HLS 24RS-970 REENGROSSED

2024 Regular Session

HOUSE BILL NO. 603

1

BY REPRESENTATIVE FIRMENT

INSURANCE/HEALTH: Provides relative to claims of pharmacies and pharmacists

AN ACT

2	To amend and reenact R.S. 22:1852(introductory paragraph) and (7) and
3	1856.1(B)(introductory paragraph) and (2)(b), relative to claims of pharmacies and
4	pharmacists; to modify definitions; to provide relative to pharmacy record audits;
5	and to provide for related matters.
6	Be it enacted by the Legislature of Louisiana:
7	Section 1. R.S.22:1852(introductory paragraph) and (7) and 1856.1(B)(introductory
8	paragraph) and (2)(b) are hereby amended and reenacted to read as follows:
9	§1852. Definitions
10	As used in this Subpart, the following terms shall be are defined as follows:
11	* * *
12	(7) "Health insurance issuer" means an insurance company, including a
13	health maintenance organization as defined and licensed pursuant to Subpart I of Part
14	I of Chapter 2 of this Title, unless preempted as an employee benefit plan under the
15	Employee Retirement Income Security Act of 1974. For purposes of this Subpart,
16	a "health insurance issuer" shall include includes the Office of Group Benefits, a
17	pharmacy benefit manager, and any person acting on behalf of a pharmacy benefit
18	manager.
19	* * *

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CODING: Words in struck through type are deletions from existing law; words <u>underscored</u> are additions.

1 §1856.1. Pharmacy record audits; recoupment; appeals 2 3 B. Notwithstanding any other provision of law to the contrary, when an audit 4 or other review of the records of a pharmacy is conducted by an entity, the audit it 5 shall be conducted in accordance with the following criteria: 6 7 (2) 8 9 (b) Nothing in this Paragraph shall prohibit prohibits review of a claim filed 10 by a pharmacy to determine if the claim is payable or is paid correctly. Such review 11 may require the submission of prescription copies and other documentation related 12 to the specific claims under review but shall not require the pharmacy to provide any 13 additional information not related to those specific claims. 14

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 603 Reengrossed

2024 Regular Session

Firment

Abstract: Provides relative to claims and records of pharmacies and pharmacists.

<u>Present law</u> defines "health insurance issuer". <u>Proposed law</u> modifies the definition to include a pharmacy benefit manager and any person acting on behalf of a pharmacy benefit manager. Otherwise retains <u>present law</u>.

<u>Present law</u> provides for audits of pharmacy records. <u>Proposed law</u> retains <u>present law</u> but provides for other reviews of pharmacy records.

<u>Present law</u> does not prohibit the review of a claim filed by a pharmacy to determine if the claim is payable or paid correctly. Provides that such review may require the pharmacy's submission of prescription copies and other documentation related to the specific claims under review.

<u>Proposed law</u> deletes the potential requirement for a pharmacy to submit prescription copies and other documentation. Otherwise retains present law.

(Amends R.S. 22:1852(A)(intro. para.) and (7) and 1856.1(B)(intro. para.) and (2)(b))

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Summary of Amendments Adopted by House

The Committee Amendments Proposed by <u>House Committee on Insurance</u> to the <u>original</u> bill:

- 1. Modify the definition of "health insurance issuer" to remove the agent of an insurance company from inclusion in the definition. Provide that a "health insurance issuer" includes a pharmacy benefit manager and any person acting on behalf of a pharmacy benefit manager.
- 2. Make technical changes.