A PERSON, 18 BUSINESS, OR OTHER ENTITY THAT, PURSUANT TO A CONTRACT WITH A 19 HEALTH CARE SERVICE PLAN, MANAGES, IN WHOLE OR THROUGH A 20 COORDINATION OF SERVICE PROVIDERS, THE PRESCRIPTION DRUG 21 COVERAGE PROVIDED BY THE HEALTH CARE SERVICE PLAN, INCLUDING, 22 BUT NOT LIMITED TO, THE PROCESSING AND PAYMENT OF CLAIMS FOR 23 PRESCRIPTION DRUGS, THE PERFORMANCE OF DRUG UTILIZATION REVIEW, 24 THE PROCESSING OF PRIOR AUTHORIZATION REQUESTS FOR SPECIFIED 25 DRUGS, THE ADJUDICATION OF APPEALS OR GRIEVANCES RELATED TO 26 PRESCRIPTION DRUG COVERAGE, CONTRACTING WITH NETWORK 27 PHARMACIES, AND CONTROLLING THE COST OF COVERED PRESCRIPTION

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1 DRUGS.

(9) "PBM REVERSE AUCTION" MEANS AN AUTOMATED,
TRANSPARENT, AND DYNAMICALLY COMPETITIVE BIDDING PROCESS
CONDUCTED ONLINE THAT STARTS WITH AN OPENING ROUND OF BIDS AND
ALLOWS QUALIFIED PBM BIDDERS TO COUNTER-OFFER A LOWER PRICE FOR
AS MANY ROUNDS OF BIDDING AS DETERMINED BY THE DEPARTMENT FOR
A MULTIPLE HEALTH PLAN PRESCRIPTION DRUG PURCHASING GROUP.

8 (10) "PRICE" MEANS THE PROJECTED COST OF A PBM OFFER OR BID
9 FOR PROVIDING PRESCRIPTION DRUG BENEFITS PURSUANT TO THIS PART 12,
10 TO ENABLE DIRECT COMPARISON OF THE COMPARABLY CALCULATED COSTS
11 OF COMPETING PBM PROPOSALS OVER THE DURATION OF THE PBM
12 SERVICES CONTRACT.

(11) "REAL-TIME" MEANS WITHIN NO MORE THAN ONE HOUR.

14 (12) "SELF-FUNDED PRIVATE SECTOR HEALTH PLAN" MEANS ANY
15 SELF-FUNDED PRIVATE SECTOR EMPLOYER OR MULTI-EMPLOYER HEALTH
16 PLAN.

17 (13) "Self-funded public sector health plan" means any 18 GROUP BENEFIT PLAN PROVIDED PURSUANT TO THE "STATE EMPLOYEES 19 GROUP BENEFITS ACT", PART 6 OF THIS ARTICLE 50; ANY STATE-FUNDED 20 HEALTH PLAN OR SELF-FUNDED COUNTY, MUNICIPAL, OR OTHER LOCAL 21 GOVERNMENT EMPLOYEE HEALTH PLAN; AND ANY PUBLIC SCHOOL 22 EMPLOYEE HEALTH PLAN, HEALTH PLAN OF THE UNIVERSITY OF 23 COLORADO, COLORADO PUBLIC FOUR-YEAR COLLEGE, OR COLORADO 24 COMMUNITY COLLEGE SYSTEM.

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(14) "SOC 2" MEANS SERVICE ORGANIZATION CONTROL 2.

26 24-50-1204. Competitive pharmacy benefit manager - contract
27 - requirements. (1) CONSISTENT WITH THE "PROCUREMENT CODE",

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ARTICLES 101 TO 112 OF THIS TITLE 24, AND NOTWITHSTANDING ANY
 OTHER PROVISION OF LAW, THE DEPARTMENT SHALL ENTER INTO A
 CONTRACT FOR THE SERVICES OF A PHARMACY BENEFIT MANAGER FOR THE
 ADMINISTRATION OF BENEFITS UNDER THE "STATE EMPLOYEES GROUP
 BENEFITS ACT", PART 6 OF THIS ARTICLE 50, IN A TRANSPARENT, ONLINE,
 AND DYNAMICALLY COMPETITIVE PROCESS AND IN THE MANNER SPECIFIED
 IN THIS SECTION.

8 (2) PRIOR TO NOVEMBER 1, 2022, THE DEPARTMENT SHALL 9 PROCURE, THROUGH THE SOLICITATION OF PROPOSALS FROM QUALIFIED 10 PROFESSIONAL SERVICES VENDORS, THE FOLLOWING PRODUCTS AND 11 SERVICES BASED ON PRICE, CAPABILITIES, AND OTHER FACTORS DEEMED 12 RELEVANT BY THE DEPARTMENT:

13 (a) A TECHNOLOGY PLATFORM WITH THE REQUIRED CAPABILITIES
14 FOR CONDUCTING A PBM REVERSE AUCTION. THE DEPARTMENT SHALL
15 ENSURE THAT THE TECHNOLOGY PLATFORM POSSESSES, AT A MINIMUM,
16 THE CAPACITY TO:

17 (I) CONDUCT AN AUTOMATED, ONLINE, REVERSE AUCTION OF PBM 18 SERVICES USING A SOFTWARE APPLICATION AND HIGH-PERFORMANCE 19 DATA INFRASTRUCTURE TO INTAKE, CLEANSE, AND NORMALIZE PBM DATA 20 WITH DEVELOPMENT METHODS AND INFORMATION SECURITY STANDARDS 21 THAT HAVE BEEN VALIDATED BY RECEIVING SOC 2 AND NIST 22 CERTIFICATION OR SUCCESSOR INFORMATION TECHNOLOGY SECURITY 23 CERTIFICATIONS, AS IDENTIFIED BY THE OFFICE OF INFORMATION 24 TECHNOLOGY;

(II) AUTOMATE REPRICING OF DIVERSE AND COMPLEX PBM
 PRESCRIPTION DRUG PRICING PROPOSALS TO ENABLE DIRECT COMPARISON
 OF THE COMPARABLY CALCULATED COSTS TO THE STATE OF PBM BIDS

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USING ONE HUNDRED PERCENT OF ANNUAL PRESCRIPTION DRUG CLAIMS
 DATA AVAILABLE FOR STATE-FUNDED HEALTH PLANS OR A MULTIPLE
 HEALTH PLAN PRESCRIPTION DRUG PURCHASING GROUP AND USING
 CODE-BASED CLASSIFICATION OF DRUGS FROM NATIONALLY ACCEPTED
 DRUG SOURCES;

6 (III) SIMULTANEOUSLY EVALUATE, IN REAL-TIME, DIVERSE AND
7 COMPLEX MULTIPLE PROPOSALS FROM FULL SERVICE PBMS, INCLUDING
8 AWP, GNC, AND NADAC PRICING MODELS, AS WELL AS PROPOSALS
9 FROM PHARMACY BENEFIT ADMINISTRATORS AND SPECIALTY DRUG AND
10 REBATE CARVE OUT SERVICE PROVIDERS;

(IV) PRODUCE AN AUTOMATED REPORT AND ANALYSIS OF PBM
BIDS, INCLUDING THE RANKING OF PBM BIDS BASED ON THE COMPARATIVE
COSTS AND QUALITATIVE ASPECTS OF THE BIDS WITHIN A ONE-HOUR
PERIOD FOLLOWING THE CLOSE OF EACH ROUND OF REVERSE AUCTION
BIDDING; AND

16 (V) PERFORM REAL-TIME, ELECTRONIC, LINE-BY-LINE,
17 CLAIM-BY-CLAIM REVIEW OF ONE HUNDRED PERCENT OF INVOICED PBM
18 PRESCRIPTION DRUG CLAIMS, AND IDENTIFY ALL DEVIATIONS FROM THE
19 SPECIFIC TERMS OF THE PBM SERVICES CONTRACT RESULTING FROM THE
20 RESERVE AUCTION PROCESS; AND

(b) RELATED SERVICES FROM THE OPERATOR OF THE TECHNOLOGY
PLATFORM IDENTIFIED IN SUBSECTION (2)(a) OF THIS SECTION, WHICH
SHALL INCLUDE, AT A MINIMUM:

24 (I) EVALUATION OF THE QUALIFICATIONS OF PBM BIDDERS;

25 (II) ONLINE AUTOMATED REVERSE AUCTION SERVICES TO SUPPORT
26 THE DEPARTMENT IN COMPARING THE PRICING FOR THE PBM
27 PROCUREMENT; AND

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(III) RELATED PROFESSIONAL SERVICES.

3 (3) THE DEPARTMENT SHALL NOT AWARD A CONTRACT FOR
4 PROCUREMENT OF THE TECHNOLOGY PLATFORM AND TECHNOLOGY
5 OPERATOR SERVICES TO A VENDOR THAT IS A PBM OR A VENDOR THAT IS
6 MANAGED BY OR A SUBSIDIARY OR AFFILIATE OF A PBM.

7 (4) THE VENDOR AWARDED THE CONTRACT BY THE DEPARTMENT
8 SHALL NOT OUTSOURCE ANY PART OF THE PBM REVERSE AUCTION OR THE
9 AUTOMATED, REAL-TIME, ELECTRONIC, LINE-BY-LINE, CLAIM-BY-CLAIM
10 REVIEW OF INVOICED PBM PRESCRIPTION DRUG CLAIMS.

11 (5) WITH TECHNICAL ASSISTANCE AND SUPPORT PROVIDED BY THE
12 TECHNOLOGY PLATFORM OPERATOR, THE DEPARTMENT SHALL SPECIFY THE
13 TERMS OF THE PARTICIPANT BIDDING AGREEMENT. THE TERMS OF THE
14 PARTICIPANT BIDDING AGREEMENT SHALL NOT BE MODIFIED EXCEPT BY
15 SPECIFIC CONSENT OF THE DEPARTMENT.

16 (6) (a) THE TECHNOLOGY PLATFORM USED TO CONDUCT THE
17 REVERSE AUCTION SHALL BE REPURPOSED OVER THE DURATION OF THE
18 PBM SERVICES CONTRACT AS AN AUTOMATED PHARMACY CLAIMS
19 ADJUDICATION ENGINE TO PERFORM REAL-TIME, ELECTRONIC,
20 LINE-BY-LINE, CLAIM-BY-CLAIM REVIEW OF ONE HUNDRED PERCENT OF
21 INVOICED PBM PRESCRIPTION DRUG CLAIMS, AND IDENTIFY ALL
22 DEVIATIONS FROM THE SPECIFIC TERMS OF THE PBM SERVICES CONTRACT.

(b) THE DEPARTMENT SHALL RECONCILE THE ELECTRONICALLY
ADJUDICATED PHARMACY CLAIMS, AS DESCRIBED IN SUBSECTION (6)(a) OF
THIS SECTION, WITH PBM INVOICES ON A MONTHLY OR QUARTERLY BASIS
TO ENSURE THAT STATE PAYMENTS SHALL NOT EXCEED THE TERMS
SPECIFIED IN ANY PBM SERVICES CONTRACT.

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(c) IF FOLLOWING STATE PAYMENT TO THE PBM ON THE BASIS OF
 SUCH RECONCILIATION, THE PBM ASSERTS THAT THE DEPARTMENT OR ITS
 AUTHORIZED REPRESENTATIVE HAS UNDERPAID ON THE AMOUNT OWED,
 THE PBM MAY SEEK RESOLUTION THROUGH A MUTUALLY ACCEPTABLE
 DISPUTE RESOLUTION PROCESS, WHICH THE PARTIES SHALL HAVE AGREED
 TO PREVIOUSLY IN THE TERMS OF THEIR CONTRACT.

7 (7) (a) THE FIRST PBM REVERSE AUCTION SHALL BE COMPLETED 8 AND THE PBM SERVICES CONTRACT SHALL BE AWARDED TO THE WINNING 9 PBM WITH AN EFFECTIVE DATE OF JULY 1, 2023. SUBSEQUENT 10 CONTRACTS MUST BE AWARDED NO LATER THAN THREE MONTHS PRIOR TO 11 TERMINATION OR EXPIRATION OF THE CURRENT PBM SERVICES CONTRACT 12 FOR A COVERED GROUP, SUCH AS THE STATE EMPLOYEES BENEFITS GROUP, 13 THAT INCLUDES ONLY ACTIVE EMPLOYEES AND DEPENDENTS, BUT DOES 14 NOT INCLUDE RETIREE PARTICIPANTS IN A MEDICARE PART D EMPLOYER 15 GROUP WAIVER PROGRAM PURSUANT TO THE "MEDICARE PRESCRIPTION 16 DRUG, IMPROVEMENT, AND MODERNIZATION ACT OF 2003", PUB.L. 17 108-173.

18 (b) IN THE EVENT AN ELIGIBLE COVERED GROUP THAT INCLUDES 19 RETIREE PARTICIPANTS IN A PART D EMPLOYER GROUP WAIVER PROGRAM 20 PURSUANT TO THE "MEDICARE PRESCRIPTION DRUG, IMPROVEMENT, AND 21 MODERNIZATION ACT OF 2003", PUB.L. 108-173, OPTS TO USE THE 22 PROCESSES AND PROCEDURES SET FORTH IN THIS PART 12, THE RELEVANT 23 PBM REVERSE AUCTION SHALL BE COMPLETED AND THE PBM SERVICES 24 CONTRACT SHALL BE AWARDED TO THE WINNING PBM NO LATER THAN SIX 25 MONTHS PRIOR TO TERMINATION OR EXPIRATION OF THE PBM SERVICES 26 CONTRACT CURRENTLY COVERING THE RETIREE EMPLOYER GROUP WAIVER 27 PROGRAM PARTICIPANTS.

1 (8)THE DEPARTMENT MAY PERFORM A MARKET CHECK FOR 2 PROVIDING PBM SERVICES DURING THE TERM OF THE CURRENT PBM 3 SERVICES CONTRACT, WHICH SHALL BE A TECHNOLOGY-DRIVEN 4 EVALUATION OF THE INCUMBENT PBM'S PRESCRIPTION DRUG PRICING 5 BASED ON BENCHMARK COMPARATORS DERIVED FROM PBM REVERSE 6 AUCTION PROCESSES CONDUCTED IN THE UNITED STATES OVER THE 7 PREVIOUS TWELVE MONTHS IN ORDER TO ENSURE CONTINUING 8 COMPETITIVENESS OF INCUMBENT PRESCRIPTION DRUG PRICING OVER THE 9 LIFE OF A PBM SERVICES CONTRACT.

10 (9) TO ENSURE THAT THE DEPARTMENT DOES NOT INCUR 11 ADDITIONAL EXPENDITURES ASSOCIATED WITH CONDUCT OF THE PBM 12 REVERSE AUCTION, ONGOING ELECTRONIC REVIEW AND VALIDATIONS OF 13 PBM CLAIMS, AND OPTIONAL PERIODIC MARKET CHECKS, THE 14 DEPARTMENT SHALL IMPLEMENT A NO-PAY OPTION THAT OBLIGATES THE 15 WINNING PBM, RATHER THAN THE STATE, TO PAY THE COST OF THE 16 TECHNOLOGY PLATFORM AND RELATED TECHNOLOGY PLATFORM 17 OPERATOR SERVICES BY ASSESSING THE PBM A PER-PRESCRIPTION FEE IN 18 AN AMOUNT AGREED TO BY THE DEPARTMENT AND THE TECHNOLOGY 19 OPERATOR AND REQUIRING THE PBM TO PAY THESE FEES TO THE 20 TECHNOLOGY OPERATOR OVER THE DURATION OF THE PBM SERVICES 21 CONTRACT. THE OBLIGATION OF THE WINNING PBM TO PAY THE 22 PER-PRESCRIPTION FEES SHALL BE INCORPORATED AS A TERM OF THE 23 PARTICIPANT BIDDING AGREEMENT AND THE PBM SERVICES CONTRACT 24 AWARDED TO THE PBM REVERSE AUCTION WINNER.

(10) (a) THE PROCESSES AND PROCEDURES SET FORTH IN THIS PART
12 APPLY TO GROUP BENEFIT PLANS PROVIDED PURSUANT TO THE "STATE
EMPLOYEES GROUP BENEFITS ACT", PART 6 OF THIS ARTICLE 50. THIS

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PART 12 SHALL NOT APPLY IN THE CASE OF A NONPROFIT,
 NONGOVERNMENTAL HEALTH MAINTENANCE ORGANIZATION WITH
 RESPECT TO MANAGED CARE PLANS THAT PROVIDE A MAJORITY OF
 COVERED PROFESSIONAL SERVICES THROUGH A SINGLE CONTRACTED
 MEDICAL GROUP.

6 (b) ANY OTHER SELF-FUNDED PUBLIC SECTOR HEALTH PLAN MAY
7 USE THE PROCESSES AND PROCEDURES SET FORTH IN THIS PART 12
8 INDIVIDUALLY, COLLECTIVELY, OR AS A JOINT PURCHASING GROUP WITH
9 THE GROUP BENEFIT PLANS PROVIDED PURSUANT TO THE "STATE
10 EMPLOYEES GROUP BENEFITS ACT", PART 6 OF THIS ARTICLE 50.

(c) (I) AFTER COMPLETION OF THE FIRST PBM REVERSE AUCTION,
SELF-FUNDED PRIVATE SECTOR HEALTH PLANS WITH SUBSTANTIAL
PARTICIPATION BY COLORADO EMPLOYEES AND THEIR DEPENDENTS SHALL
HAVE THE OPTION TO PARTICIPATE IN A JOINT PURCHASING POOL WITH
STATE EMPLOYEES FOR SUBSEQUENT PBM REVERSE AUCTIONS.

16 (II) THE GROUP BENEFIT PLANS PROVIDED PURSUANT TO THE 17 "STATE EMPLOYEES GROUP BENEFITS ACT", PART 6 OF THIS ARTICLE 50, 18 AND ANY SELF-FUNDED PUBLIC SECTOR HEALTH PLANS OR SELF-FUNDED 19 PRIVATE SECTOR HEALTH PLANS THAT OPT TO PARTICIPATE WITH THE 20 STATE EMPLOYEES GROUP BENEFITS PLAN IN A JOINT PBM REVERSE 21 AUCTION PURCHASING POOL SHALL RETAIN FULL AUTONOMY OVER 22 DETERMINATION OF THEIR RESPECTIVE PRESCRIPTION DRUG FORMULARIES 23 AND PHARMACY BENEFIT DESIGNS AND SHALL NOT BE REQUIRED TO ADOPT 24 A COMMON PRESCRIPTION DRUG FORMULARY OR COMMON PRESCRIPTION 25 PHARMACY BENEFIT DESIGN. ANY SUCH ENTITY OR PURCHASING GROUP 26 SHALL AGREE, BEFORE PARTICIPATING IN THE PBM REVERSE AUCTION, TO 27 ACCEPT THE PRESCRIPTION DRUG PRICING PLAN THAT IS SELECTED

1 THROUGH THE **PBM** REVERSE AUCTION PROCESS.

(III) ANY PBM PROVIDING SERVICES TO THE DEPARTMENT, TO
SELF-FUNDED PUBLIC SECTOR HEALTH PLANS, OR TO SELF-FUNDED
PRIVATE SECTOR HEALTH PLANS AS DESCRIBED IN THIS SECTION SHALL
PROVIDE THE DEPARTMENT AND THE PLAN ACCESS TO COMPLETE
PHARMACY CLAIMS DATA NECESSARY TO CONDUCT THE REVERSE AUCTION
AND CARRY OUT THEIR ADMINISTRATIVE AND MANAGEMENT DUTIES.

8 (11)NOTWITHSTANDING SECTION 24-50-1204 (1), THE 9 DEPARTMENT MAY ELECT TO VACATE THE OUTCOME OF A PBM REVERSE 10 AUCTION IF THE LOWEST COST PBM BID IS NOT LESS THAN THE PROJECTED 11 COST TREND FOR THE INCUMBENT PBM CONTRACT AS VERIFIED BY THE 12 DEPARTMENT. THE DEPARTMENT MAY UTILIZE A CONSULTANT TO MAKE 13 THE VERIFICATION. THE COST TREND SHALL BE PROJECTED BY THE 14 TECHNOLOGY PLATFORM OPERATOR USING INDUSTRY-RECOGNIZED DATA 15 SOURCES AND IS SUBJECT TO REVIEW AND APPROVAL BY THE DEPARTMENT 16 IN ADVANCE OF THE REVERSE AUCTION. METHODOLOGY MUST BE APPLIED 17 CONSISTENTLY IN PROJECTION OF COST AND SAVINGS TO THE STATE WITH 18 REGARD TO THE INCUMBENT PBM CONTRACT AND COMPETING PBM 19 **REVERSE AUCTION BIDS.**

SECTION 2. Safety clause. The general assembly hereby finds,
 determines, and declares that this act is necessary for the immediate
 preservation of the public peace, health, or safety.