1st Sub. H.B. 272 PHARMACY BENEFIT AMENDMENTS

HOUSE COMMITTEE AMENDMENTS

AMENDMENT 1

FEBRUARY 24, 2020 9:38 AM

Representative **Paul Ray** proposes the following amendments:

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Page 2, Lines 30 through 31:
  {<del>-30</del>-
                       requires an insurer to notify pharmacies that they are eligible to participate in the
    31
          insurer's health benefit plan on certain conditions; }
   Page 11, Line 329 through Page 12, Line 347:
   329
                   { (3) An insurer that offers a health benefit plan shall provide to each pharmacy within
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          the geographic area covered by the health benefit plan the notice described by Subsection (4).
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                 (4) (a) The notice required in Subsection (3) shall:
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                 (i) be provided no later than 60 days before the day on which coverage for the
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          geographic area takes effect; and
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                 (ii) inform each pharmacy that the pharmacy may be included in the health benefit
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          plan's provider network if, within 60 days, the pharmacy enters into a contract to abide by the
          terms and conditions of the health benefit plan.
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   337
                 (b) If the geographic area covered by a health benefit plan is expanded, the notice
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          required under Subsection (3) applies only to pharmacies within the expanded coverage area.
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                   {<del>(5)</del>}
                             (3) A health benefit plan's terms and conditions for coverage of pharmacy products and
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          services, including enrollee cost sharing, provider reimbursement, and dispensing quantities {--}
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                   \{ \frac{\mathbf{a}}{\mathbf{a}} \} shall apply:
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                             (a) uniformly across all enrollees within:
                   {<del>-(i)-</del>}
   343
                   {<del>-(A)</del>-}
                              (i) a benefit category;
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                   {<del>-(B)</del>-}
                              (ii) a copayment level; or
   345
                   {<del>(C)</del>}
                              any other enrollee classification established by the health benefit plan; and
                              (b) uniformly across all pharmacies in the health benefit plan's provider network.
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                   {<del>-(ii)-</del>}
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                   {<del>_(6)</del>-}
                             (4) A pharmacy benefit manager may not enter into or renew a contract with a
3. Page 12, Line 354:
   354
                   {<del>(7)</del>}
                             (5) (a) An insurer may not promote the use of one pharmacy in a health benefit plan's
   Page 12, Line 357:
   357
                 (b) Subsection \{ \frac{(7)(a)}{a} \}
                                                (5)(b) does not apply to the Public Employees' Benefit and Insurance
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5. Page 12, Line 359:

359 {(8)}

An insurer that offers a health benefit plan may not require an enrollee to use an

6. Page 12, Line 362:

362 {(9)}

An insurer may not prohibit a pharmacy in a health benefit plan's provider network

7. Page 12, Line 365:

365 {(10)}

(8) A pharmacy included in a health benefit plan's provider network may not: