THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL No. 944 Session of 2019

INTRODUCED BY FRITZ, MATZIE, MILLARD, T. DAVIS, KEEFER, STURLA, PASHINSKI, GAYDOS, BARRAR, RYAN, BERNSTINE, IRVIN, MOUL, HEFFLEY, OBERLANDER, GROVE, LAWRENCE, RAPP, DRISCOLL, DeLUCA, SIMS, MULLINS, WHEELAND, KNOWLES, CIRESI, WARNER, STRUZZI, BROWN, KENYATTA, LONGIETTI, PYLE AND GILLEN, APRIL 29, 2019

REFERRED TO COMMITTEE ON HEALTH, APRIL 29, 2019

AN ACT

1 2 3 4 5	Amending the act of June 13, 1967 (P.L.31, No.21), entitled "An act to consolidate, editorially revise, and codify the public welfare laws of the Commonwealth," in public assistance, providing for pharmacy benefits manager audit and obligations.
6	The General Assembly of the Commonwealth of Pennsylvania
7	hereby enacts as follows:
8	Section 1. The act of June 13, 1967 (P.L.31, No.21), known
9	as the Human Services Code, is amended by adding a section to
10	read:
11	Section 449.1. Pharmacy Benefits Manager Audit and
12	Obligations(a) The Department of the Auditor General may
13	conduct an audit and review of a pharmacy benefits manager that
14	contracts with a medical assistance managed care organization
15	under contract with the department. The Department of the
16	Auditor General may review all previous audits completed by the
17	department and shall have access to all documents necessary to
18	complete the review and audit.

1	(b) Any information disclosed or produced by a pharmacy
2	benefits manager or a medical assistance managed care
3	organization for the use of the department or the Department of
4	the Auditor General under this section shall not be subject to
5	the act of February 14, 2008 (P.L.6, No.3), known as the "Right-
6	to-Know Law."
7	(c) A pharmacy benefits manager, whether a contractor of the
8	department or a contractor of a medical assistance managed care
9	organization that is a party to a contract with the department,
10	that receives State money, owes a duty of care and a duty of
11	loyalty and is obligated to act in good faith in relation to the
12	department and any medical assistance managed care organization
13	with which the pharmacy benefits manager has contracted.
14	(d) As used in this section, the following words and phrases
15	shall have the meanings given to them in this subsection:
16	"Medical assistance managed care organization" means a
17	Medicaid managed care organization as defined in section 1903(m)
18	(1)(a) of the Social Security Act (Public Law 74-271, 42 U.S.C.
19	§ 1396b(m)(1)(A)) that is a party to a Medicaid managed care
20	contract with the department.
21	"Pharmacy benefits management" means any of the following:
22	(1) Procurement of prescription drugs at a negotiated
23	contracted rate for distribution within this Commonwealth to
24	covered individuals.
25	(2) Administration or management of prescription drug
26	benefits provided by a covered entity for the benefit of covered
27	individuals.
28	(3) Administration of pharmacy benefits, including:
29	(i) Operating a mail-service pharmacy.
30	(ii) Claims processing.

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1 (iii) Managing a retail pharmacy network management. 2 (iv) Paying claims to pharmacies for prescription drugs dispensed to covered individuals via retail or mail-order 3 4 pharmacy. (v) Developing and managing a clinical formulary, 5 utilization management and quality assurance programs. 6 (vi) Rebate contracting and administration. 7 (vii) Managing a patient compliance, therapeutic 8 9 intervention and generic substitution program. (viii) Operating a disease management program. 10 (ix) Setting pharmacy reimbursement pricing and 11 methodologies, including maximum allowable cost, and determining 12 13 single or multiple source drugs. "Pharmacy benefits manager" means a person, business or other 14 entity that performs pharmacy benefits management. The term 15 16 shall include a wholly owned subsidiary of a medical assistance managed care organization that performs pharmacy benefits 17 18 management. 19 Section 2. This act shall take effect in 60 days.

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