

2018 Enacted State Laws Affecting Pharmaceutical Costs, Pricing and Payment

February 2019 – NCSL Health Program

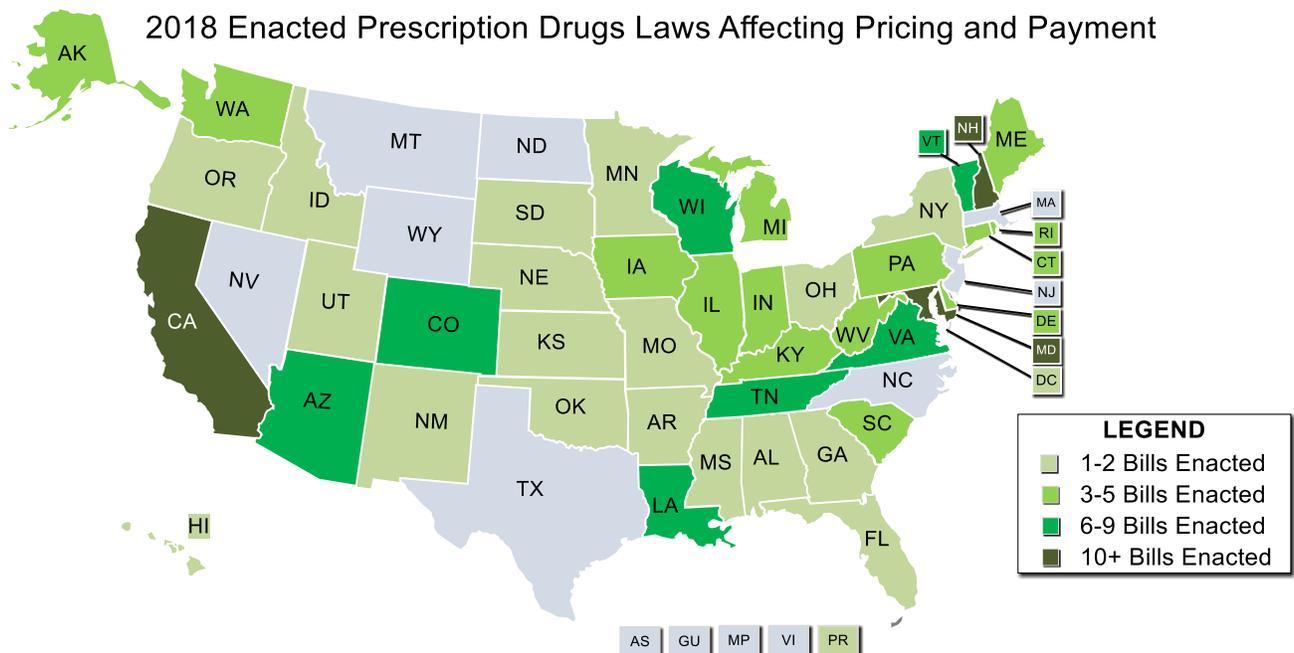
- Prescription drug transactions in the United States make up 10 percent of total health spending.
- State legislatures consider an average of 1,000 measures each year that would affect pharmaceuticals.
- State policymakers can use this guide to inform future decisions or compare state and federal activity.

Introduction

In the past year, there has been increased interest and legislative activity about the pricing, payment and costs associated with prescription drugs. States have enacted a diverse set of policy initiatives related to these topics in 2018, with a total of 94 signed bills in 39 states. This search is based on the following database filters on NCSL's Statewide Prescription Drug Database – Topics: Cost Sharing and Deductibles, Pharmaceutical Pricing and Payment, Rx Medicaid Use and Cost, and Pharmacy Benefit Managers.

The legislation in this report represents a wide variety of approaches in a diverse mix of states. This report is intended to provide a comprehensive overview of the approaches taken by states in 2018 to address costs, pricing and payment of pharmaceutical drugs in different state legislatures across the country.

In terms of broad topics, legislation addressing industry pricing and payment has seen the most legislative attention, with 30 states enacting one or more bills affecting the prescription drug coverage requirements and restrictions for commercial and Affordable Care Act (ACA) exchange insurers. Other topics, like regulating pharmacy benefit managers (PBMs) and transparency issues, such as gag clauses, have seen heightened attention from legislators as national media outlets have scrutinized these aspects of the healthcare system.



This report is based on enacted legislation from the NCSL [Prescription Drug Online Database](#). The complete NCSL database details 169 enacted laws and resolutions from 44 states in 2018. Entries to this report are listed alphabetically by state and chronologically by year for each state. A reference table of states which have enacted legislation by topic is provided below. A detailed **index of topics** affecting drug pricing is presented below.

Enacted Legislation by Topic and Number of States

Cost Sharing and Deductibles: Includes consumer-related pricing policies such as tiers, copayments, deductibles, out-of-pocket limits (OOP), discount coupons, insurance reference prices and price disclosures.

17 states: [Arkansas](#), [California](#), [Colorado](#), [Delaware](#), [D.C.](#), [Kentucky](#), [Louisiana](#), [Maryland](#), [New Hampshire](#), [Pennsylvania](#), [Rhode Island](#), [Utah](#), [Vermont](#), [Virginia](#), [Washington](#), [West Virginia](#), [Wyoming](#).

Medicaid Pharmaceutical Use and Cost: Medicaid use of coverage and cost strategies, including preferred drug lists (PDLs), supplemental rebates, utilization review, prior authorization, Pharmacy & Therapeutics (P&T) committees and related policies.

12 States: [California](#), [Connecticut](#), [Iowa](#), [Kentucky](#), [Louisiana](#), [Maryland](#), [Michigan](#), [Mississippi](#), [New Mexico](#), [Tennessee](#), [Vermont](#), [Virginia](#).

Pharmaceutical Pricing and Payment: Includes state-required or state-authorized manufacturer rebates, discounts, generic and brand name drug choice, carve-outs, transparency and reimbursement formulas. Also includes regulation of formularies.

30 States: [Alaska](#), [Arizona](#), [Arkansas](#), [California](#), [Colorado](#), [Connecticut](#), [Delaware](#), [D.C.](#), [Florida](#), [Georgia](#), [Hawaii](#), [Indiana](#), [Iowa](#), [Kansas](#), [Louisiana](#), [Maine](#), [Maryland](#), [Michigan](#), [Mississippi](#), [New Hampshire](#), [New York](#), [Oklahoma](#), [Oregon](#), [South Carolina](#), [South Dakota](#), [Tennessee](#), [Utah](#), [Vermont](#), [Virginia](#), [West Virginia](#).

Pharmacy Benefit Managers (PBMs): State policies affecting transparency of PBMs, maximum allowable cost (MAC) lists and PBM/provider disclosure. Also includes measures to eliminate or restrict claw-backs, measures to reform audit standards and amending certain contractual provisions between pharmacies and PBMs, including price-gouging.

24 States: [Alabama](#), [Alaska](#), [Arizona](#), [Arkansas](#), [California](#), [Connecticut](#), [Delaware](#), [Florida](#), [Georgia](#), [Iowa](#), [Kansas](#), [Kentucky](#), [Louisiana](#), [Maine](#), [Maryland](#), [Minnesota](#), [New Hampshire](#), [South Carolina](#), [South Dakota](#), [Tennessee](#), [Utah](#), [Vermont](#), [Wisconsin](#).

Prohibiting “Gag Clauses” Required by PBM Contracts and similar legislation: States that have specifically banned the practice of prohibiting pharmacists from discussing different payment options with customers in PBM contracts.

