HOUSE BILL 1465

State of Washington 68th Legislature 2023 Regular Session

By Representatives Riccelli and Corry

AN ACT Relating to cost-sharing fairness; adding a new section to chapter 48.43 RCW; adding a new section to chapter 41.05 RCW; adding a new section to chapter 48.200 RCW; creating a new section; and prescribing penalties.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 <u>NEW SECTION.</u> Sec. 1. (1) The legislature finds that:

7 (a) Citizens of Washington frequently rely on state-regulated
8 commercial carriers to secure access to the prescription medicines
9 needed to protect their health;

10 (b) Commercial insurance benefit designs increasingly require 11 patients to bear significant out-of-pocket costs for their 12 prescription medicines;

13 (c) High out-of-pocket costs on prescription medicines impact the 14 ability of patients to start new and necessary medicines and to stay 15 adherent to their current medicines;

16 (d) High or unpredictable deductible and coinsurance cost-sharing 17 requirements are a main driver of elevated patient out-of-pocket 18 costs;

(e) The burdens of high or unpredictable deductibles and
 coinsurance are borne disproportionately by patients with chronic or
 debilitating conditions;

1 (f) Pharmaceutical manufacturers may offer sizeable rebates, 2 discounts, and price concessions in connection with the dispensing or 3 administration of a therapy, but patients do not necessarily 4 financially benefit from these amounts at the point of sale, and, 5 instead, carriers or other intermediaries may retain the value of 6 rebates, discounts, and price concessions;

7 (g) Restrictions are needed on the ability of carriers and their 8 intermediaries to retain rebates, discounts, and price concessions 9 that instead should be directly passed on to patients as cost 10 savings; and

(h) Patients need equitable and accessible health coverage that does not impose unfair cost-sharing burdens upon them.

(2) Therefore, the legislature of the state of Washington intends 13 to add a new section to the Washington insurance code to ensure that, 14 to the full extent permissible and consistent with applicable law, 15 16 patients directly receive at the pharmacy counter their full and fair 17 share of the benefit of rebates and discounts for prescription 18 medicines that accrue directly or indirectly to state-regulated carriers. It is the intent of the legislature that these amendments 19 be interpreted to pass on meaningful, direct, and durable cost 20 21 savings to patients in Washington at the point of sale such that patients directly benefit from rebates and other price concessions 22 23 that pharmaceutical manufacturers offer in connection with the dispensing or administration of a particular therapy. 24

25 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 48.43
26 RCW to read as follows:

(1) For health plans issued or renewed on or after January 1, 28 2025, an enrollee's coinsurance or deductible payment for each 29 prescription drug covered by a health plan shall be calculated at the 30 point of sale based on a price that is reduced by an amount equal to 31 100 percent of all rebates received, or to be received, in connection 32 with the dispensing or administration of the prescription drug.

(a) The carrier or subcontractor shall pass through to each
 enrollee at the point of sale a good faith estimate of the enrollee's
 decrease in cost sharing required pursuant to this subsection.

36 (b) In addition to the pass-through at the point of sale 37 described in (a) of this subsection, the carrier shall provide the 38 enrollee with an end-of-calendar-year reconciliation for any cost-39 sharing reductions owed to the enrollee pursuant to this subsection

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1 that were not passed on to the enrollee through the estimated amount 2 at the point of sale.

3 (2) Nothing in this section shall preclude a carrier or 4 subcontractor from decreasing an enrollee's coinsurance or deductible 5 payment by an amount greater than that required under subsection (1) 6 of this section.

7 (3) No pharmacy or pharmacist may be subject to any liability, penalty, or disciplinary action from a carrier or the commissioner 8 for failure to comply with this section, if such pharmacy or 9 pharmacist has not received sufficient information from the carrier 10 11 or subcontractor to comply. A carrier or subcontractor may not impose 12 any form of monetary penalty on, or withhold any payments to, a pharmacy that engaged in good faith efforts to comply with this 13 14 section.

15 (4) The commissioner may adopt rules to implement and administer 16 this section.

17 (5) The commissioner may take appropriate action against a 18 carrier and its subcontractor to enforce this chapter by imposing a 19 civil penalty not to exceed \$1,000 per violation.

(6) A carrier shall disclose to the commissioner upon request information sufficient to show compliance with this section, including but not limited to wholesale acquisition cost and actual amounts of rebates. The commissioner may audit the information a health carrier provides under this section for accuracy.

25 (7) In complying with the provisions of this section, a carrier 26 or its agents may not publish or otherwise reveal information regarding the amount of rebates or price protection rebates it 27 28 receives on a product, manufacturer, or pharmacy-specific basis. Such 29 information is a trade secret, is not a public record as defined in the public records act, RCW 42.56.010, and shall not be disclosed 30 31 directly or indirectly. A carrier shall impose the confidentiality 32 protections of this subsection on any third parties or vendors with 33 which it contracts that may receive or have access to rebate or price protection rebate information. 34

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(8) For the purposes of this section:

(a) "Price protection rebate" means a negotiated price concession
that accrues directly or indirectly to the carrier, or other party on
behalf of the carrier, in the event of an increase in the wholesale
acquisition cost of a drug above a specified threshold.