11 States: [Alaska](#), [Arkansas](#), [Delaware](#), [Kentucky](#), [Louisiana](#), [Maine](#), [Maryland](#), [New Hampshire](#), [South Dakota](#), [Tennessee](#), [Vermont](#).

Topics beyond cost, pricing, access and payment are tracked and reported by NCSL [online](#). Topics include:

- Biologics and Biosimilars
- Clinical Trials and Right to Try
- Compounding Pharmacy Regulation
- Insurance/Coverage - Rx Drugs
- Safety and Errors - Rx Drugs
- Specialty Pharmaceuticals
- Utilization Management - Rx Drugs
- Other Prescription Drug Measures

Bill Information	Summary
Alabama	
<p>AL H 457 2018 Pharmacies and Pharmacists Status: Enacted - Act No. 2018-457 Date of Last Action:* 03/28/2018 - Enacted Author: Beech (D) Associated Bills: AL S 348</p>	<p>Amends Sections 34-23-181, 34-23-184, 34-23-185, and 34-23-186 of the Code of Alabama 1975. Addresses auditing procedures for pharmacy records, provides auditing procedures for pharmacy benefit managers, (PBMs) limits recoupment due to overpayment for clerical and record-keeping errors by a pharmacy.</p>
Alaska	
<p>AK S 37 2018 Board of Pharmacy Inspection and Licensing Status: Enacted - Act No. 2018-66 Date of Last Action:* 07/24/2018 - Enacted Author: Giessel (R)</p>	<p>To fulfill its responsibilities, the board has the powers necessary for implementation and enforcement of this chapter, including the power to license and inspect the facilities of wholesale drug distributors, third-party logistics providers (PBMs), and outsourcing facilities located outside the state under AS 08.80.159.</p>
<p>AK H 240 2018 Pharmacy Benefits Managers Status: Enacted - Act No. 2018-100 Date of Last Action:* 09/04/2018 - Enacted Author: Guttenberg (D)</p>	<p>Relates to the registration and duties of pharmacy benefits managers (PBM), including procedures, guidelines, and enforcement mechanisms for pharmacy audits, bans gag clauses related to the cost of multi-source generic drugs and insurance reimbursement procedures, authorizes a role for the director of the division of insurance affecting drug benefits.</p>
Arizona	
<p>AZ H 2107 2018 Prescription Drug Pricing Patient Notification Act Status: Enacted - Act No. 133 Date of Last Action:* 04/05/2018 - Enacted Author: Syms (R)</p>	<p>Relates to prescription drug costs: Provides that a PBM (pharmacy benefits manager) or other entity that administers prescription drug benefits, "may not prohibit by contract a pharmacy or pharmacist from informing the patient that the patient may be able to procure a prescription medication at a lower cost, including by paying the cash price." (no gag clauses)</p>
<p>AZ H 2149 2018 Pharmacies and Remote Dispensing Status: Enacted - Act No. 33 Date of Last Action:* 03/20/2018 - Enacted Author: Weninger (R)</p>	<p>Amends statutes relating to pharmacies. Defines a "remote dispensing site pharmacy" as a pharmacy where a pharmacy technician or pharmacy intern prepares, compounds or dispenses prescription medications under remote supervision by a pharmacist. Defines remote supervision by a pharmacist as a pharmacist directing and controlling the actions of pharmacy technicians and pharmacy interns using audio and visual technology. Sets requirements for operation, licensing, fees, certification, and continued education for pharmacy technicians.</p>
Arkansas	

<p>AR H 1010 2018 Pharmacy Manager Benefits Status: Enacted - Act No. 1 Date of Last Action:* 03/15/2018 - Enacted Author: Gray (D)</p>	<p>Creates the State Pharmacy Benefits Manager Licensure Act. Gag clauses prohibited: "A pharmacy or pharmacist may provide to an insured information regarding the insured's total cost for pharmacist services for a prescription drug. A pharmacy or pharmacist shall not be prescribed by a pharmacy benefits manager from discussing information regarding the total cost for pharmacist services for a prescription drug or from selling a more affordable alternative to the insured if a more affordable alternative is available."</p>
<h2>California</h2>	
<p>CA S 17 2018 Health Care: Prescription Drug Costs Status: Enacted - Act No. 2017-603 Date of Last Action:* 10/09/2017 - Enacted Author: Hernandez (D)</p>	<p>Requires pharmaceutical manufacturers to submit to public and private purchasers (including state agencies, health insurers, and pharmacy benefit managers) 90-day advance notification of price increases for prescription drugs currently on the market, including detailed information regarding the reasons and justification for such increases, as well as justification of launch prices for new drugs. Requires health insurers that file rate information to report specified cost information regarding covered prescription drugs, including generic drugs, brand name drugs, and specialty drugs. Requires reporting the percentage of the insurance premium attributable to prescription drugs.</p>
<p>CA A 315 2018 Pharmacy Benefit Management Status: Enacted - Act No. 2018-905 Date of Last Action:* 09/29/2018 - Enacted Author: Wood (D)</p>	<p>Requires a pharmacy to inform a customer at the point of sale for a covered prescription drug whether the retail price is lower than the applicable cost sharing amount for the prescription drug, unless the pharmacy automatically charges the customer the lower price. Requires the pharmacy to submit a claim to a plan or insurer when a customer pays the retail price. Imposes additional requirements on health care service plans about contracted pharmacy providers and benefit managers.</p>
<p>CA A 349 2018 Drug MediCal Treatment Program: Rate Setting Process Status: Enacted - Act No. 2018-643 Date of Last Action:* 09/21/2018 - Enacted Author: McCarty (D)</p>	<p>Amends existing law relating to the Drug MediCal Treatment Program. Defines determination of the maximum allowable reimbursement rates for the Program and group outpatient drug free services. Requires the Department to adopt regulations by a certain date and to provide semiannual reports until the regulations are adopted.</p>
<p>CA S 1021 2018 Prescription Drugs Status: Enacted - Act No. 2018-787 Date of Last Action:* 09/26/2018 - Enacted Author: Wiener (D)</p>	<p>Prohibits a drug formulary maintained by a health insurer or a health care service plan from containing more than 4 tiers and permits a biologic with a therapeutic equivalent to be placed on a tier other than tier 4, as specified. Requires a prescription drug benefit to provide that an enrollee or an insured is not required to pay more than the retail price for a prescription drug if a pharmacy's retail price is less than the applicable copayment or coinsurance amount.</p>
<p>CA A 1860 2018 Health Care Coverage: Cancer Treatment Status: Enacted - Act No. 2018-427 Date of Last Action:* 09/17/2018 - Enacted Author: Limon (D)</p>	<p>Caps the co-pay. Extends existing law until 2024 prohibiting an individual health insurance policy or group health care service plan contract that provides coverage for prescribed, orally administered, anticancer medications (used to kill or slow the growth of cancerous cells) from requiring an enrollee to pay a total amount of copayments and coinsurance that exceeds \$250 for a 30-day supply individual prescription. (Previous law was capped at \$200 per prescription.)</p>

<p>CA A 2490 2018 Vital Records: Homeless Persons Status: Enacted - Act No. 2018-541 Date of Last Action:* 09/19/2018 - Enacted Author: Chiu (D)</p>	<p>Allows extending the operational life of the California Discount Prescription Drug Program if funds are appropriated.</p>
<p>CA A 2863 2018 Health Care Coverage: Prescriptions Status: Enacted - Act No. 2018-770 Date of Last Action:* 09/26/2018 - Enacted Author: Nazarian (D)</p>	<p>Limits the amount a health care service plan or health insurer may require an enrollee or insured to pay at the point of sale for a covered prescription to the lesser of the applicable cost sharing amount or the retail price. Provides that a payment rendered by an enrollee or insured would constitute the applicable cost sharing.</p>

Colorado

<p>CO H 1112 2018 Pharmacist Health Care Services Coverage Status: Enacted - Act No. 112 Date of Last Action:* 04/09/2018 - Enacted Author: Becker (R)</p>	<p>Revises Colorado Statutes allowing coverage for health care services provided by a pharmacist.</p>
<p>CO H 1284 2018 Disclosure of Prescription Costs at Pharmacies Status: Enacted - Act No. 181 Date of Last Action:* 04/30/2018 - Enacted Author: Buckner (D)</p>	<p>Concerns the cost of prescription drugs purchased at a pharmacy. Prohibits gag clauses in contracts between pharmacy benefit managers (PBMs) and pharmacists that prevent them from discussing effective, alternative prescription drug options with customers.</p>

Connecticut

<p>CT S 246 2018 Prescription Drugs Auto Refill Limits Status: Enacted - Act No. 18-77 Date of Last Action:* 06/01/2018 - Enacted Author: Joint Human Services</p>	<p>Limits auto refills of prescription drugs covered under the Medicaid program, prohibits a pharmacy provider from automatically refilling certain prescription drugs for a medical assistance recipient, regardless of whether a recipient requests or consents to participation in an automatic prescription drug refill program. Revises Section 19a-755a of the 2018 supplement to include CHIP Plan data.</p>
<p>CT H 5384 2018 Prescription Drug Costs Status: Enacted - Act No. 18-41 Date of Last Action:* 05/31/2018 - Enacted Author: Joint Insurance and Real Estate</p>	<p>Requires manufacturers to disclose net drug cost after rebates and to inform the state Office of Health Strategy when a company has submitted a drug approval application to the US Food and Drug Administration, requires disclosing price increase justifications to the Office, which must be posted on the state website. Requires the Office of Health Strategy to annually list the top 10 drugs whose wholesale acquisition cost has increased by 25 percent and that represent substantial state spending. Imposes additional disclosure and reporting requirements on pharmacy benefits managers, health carriers, pharmaceutical manufacturers, the Office of Health Strategy and the Insurance Department concerning prescription drug rebates and the cost of prescription drugs.</p>

Delaware

<p><u>DE S 228</u> 2018 Prescription Drug Payment Assistance Program Status: Enacted - Act No. 328 Date of Last Action:* 07/17/2018 - Enacted Author: McBride (D)</p>	<p>Restores the Delaware Prescription Drug Payment Assistance Program and delays implementation of the Act until Jan. 1, 2019 to make necessary system changes. Sets eligibility requirements and a maximum assistance of \$3,000 per calendar year, per individual, as a secondary payer to Medicare Part D. Revises the term prescription drugs as those that are self-administered or administered by a lay person. Makes technical and conforming corrections aligned with the Legislation Drafting Manual.</p>
<p><u>DE H 425</u> 2018 Permitted Prescription Drug Disclosures Status: Enacted - Act No. 378 Date of Last Action:* 08/28/2018 - Enacted Author: Bennett A (D)</p>	<p>Establishes that a contract between a pharmacy benefits manager and a pharmacy may not prohibit a pharmacy or pharmacist from doing any of the following, provides an insured with information regarding the retail price of a prescription drug or the amount of the cost share for which the insured is responsible for a prescription drug.</p>
<p><u>DE H 441</u> 2018 Pharmacy Benefits Status: Enacted - Act No. 379 Date of Last Action:* 08/28/2018 - Enacted Author: Carson (D)</p>	<p>Relates to pharmacy benefit manager prior authorization of emergency prescriptions and prescriptions for chronic or long-term conditions.</p>
<h2>District of Columbia</h2>	
<p><u>DC B 680</u> 2018 Defending Access to Women's Health Care Services Status: Enacted - Act No. 266 Date of Last Action:* 02/21/2018 - Enacted Author: Allen (D)</p>	<p>Allows pharmacists to prescribe and dispense specified contraceptives pursuant to established protocols, amends the Women's Health and Cancer Rights Federal Law Conformity Act. Requires insurers to cover certain health care services without cost sharing, requires that insurers authorize the dispensing of a supply of contraceptives for 12 months. Allows for religious exemptions and requires insurers to provide information about contraceptive coverage to enrollees.</p>
<h2>Florida</h2>	
<p><u>FL H 351</u> 2018 Pharmacy Benefits Managers Status: Enacted - Act No. 2018-91 Date of Last Action:* 03/23/2018 - Enacted Author: Santiago (R)</p>	<p>Relates to pharmacy benefits managers, prohibits a managed care plan from contracting with a pharmacy benefits manager to manage the prescription drug coverage provided under the plan unless certain requirements are met. Pharmacist "shall inform customers of a less expensive, generically equivalent drug product for her or his prescription and whether her or his cost-sharing obligation exceeds the retail price of the prescription in the absence of prescription drug coverage."</p>
<h2>Georgia</h2>	
<p><u>GA H 206</u> 2018 Clerical Errors by Providers of Medical Assistance Status: Enacted - Act No. 68 Date of Last Action:* 05/01/2017 - Enacted Author: Kelley (R)</p>	<p>Relates to medical assistance and amends requirements relating to certain audits conducted by the Department of Community Health. States that clerical or other errors do not constitute a basis to recoup payments made by providers of medical assistance and provides a 30-day correction period. Amends code relating to appropriations involved with state plans for medical assistance. Repeals conflicting laws.</p>

Hawaii	
<u>HI H 2145</u> 2018 Medication Synchronization Status: Enacted - Act No. 197 Date of Last Action:* 07/10/2018 - Enacted Author: Mizuno (D)	Requires health insurance, hospital and medical service plans, and HMOs that provide prescription drug benefits to apply prorated daily cost sharing rates for prescriptions dispensed by network pharmacies. States that no Schedule II narcotic controlled substance shall be eligible for medication synchronization.
Indiana	
<u>IN H 1317</u> 2018 Cost Share for Prescription Drugs Status: Enacted - Act No. 209-2018 Date of Last Action:* 03/25/2018 - Enacted Author: Clere (R)	Provides that a state employee plan may not prohibit a pharmacy, upon dispensing a drug, from providing to the covered individual information concerning a drug, including the cost and clinical efficacy of an available, more affordable, alternative drug. A state employee plan may not require a covered individual to pay more upon receiving a covered drug than the least of the following: (1) The amount of the deductible or copayment for the drug under the state employee plan. (2) The amount payable to the pharmacy for the drug under the state employee plan's contract with the pharmacy. (3) The amount the pharmacy would charge for the drug if the covered individual did not have coverage or an applicable discount for the drug.
Iowa	
<u>IA H 653</u> 2018 Health and Human Services and Veterans Appropriations Status: Enacted - Act No. 174 Date of Last Action:* 05/12/2017 - Line Item Vetoed Author: Appropriations Committee	The department of human services shall review the use of step therapy protocols and the application of step therapy override exceptions under the Medicaid program. In the review, the department may consider the use of step therapy protocols and the application of step therapy override exceptions as provided in chapter 514F.7, if enacted by 2017 Iowa Acts, House File 233, and the potential for improving the quality of life of Medicaid members and increasing efficiencies in the Medicaid program.
<u>IA S 2298</u> 2018 Pharmacy Regulation Status: Enacted - Act No. 1141 Date of Last Action:* 05/16/2018 - Enacted Author: Human Resources Committee	Relates to the Board of Pharmacy composition and amends rules relating to the limited distributor license and the wholesale distribution of prescription drugs and devices, includes penalties.
Kansas	
<u>KS S 351</u> 2018 Pharmacy Patients Fair Practices Act Status: Enacted - Act No. 2018-23 Date of Last Action:* 03/29/2018 - Enacted Author: Public Health and Welfare Committee	Enacts the Kansas Pharmacy Patients Fair Practices Act, states that a pharmacy or pharmacist shall have the right to provide a covered person with information regarding the amount of the covered person's cost share for a prescription drug, provides that co-payments applied by a health carrier for a prescription drug may not exceed the total submitted charges by the network pharmacy.
Kentucky	

<p>KYS 5 2018 Medicaid Program Pharmacy Benefits Status: Enacted - Act No. 157 Date of Last Action:* 04/13/2018 - Enacted Author: Wise (R)</p>	<p>Requires the Department for Medicaid Services to directly administer all outpatient pharmacy Medicaid benefits, prohibits renewal or negotiation of new contracts to provide Medicaid managed care that allow administration of outpatient benefits by any entity but the Department for Medicaid Services, reduces costs of future Medicaid managed care contracts by costs of all outpatient pharmacy benefits as they existed on a specified date. Department for Medicaid Services may change reimbursement rates, Pharmacy Benefit Managers must give Department 30 days' notice of proposed changes over 5 percent.</p>
<p>KY H 246 2018 Medication Assisted Therapy in Community Pharmacies Status: Enacted - Act No. 133 Date of Last Action:* 04/10/2018 - Enacted Author: Bentley (R)</p>	<p>Establishes a pilot program to create a community pharmacy care delivery model for medication-assisted therapy for treatment of substance abuse. As funds are available, establishes a pilot program to analyze the outcomes and effectiveness of a community pharmacy care delivery model for medication-assisted therapy for treatment of substance abuse. Establishes data collection expectations and report requirements for future program recommendations.</p>
<p>KY H 463 2018 Pharmacy Benefits Status: Enacted - Act No. 144 Date of Last Action:* 04/10/2018 - Enacted Author: Meredith (R)</p>	<p>Defines cost sharing, prohibits an insurer, pharmacy benefit manager (PBM) or other administrator from requiring payment for prescription drugs more than certain amounts, prohibits an insurer, pharmacy benefit manager, or other administrator from imposing a gag clause or penalty on a pharmacist or pharmacy for complying as required. Any amount paid by the insured will be count toward any annual out-of-pocket maximums under their health benefit plan.</p>
<h2>Louisiana</h2>	
<p>LA S 108 2018 Medicaid Managed Care Status: Enacted - Act No. 482 Date of Last Action:* 05/25/2018 - Enacted Author: Johns (R)</p>	<p>Revises provisions relating to the Medicaid Managed Care Annual Report. Requires the LA Department of Health to submit certain data quarterly regarding the Medicaid expansion population and services. Amends composition of information in the medical loss ratio of each managed care organization. Requires the quarterly submission of certain data regarding pharmacy benefit managers.</p>
<p>LA S 130 2018 Medicaid Pharmacy Benefit Management Services Status: Enacted - Act No. 483 Date of Last Action:* 05/25/2018 - Enacted Author: Mills (R)</p>	<p>Establishes requirements for Medicaid contracts or subcontracts for pharmacy benefit manager services, includes provisions on fees, supplemental rebates, pricing, and contract termination.</p>
<p>LA S 241 2018 Prescription Drug Cost Options Status: Enacted - Act No. 317 Date of Last Action:* 05/18/2018 - Enacted Author: Morrell (D)</p>	<p>Provides that "No pharmacy benefit manager or other entity that administers prescription drug benefits in Louisiana shall prohibit by contract a pharmacy or pharmacist from informing a patient of all relevant options when acquiring their prescription medication, including but not limited to the cost and clinical efficacy of a more affordable alternative if one is available and the ability to pay cash if a cash payment for the same drug is less than an insurance copayment or deductible payment amount.</p>

<p>LA S 282 2018 Health Insurance Status: Enacted - Act No. 579 Date of Last Action:* 05/31/2018 - Enacted Author: Mills (R)</p>	<p>Provides definitions related to prescription drug pricing, including excess consumer cost burden, health insurance coverage, health insurance issuer, and rebates. Requires issuers to disclose information relating to the prescription drug consumer cost burden. Forbids issuer from disclosing certain information regarding rebates due to trade rules.</p>
<p>LA S 283 2018 Health Insurance Status: Enacted - Act No. 371 Date of Last Action:* 05/20/2018 - Enacted Author: Mills (R)</p>	<p>Relates to pharmacy benefit managers, provides for internet publication of formularies, provides for transparency reporting, provides for certain reportable aggregate data, provides for internet publication of the transparency report, provides for definitions, provides for the duties of the commissioner of insurance relative thereto, provides for confidentiality.</p>
<p>LA H 436 2018 Coverage of Prescription Drugs Status: Enacted - Act No. 597 Date of Last Action:* 05/31/2018 - Enacted Author: Johnson (D)</p>	<p>Provides amendments for the regulation of pharmacy benefit managers (PBMs) and maximum allowable cost (MAC). PBMs are not allowed to prohibit pharmacies from disclosing costs and clinical alternatives to patients. Provides for reimbursements to non-affiliate pharmacies. Changes time frame for administrative appeals relating to MACs.</p>
<h2>Maine</h2>	
<p>ME S 10 2018 Clean Claims Submitted by Pharmacies Status: Enacted - Act No. 44 Date of Last Action:* 05/05/2017 - Enacted Author: Gratwick (D)</p>	<p>Prohibits a health insurance carrier or pharmacy benefits manager (PBM) from imposing a copayment or other charge that exceeds the cost of a prescription drug, prohibits a carrier or PBM from penalizing a pharmacy provider for providing information related to an enrollee's out-of-pocket cost or the clinical efficacy of a prescription drug or alternative medication (gag clause). If information related to an enrollee's out-of-pocket cost or the clinical efficacy of a prescription drug or alternative medication is available to a pharmacy provider, a carrier or PBM may not penalize a pharmacy provider for providing that information to an enrollee.</p>
<p>ME S 432 2018 Generic Drug Pricing Status: Enacted - Act No. 434 Date of Last Action:* 07/04/2018 - Enacted Author: Jackson (D)</p>	<p>The new law "ensures increased competition in the market for drugs and biological products, which will lower the cost of prescription drugs for Maine residents and for the state." Amends the Maine Pharmacy Act to require that a drug distributed in this state must be made available for sale in this state to a person seeking to develop an application for the approval of the drug under the Federal Food, Drug, and Cosmetic Act or the licensing of a biological product under the federal Public Health Service Act, establishes disciplinary actions for noncompliance.</p>
<p>ME S 484 2018 Prescription Drug Price Transparency Status: Enacted - Act No. 406 Date of Last Action:* 05/01/2018 - Enacted Author: Vitelli (D)</p>	<p>Expands provisions for prescription drug price transparency. Requires the state Health Data Organization to report on the 25 most frequently prescribed drugs and the 25 drugs with highest cost determined by the total amount spent on those drugs and largest price increases. It requires a new plan for data collection from manufacturers, with a yearly report on prescription drug prices starting in 2019. Provides funds allocation for 2018-2019.</p>
<h2>Maryland</h2>	

<p><u>MD S 576</u> 2018 Pharmacy Benefits Managers Status: Enacted - Act No. 218 Date of Last Action:* 04/24/2018 - Enacted Author: Klausmeier (D) Associated Bills: MD H 736</p>	<p>Prevents a pharmacy benefits manager from prohibiting a pharmacy or pharmacist from providing a beneficiary with certain information regarding a certain retail price or certain cost share for a prescription drug (gag clauses).</p>
<p><u>MD H 736</u> 2018 Pharmacy Benefits Managers Status: Enacted - Act No. 217 Date of Last Action:* 04/24/2018 - Enacted Author: Bromwell (D) Associated Bills: MD S 576</p>	<p>Prevents a pharmacy benefits manager from prohibiting a pharmacy or pharmacist from providing a beneficiary with information regarding the retail price of a prescription drug or the amount of the cost share for a prescription drug for which the beneficiary is responsible (gag clauses). Provides for the construction of the act.</p>
<p><u>MD S 986</u> 2018 State Employee Welfare Benefits Program Status: Enacted - Act No. 511 Date of Last Action:* 05/08/2018 - Enacted Author: Kelley (D) Associated Bills: MD H 1024</p>	<p>Requires the Secretary of Budget and Management to ensure that the State Employee and Retiree Health and Welfare Benefits Program complies with certain provisions of the Insurance Article relating to the coverage of contraceptive drugs, devices and male sterilization. Provides for a religious organization exemption.</p>
<p><u>MD H 994</u> 2018 Medical Assistance Program Status: Enacted - Act No. 464 Date of Last Action:* 05/08/2018 - Enacted Author: Barron (D) Associated Bills: MD S 774</p>	<p>Requires the Maryland Department of Health to apply to the Centers for Medicare and Medicaid Services for a certain State plan amendment to the Family Planning Program. Establishes a presumptive eligibility process and integrate an eligibility and enrollment process for the Family Planning Program into the Maryland Health Connection by Oct. 1, 2020.</p>
<p><u>MD S 1208</u> 2018 Senior Prescription Drug Assistance Program Status: Enacted - Act No. 463 Date of Last Action:* 05/08/2018 - Enacted Author: Klausmeier (D) Associated Bills: MD H 1766</p>	<p>Extends the termination date of the Senior Prescription Drug Assistance Program through 2025, alters the time during which the subsidy required under the program may not exceed a certain amount, repeals the requirement that the program annually provide a certain subsidy of up to the full amount of the Medicare Part D coverage gap. Repeals provisions of the law requiring and governing the transfer of certain funds to the Senior Prescription Drug Assistance Program Fund by certain corporations.</p>
<p><u>MD H 1283</u> 2018 Prescription Contraceptives Coverage Status: Enacted - Act No. 450 Date of Last Action:* 05/08/2018 - Enacted Author: Kelly A (D)</p>	<p>Alters the length of time for which a certain insurer, nonprofit health service plan, and health maintenance organization is required to provide coverage for a single dispensing of a supply of prescription contraceptives to 12 months. Repeals a provision authorizing an insurer, nonprofit health service plan, and health maintenance organization to provide coverage for a supply of prescription contraceptives that is for less than a certain period. Does not require that a provider must prescribe or dispense 12 months of the drug at one time.</p>

<p>MD H 1349 2018 Pharmacy Benefits Managers Status: Enacted - Act No. 451 Date of Last Action:* 05/08/2018 - Enacted Author: Anderton (R) Associated Bills: MD S 1079</p>	<p>Revises legislation regarding Pharmacy Benefits Managers (PBMs). Authorizes the Maryland Insurance Commissioner to require additional information from a PBM in a certain application, requires a PBM to use updated pricing information in calculating certain payments and alters certain requirements of a pharmacy benefits manager. Adds additional clauses for the Commissioner concerning appeals, complaints, fees, and fines.</p>
<p>MD H 1558 2018 Prescription Drugs Status: Enacted - Act No. 461 Date of Last Action:* 05/08/2018 - Enacted Author: Morales (D)</p>	<p>Authorizes, with a certain exception, a pharmacist to dispense a quantity of a prescription drug that is up to a certain number of authorized dosage units that does not exceed a specified number of days, provides that the act does not apply to a certain controlled dangerous substance or certain prescriptions that an authorized prescriber prescribes for a patient.</p>
<p>MD H 1766 2018 Senior Prescription Drug Assistance Program Status: Enacted - Act No. 462 Date of Last Action:* 05/08/2018 - Enacted Author: Bromwell (D) Associated Bills: MD S 1208</p>	<p>Extends the termination date of the Senior Prescription Drug Assistance Program through 2025, alters the time during which the subsidy required under the program may not exceed a certain amount, and repeals the requirement that the program annually provide a certain subsidy of up to the full amount of the Medicare Part D coverage gap.</p>
<h2>Michigan</h2>	
<p>MI H 4323 2018 Omnibus Budget Status: Enacted - Act No. 107 Date of Last Action:* 07/14/2017 - Line Item Vetoed Author: Cox (R)</p>	<p>Sets and adjust fiscal year appropriations. Requires the Medicaid department to "take additional measures to further reduce state costs, while also ensuring that appropriate clinical care is being utilized. The report shall also include information on savings generated because of these additional measures that may include additional cost sharing, step therapy, and prior authorization." The department will require a prescription co-payment for Medicaid recipients enrolled in the Healthy Michigan plan with an income of at least 100 percent of the federal poverty level of \$4 for a generic drug and \$8 for a brand-name drug, except as prohibited by federal or state law or regulation.</p>
<p>MI H 5805 2018 Drug Product Charge Status: Enacted - Act No. 246 Date of Last Action:* 06/27/2018 - Enacted Author: Bizon (R)</p>	<p>Requires pharmacist to charge a certain number of certain purchasers for generically equivalent drug products and Food and Drug Administration-designated interchangeable biological drug products. A pharmacist may not dispense a drug product with a total charge that exceeds the total charge of the drug product originally prescribed, unless agreed to by the purchaser.</p>
<h2>Minnesota</h2>	
<p>MN H 3196 2018 Health Insurance Status: Enacted - Act No. 162 Date of Last Action:* 05/19/2018 - Enacted Author: Fenton (R) Associated Bills: MN S 2897</p>	<p>Establishes a step therapy protocol and step therapy override process for prescription drug coverage within health insurance.</p>

Mississippi	
<u>MS H 709</u> 2018 Prescription Drugs Alternative Payment Options Act Status: Enacted - Act No. 331 Date of Last Action:* 03/08/2018 - Enacted Author: Mims (R)	Establishes the Prescription Drugs Consumer Affordable Alternative Payment Options Act and allows pharmacists to provide additional communication with patients about affordable alternative payment options.
<u>MS S 2296</u> 2018 Group Health Insurance Plan Coverage Status: Enacted - Act No. 308 Date of Last Action:* 03/05/2018 - Enacted Author: Kirby (R)	Effective Jan. 1, 2019, all individual and group health insurance contracts providing prescription drug coverage in the state shall apply a prorated daily cost sharing rate for a partial supply to allow beneficiaries to synchronize their medications on the same day each month. Medication synchronization authority shall be fully applicable to the state and school employee's health insurance plan and the State Medicaid program.
<u>MS S 2836</u> 2018 Medicaid Program Status: Enacted - Act No. 440 Date of Last Action:* 04/12/2018 - Enacted Author: Wiggins (R)	Relates to the state Medicaid program and lists the types of health care and services for which reimbursement is provided under the Program. Certain rural hospitals, those with 50 or fewer beds, shall be given an alternative reimbursement option under Medicaid. Removes certain restrictions of services and repeals certain sections. Authorizes reimbursement of services relating to prescriptions, opioid dependency, mental health, and gynecology. Establishes the Commission on Expanding Medicaid Managed Care. Sets a 2024 repeal date for listed subsections.
New Hampshire	
<u>NH S 421</u> 2018 Prescription Contraceptives Insurance Coverage Status: Enacted - Act No. 2018-361 Date of Last Action:* 07/02/2018 - Enacted Author: Soucy D. (D)	Clarifies insurance coverage for prescription contraceptive drugs and prescription contraceptive devices and for contraceptive services, includes contraceptives dispensed in a quantity intended to last for a 12-month period, if prescribed in that quantity.
<u>NH S 481</u> 2018 Pharmacy Benefit Manager Study Committee Status: Enacted - Act No. 2018-143 Date of Last Action:* 05/30/2018 - Enacted Author: Soucy D. (D)	Establishes a committee to study the impact of pharmacy benefit manager operations on cost, administration, and distribution of prescription drugs. Committee is to report findings by November of 2018.
<u>NH S 581</u> 2018 Compounding of Drugs Status: Enacted - Act No. 2018-263 Date of Last Action:* 06/12/2018 - Enacted Author: Sanborn A. (R)	The bill amends the definition of compounding for the purposes of the law regulating pharmacists and pharmacies. Also establishes a study committee to study rule-making authority for reconstituted drugs.
<u>NH S 591</u> 2018 Pharmacy Benefit Managers	A pharmacy benefit manager shall not require accreditation of providers other than requirements set forth by the New Hampshire pharmacy board or other state or federal entity. Prohibits a health carrier or pharmacy benefit manager requiring accreditation,

<p>Status: Enacted - Act No. 2018-236 Date of Last Action:* 06/08/2018 - Enacted Author: Soucy D (D)</p>	<p>credentialing, or licensing of a provider other than by the New Hampshire pharmacy board or other state or federal regulatory body or must not exclude a provider from dispensing any new drug product for which the provider meets the manufacturer's dispensing guidelines, or otherwise discriminate against a provider.</p>
<p><u>NH H 1746</u> 2018 Pharmacy Benefit Managers Status: Enacted - Act No. 2018-92 Date of Last Action:* 05/25/2018 - Enacted Author: Hennessey (R)</p>	<p>Prohibits a pharmacy benefit manager (PBM) from requiring accreditation, credentialing, or licensing of providers other than by the New Hampshire Pharmacy Board or other state or federal entity. Repeals section relative to prohibiting pharmacy benefit managers to require providers to obtain certain accreditation.</p>
<p><u>NH H 1791</u> 2018 Pharmacy Disclosures Status: Enacted - Act No. 2018-164 Date of Last Action:* 06/07/2018 - Enacted Author: Butler (D)</p>	<p>This enacted bill affects PBMs and gag clauses, biosimilar substitution, and drug labeling. It establishes that a contract between an insurance carrier or pharmacy benefit manager and a contracted pharmacy shall not contain a provision prohibiting the pharmacist from providing price information to an insured. A pharmacist may substitute a biological product only if it has been licensed by the federal FDA as an interchangeable biological product for the prescribed biological product. When a pharmacist dispenses an interchangeable biological product for the prescribed biological product, the pharmacist shall inform the patient. The prescriber may indicate that substitution is not authorized by specifying on the prescription medically necessary on a paper prescription, or uses electronic indications when transmitted electronically, or gives instructions when transmitted orally that the biological product prescribed is medically necessary. Within three business days the dispensing pharmacist or the pharmacist's designee shall make an electronic entry of the specific product provided to the patient, including the manufacturer. The communication shall be conveyed by making an entry that is electronically accessible to the prescriber.</p>
<p><u>NH H 1822</u> 2018 Hormonal Contraceptives from Pharmacists Status: Enacted - Act No. 2018-205 Date of Last Action:* 06/08/2018 - Enacted Author: MacKay M (D)</p>	<p>Allows pharmacists to dispense hormonal contraceptives pursuant to a standing order entered into by health care providers. Health insurance benefit providers must also provide coverage for outpatient contraceptive services, consisting of consultations, examinations, and medical services.</p>
<h2>New Mexico</h2>	
<p><u>NM S 11</u> 2018 Step Therapy for Drug Coverage Status: Enacted - Act No. 9 Date of Last Action:* 02/28/2018 - Enacted Author: Kernan (R)</p>	<p>Relates to health coverage to establish guidelines and limitations relating to step therapy for prescription drug coverage and clinical review criteria for step therapy protocols. Enacts new sections applying to coverage related to the health care purchases act, the public assistance act (including Medicaid), the New Mexico insurance code, the health maintenance organization law and the nonprofit health care plan law.</p>
<h2>New York</h2>	

<p>NY A 7509 2018 Substitution of Interchangeable Biological Products Status: Enacted - Act No. 357 Date of Last Action:* 10/23/2017 - Enacted Author: Gottfried (D) Associated Bills: NY S 4788</p>	<p>Amends the Public Health Law relating to the substitution of interchangeable biological products for prescribed products. Enacts provisions relating to the prescription of interchangeable biological products and that substitution of an interchangeable biological product is not required under certain circumstances. Authorizes a pharmacist to dispense the prescribed biological product at regular price in an emergency but also requires a pharmacist to substitute a less expensive biological product under specified conditions. Sets a five-year expiration period for the law.</p>
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Oklahoma

<p>OK S 956 2018 Board of Pharmacy Status: Enacted - Act No. 106 Date of Last Action:* 04/25/2018 - Enacted Author: Griffin (R)</p>	<p>Provides that "A pharmacy operated by or under contract with the state Department of Corrections or a county jail may accept for the purpose of resale or redispensing a prescription drug that has been dispensed and has left the control of the pharmacist if the prescription drug is being returned by a state correctional facility or a county jail that has a licensed physician's assistant, a registered professional nurse, or a licensed practical nurse, who is responsible for the security, handling, and administration of prescription drugs," with safeguards and restrictions. Sets authorization for pharmacists dispensing non-controlled and controlled prescription substances and provides disciplinary action for violations.</p>
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Oregon

<p>OR H 4005 2018 Prescription Drugs Pricing Reports Status: Enacted - Act No. 7 Date of Last Action:* 03/12/2018 - Enacted Author: Nosse (D)</p>	<p>Enacts the Prescription Drug Price Transparency Act. Requires prescription drug manufacturer to annually report information to the Department of Consumer and Business Services regarding prices of prescription drugs and costs associated with developing and marketing prescription drugs. Authorizes the department to impose civil penalties on manufacturer for failing to comply with reporting requirements. Requires health insurers that offer prescription drug benefit to report specified information about prescription drug prices and impact of prescription costs associated with developing and marketing prescription drugs to the department. Establishes a Task Force on the Fair Pricing of Prescription Drugs</p>
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Pennsylvania

<p>PA H 270 2018 Pharmaceutical Assistance Contracts Status: Enacted - Chapter Date of Last Action:* 10/23/2018 - Enacted Author: Farry (R)</p>	<p>Amends the State Lottery Law, relates to pharmaceutical assistance for the elderly, provides medication synchronization, provides for the Pharmaceutical Assistance Contract for the Elderly Needs Enhancement Tier and for the Board. Provides for medication therapy management.</p>
<p>PA H 425 2018 Determination of Eligibility Status: Enacted - Chapter Date of Last Action:* 12/21/2017 - Enacted Author: Nelson (R)</p>	<p>Amends the State Lottery Law. Amends eligibility of pharmaceutical assistance for the elderly, the PACE and PACENET programs. Sets PACE and PACENET eligibility expiration.</p>

Rhode Island

<p><u>RI S 2540</u> 2018 Mental Illness Insurance Coverage Status: Enacted - Act No. 2018-253 Date of Last Action:* 07/02/2018 - Enacted Author: Seveney (D)</p>	<p>Amends Rhode Island General Laws concerning health insurance provisions. Includes behavioral health counseling visits and medication maintenance visits as primary care visits for patient cost sharing requirements under the provisions of a health plan. Expands the powers and duties of the Health Insurance Commissioner to ensure coverage of mental and behavioral health care.</p>
<h2>South Carolina</h2>	
<p><u>SC H 5038</u> 2018 Pharmacy Benefit Manager Duties Status: Enacted - Act No. 177 Date of Last Action:* 05/03/2018 - Enacted Author: Atwater (R) Associated Bills: SC H 5044, SC S 815</p>	<p>Establishes prohibited acts for a pharmacy benefit manager. Provides that a pharmacy benefit manager may not prohibit a pharmacist or pharmacy from providing an insured information on the amount of the insured's cost share for a prescription drug, from offering and providing direct and limited delivery services to an insured as an ancillary service of the pharmacy, charge or collect a copayment, charge off hold a pharmacist or pharmacy responsible for certain fees, or retaliate for exercising rights.</p>
<h2>South Dakota</h2>	
<p><u>SD S 141</u> 2018 Pharmacy Benefits Managers Status: Enacted - Act No. 281 Date of Last Action:* 02/27/2018 - Enacted Author: Solano (R)</p>	<p>Establishes certain provisions regarding pharmacy benefits management. The act prohibits PBMs from prohibiting a pharmacist or pharmacy for providing cost-sharing information on the amount that a covered individual may pay for a prescription drug by a pharmacist or pharmacy. It also prohibits PBMs from "penalizing a pharmacist or pharmacy for providing cost-sharing information on the amount that a covered individual may pay for a particular prescription drug by a pharmacist or pharmacy."</p>
<h2>Tennessee</h2>	
<p><u>TN H 901</u> 2018 Opioid Prescriptions for Enrollees Status: Enacted - Act No. 864 Date of Last Action:* 05/03/2018 - Enacted Author: Kumar (R) Associated Bills: TN S 1227</p>	<p>Requires the Bureau of TennCare promulgate rules for safe coverage of opioid prescriptions by enrollees and for prior authorization requirements for opioid prescriptions for enrollees in certain circumstances. Requires that there be exemptions from prior authorization for enrollees with certain medical conditions.</p>
<p><u>TN S 1852</u> 2018 Pharmacy Benefits Manager Status: Enacted - Act No. 838 Date of Last Action:* 04/27/2018 - Enacted Author: Haile (R) Associated Bills: TN H 1857</p>	<p>Relates to the licensing of pharmacy benefits managers. Requires any person operating in this state as a pharmacy benefits manager be certified by the department of commerce and insurance prior to operating. Sets licensing fees, renewal fees and violation fines.</p>
<p><u>TN S 2155</u> 2018 Opioid Prescription Decrease Status: Enacted - Act No. 843 Date of Last Action:* 04/26/2018 - Enacted Author: Bell (R) Associated Bills: TN H 2001</p>	<p>Amends language related to payment reform initiative within TennCare. Removes charges related to pain relief that decreases the use of opioids from the calculation of costs for episodes of care in the payment reform initiative of the Bureau of TennCare.</p>

<p>TN S 2362 2018 Health Care Status: Enacted - Act No. 1015 Date of Last Action:* 05/21/2018 - Enacted Author: Crowe (R) Associated Bills: TN H 2219</p>	<p>Revises provisions relating to hospital health care and gag clauses. Requires the Department of Health to include a determination of a hospital's compliance with reporting requirements in its annual inspections. Hospitals must report the recipient to local law enforcement for involuntary commitments. A pharmacy or pharmacist has the right to provide an insured information regarding the amount of the insured's cost share for a prescription drug and shall not be penalized for doing such.</p>
<h2>Utah</h2>	
<p>UT H 55 2018 Veterans and Military Affairs Status: Enacted - Act No. 39 Date of Last Action:* 03/15/2018 - Enacted Author: Ray (R)</p>	<p>Clarifies that terms for certain members of the Commission begin on July 1 of the year of appointment. Clarifies that when a vacancy occurs, the appointment to fill the spot begins on July 1. Specifies that if the time between the appointment and the term beginning date is less than six months, the term starts anew on that term beginning date.</p>
<p>UT S 208 2018 Amends the Pharmacy Practice Act Status: Enacted - Act No. 305 Date of Last Action:* 03/19/2018 - Enacted Author: Vickers (R)</p>	<p>Amends the Pharmacy Practice Act. Requires a pharmacy service entity that uses direct or indirect remuneration to report reimbursements to pharmacies or the pharmacy services administration organization. Prohibits a pharmacy benefits manager or coordinator from preventing a pharmacist from disclosing cost information to a patient, also known as "gag clauses".</p>
<h2>Vermont</h2>	
<p>VT S 19 2018 Silver Level Nonqualified Health Benefit Plans Status: Enacted - Act No. 88 Date of Last Action:* 02/20/2018 - Enacted Author: Ayer (D)</p>	<p>Allows silver level nonqualified health benefit plans to be offered outside the state's Health Benefit Exchange. Revises provisions defining health benefit plans for individuals and small employers to include reflective silver plans. Clarifies cost-sharing and rate criteria for reflective silver plans, reflective silver plans are those that do not include funding to offset the loss of federal cost sharing reduction payments.</p>
<p>VT S 92 2018 Interchangeable Biological Products Status: Enacted - Act No. 193 Date of Last Action:* 05/30/2018 - Enacted Author: Lyons (D)</p>	<p>Revises provisions relating to prescription drug price transparency and cost containment. 1) Requires prior authorization to refill a prescription with a drug or biological product different than the originally filled prescription and requires electronic notifications after dispensing biological products. Requires a pharmacist to select the lowest priced drug or interchangeable biological product. 2) Expands the provisions of Vermont's 2016 Rx transparency law to require the Department of Vermont Health Access and health insurers with more than 5,000 covered lives to create lists of 10 prescription drugs for which the payer's net cost has increased by 50 percent or more over the past five years or 15+ percent annually. The Office of the Attorney General will identify 15 drugs for which the drugs' manufacturers must provide a justification for the price increase or increases. Each manufacturer must also provide a separate version of its justification that will be made public. 3) It prohibits pharmacy benefit managers from prohibiting or penalizing a pharmacy or pharmacist for providing information to an insured about a cost-sharing amount for a prescription drug, disclosing to an insured the cash price of a prescription drug, or selling a lower-cost drug to an insured if one is</p>

	<p>available. 4) Also creates a working group to examine prescription drug pricing throughout the supply chain to identify opportunities for savings and for increasing price transparency that is to provide findings and recommendations to the House Committee on Health Care and the Senate Committee on Health and Welfare.</p>
<p>VT S 164 2018 Unused Prescription Drug Repository Program Status: Enacted - Act No. 114 Date of Last Action:* 05/01/2018 - Enacted Author: Ayer (D)</p>	<p>Directs the Agency of Human Services to evaluate the feasibility of implementing an unused prescription drug repository program to accept and dispense donated prescription drugs and supplies to residents who meet specified eligibility standards. Establishes feasibility report guidelines for an Unused Prescription Drug Repository Program and provides a list of factors for the Agency to consider and timeline to report on analysis and recommendations.</p>
<p>VT S 175 2018 Wholesale Importation of Prescription Drugs Status: Enacted - Act No. 133 Date of Last Action:* 05/16/2018 - Enacted Author: Ashe (D)</p>	<p>Relates to the wholesale importation of prescription drugs into Vermont. Creates a wholesale importation program to purchase high-cost drugs through authorized wholesalers, who will purchase the drugs in Canada and make them available to Vermonters through an existing supply chain that includes local pharmacies. The bill requires Vermont's Agency for Human Services, in consultation with stakeholders and the federal government, to design and submit an importation proposal to the state legislature on or before Jan. 1, 2019 and further requires the agency to submit its proposal to the federal government on or before July 1, 2019, for final approval. The importation program must be operational within six months of approval of the financing strategy, certification, and federal government sign-off. Also addresses the impact of prescription drug costs on health insurance premiums.</p>
<p>VT S 262 2018 Medicaid Program Status: Enacted - Act No. 210 Date of Last Action:* 06/01/2018 - Enacted Author: Ayer (D)</p>	<p>Revises several provisions relating to the administration of the Medicaid program and the Department of Vermont Health Access. Amends qualification criteria concerning Social Security income for medical assistance, provides for appeals, defines terms regarding asset verification and financial institutions and sets maximum out of pocket prescription drug limits for bronze plans. Adopts rules to establish a process for beneficiaries requesting fair hearings. Amends composition of the Health Reform Oversight Committee. Repeals a section on actual price disclosure and certification of prescription drugs.</p>
<p>VT H 404 2018 Medicaid Reimbursement for Long Acting Contraceptives Status: Enacted - Act No. 138 Date of Last Action:* 05/21/2018 - Enacted Author: Till (D)</p>	<p>Requires Medicaid to reimburse health care providers for the full cost of a long acting reversible contraceptive inserted during a beneficiary's postpartum hospital stay. Requires each health insurer to determine how to provide coverage for over the counter oral and emergency contraceptives in its Exchange or non-Exchange plans without requiring a prescription and cost sharing. Sets effective dates.</p>
<p>Virginia</p>	

<p>VA H 234 2018 Health Insurance Status: Enacted - Act No. 561 Date of Last Action:* 03/30/2018 - Enacted Author: Hope (D)</p>	<p>Amends Virginia Code regarding health insurance, prescription drug coverage, and synchronization of medications. Requires any health plan providing prescription drug coverage to permit and apply a prorated daily cost sharing rate to prescriptions that are dispensed by a network pharmacy for a partial supply, if the prescribing provider or the pharmacist determines the fill or refill to be in the best interest of the enrollee and the enrollee requests or agrees to a partial supply for synchronizing the enrollee's medications. No health plan providing prescription drug coverage shall deny coverage for dispensing a partial supply of medication or use payment structures incorporating prorated dispensing fees.</p>
<p>VA S 544 2018 Prescription Drug Donation Program Status: Enacted - Act No. 376 Date of Last Action:* 03/19/2018 - Enacted Author: Obenshain (R)</p>	<p>Amends and reenacts code related to the state prescription drug donation and reuse program. Requires that the existing drug donation program regulated by the Board of Pharmacy accept eligible unused drugs from individuals, manufacturers, nursing homes, assisted living facilities, intermediate care facilities established for individuals with intellectual disability (ICF/IID), licensed hospitals, or any facility operated by the Department of Behavioral Health and Developmental Services and provides that pharmacies may re-dispense such drugs. Includes a good faith clause to protect individuals from criminal and civil liability.</p>
<p>VA S 933 2018 Prescription Drug Copayment Limits Status: Enacted - Act No. 602 Date of Last Action:* 03/30/2018 - Enacted Author: Saslaw (D) Drugs, Cost Sharing and Deductibles - Consumers Associated Bills: VA H 1177</p>	<p>Relates to health insurance copayments and transparency for prescription drugs. Prohibits any clawback contract between a health carrier or its pharmacy benefits manager and a pharmacy or pharmacist from containing a provision that requires an enrollee to make a copayment for a covered prescription drug in an amount that exceeds the lesser of the applicable copayment for the prescription drug or the cash price the enrollee would pay for the prescription drug if the enrollee purchased.</p>
<p>VA H 1177 2018 Pharmacists and Pharmacy Practices Status: Enacted - Act No. 245 Date of Last Action:* 03/09/2018 - Enacted Author: Pillion (R) Associated Bills: VA S 933</p>	<p>Relates to pharmacy practices and permitted disclosures. A pharmacy benefits manager from cannot prohibit a pharmacist or pharmacy from providing an enrollee individual information on the amount of the enrollee's cost share for the enrollee's prescription drug and the clinical efficacy of a more affordable alternative drug if one is available, also known as gag clauses.</p>
<p>Washington</p>	
<p>WA S 6219 2018 Health Plan Coverage of Reproductive Health Care Status: Enacted - Act No. 119 Date of Last Action:* 03/21/2018 - Enacted Author: Hobbs (D)</p>	<p>Concerns health plan coverage and access to reproductive health care. Requires health plans provide coverage for all contraceptive drugs, devices, and other products and voluntary sterilization procedures. A health plan that provides coverage for maternity care or services must also provide a covered person with substantially equivalent coverage to permit the abortion of a pregnancy. The Interagency Coordinating Council on Health Disparities shall provide a literature review of disparities in access to reproductive health care and make recommendations to the governor and relevant committees.</p>
<p>West Virginia</p>	

<p>WV S 46 2018 Prescribed Drugs Cost Alternatives Information Status: Enacted - Act No. 123 Date of Last Action:* 03/21/2018 - Enacted Author: Cline (R)</p>	<p>Permits pharmacists to inform customers of lower cost alternative drugs and cost share to assist health care consumers in making informed decisions. Prohibits pharmacy benefit managers (PBMs) from penalizing a pharmacy for discussing certain information with consumers (gag clauses). Prohibits PBMs from collecting cost shares exceeding the total submitted charges by a pharmacy. Sets limitations on PBMs when charging certain adjudicated claim fees to a pharmacy.</p>
<h2>Wisconsin</h2>	
<p>WI A 608 2018 Delegation of the Practice of Pharmacy Status: Enacted - Act No. 293 Date of Last Action:* 04/16/2018 - Enacted Author: Rohrkaste (R)</p>	<p>Further defines remote dispensing by allowing its use by any pharmacy-licensed entity.</p>
<h2>Wyoming</h2>	
<p>WY S 105 2018 Drug Donation and Redispensing Program Status: Enacted - Act No. 130 Date of Last Action:* 03/14/2018 - Enacted Author: Hastert (D)</p>	<p>Expands the state drug donation and redispensing program. The department shall provide access to computer systems and technical assistance to aid individuals in applying for government and private prescription drug programs and discounts, authorizes four part-time positions, provides an appropriation of \$400,000, provides for an effective date of 7/1/2018 with a report due 10/1/2018.</p>

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The NCSL Prescription Drug Policy Resource Center is supported in part by a grant from the Laura and John Arnold Foundation. Editorial content is the sole responsibility of NCSL.