40 (b) "Rebate" means:

1 (i) Negotiated price concessions including but not limited to 2 base price concessions, whether described as a rebate or otherwise, 3 and reasonable estimates of any price protection rebates and 4 performance-based price concessions that may accrue directly or 5 indirectly to the carrier during the coverage year from a 6 manufacturer or other party in connection with the dispensing or 7 administration of a prescription drug; and

8 (ii) Reasonable estimates of any negotiated price concessions, 9 fees, and other administrative costs that are passed through, or are 10 reasonably anticipated to be passed through, to the carrier and serve 11 to reduce the carrier's liabilities for a prescription drug.

12 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 41.05 13 RCW to read as follows:

(1) For health plans issued or renewed on or after January 1, 2025, an enrollee's coinsurance or deductible payment for each prescription drug covered by a health plan shall be calculated at the point of sale based on a price that is reduced by an amount equal to 100 percent of all rebates received, or to be received, in connection with the dispensing or administration of the prescription drug.

(a) The carrier or subcontractor shall pass through to each
 enrollee at the point of sale a good faith estimate of the enrollee's
 decrease in cost sharing required pursuant to this subsection.

(b) In addition to the pass-through at the point of sale described in (a) of this subsection, the carrier shall provide the enrollee with an end-of-calendar-year reconciliation for any costsharing reductions owed to the enrollee pursuant to this subsection that were not passed on to the enrollee through the estimated amount at the point of sale.

(2) Nothing in this section shall preclude a carrier or subcontractor from decreasing an enrollee's coinsurance or deductible payment by an amount greater than that required under subsection (1) of this section.

(3) No pharmacy or pharmacist may be subject to any liability, penalty, or disciplinary action from a carrier or the commissioner for failure to comply with this section, if such pharmacy or pharmacist has not received sufficient information from the carrier or subcontractor to comply. A carrier or subcontractor may not impose any form of monetary penalty on, or withhold any payments to, a

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1 pharmacy that engaged in good faith efforts to comply with this section. 2

(4) The insurance commissioner may adopt rules to implement and 3 administer this section. 4

(5) The insurance commissioner may take appropriate action 5 6 against a carrier and its subcontractor to enforce this chapter by imposing a civil penalty not to exceed \$1,000 per violation. 7

(6) A carrier shall disclose to the insurance commissioner upon 8 request information sufficient to show compliance with this section, 9 including but not limited to wholesale acquisition cost and actual 10 amounts of rebates. The insurance commissioner may audit the 11 12 information a health carrier provides under this section for 13 accuracy.

(7) In complying with the provisions of this section, a carrier 14 or its agents may not publish or otherwise reveal information 15 16 regarding the amount of rebates or price protection rebates it 17 receives on a product, manufacturer, or pharmacy-specific basis. Such information is a trade secret, is not a public record as defined in 18 the public records act, RCW 42.56.010, and shall not be disclosed 19 directly or indirectly. A carrier shall impose the confidentiality 20 21 protections of this subsection on any third parties or vendors with 22 which it contracts that may receive or have access to rebate or price 23 protection rebate information.

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(8) For the purposes of this section:

25 (a) "Price protection rebate" means a negotiated price concession 26 that accrues directly or indirectly to the carrier, or other party on 27 behalf of the carrier, in the event of an increase in the wholesale 28 acquisition cost of a drug above a specified threshold.

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(b) "Rebate" means:

(i) Negotiated price concessions including but not limited to 30 31 base price concessions, whether described as a rebate or otherwise, 32 and reasonable estimates of any price protection rebates and performance-based price concessions that may accrue directly or 33 indirectly to the carrier during the coverage year 34 from a manufacturer or other party in connection with the dispensing or 35 administration of a prescription drug; and 36

(ii) Reasonable estimates of any negotiated price concessions, 37 fees, and other administrative costs that are passed through, or are 38 39 reasonably anticipated to be passed through, to the carrier and serve 40 to reduce the carrier's liabilities for a prescription drug.

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<u>NEW SECTION.</u> Sec. 4. A new section is added to chapter 48.200
 RCW to read as follows:

3 (1) No pharmacy benefit manager may derive income from pharmacy 4 benefit management services provided to a carrier in this state 5 except for income derived from a pharmacy benefit management fee. The 6 amount of any pharmacy benefit management fees must be set forth in 7 the agreement between the pharmacy benefit manager and the carrier.

8 (2) The pharmacy benefit management fee charged by or paid to a 9 pharmacy benefit manager from a carrier shall not be directly or 10 indirectly based or contingent upon:

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(a) The acquisition cost or any other price metric of a drug;

12 (b) The amount of savings, rebates, or other fees charged, 13 realized, or collected by or generated based on the activity of the 14 pharmacy benefit manager; or

(c) The amount of premiums, deductibles, or other cost sharing or fees charged, realized, or collected by the pharmacy benefit manager from patients or other persons on behalf of a patient.

(3) Annually by December 31st, each pharmacy benefit manager operating in the state shall certify to the commissioner that it has fully and completely complied with the requirements of this section throughout the prior calendar year. Such certification shall be signed by the chief executive officer or chief financial officer of the pharmacy benefit manager.

(4) A pharmacy benefit manager contract with a carrier entered
into on or after the effective date of this section shall specify all
forms of revenue, including pharmacy benefit management fees, to be
paid by the carrier to the pharmacy benefit manager.

(5) In addition to any other civil or criminal penalty authorized by law, the commissioner may take appropriate action to enforce this chapter by imposing a civil penalty not to exceed \$1,000 per violation.

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