## HOUSE COMMITTEE AMENDMENTS

2025 Regular Session

Amendments proposed by House Committee on Insurance to Original House Bill No. 264 by Representative Echols

## 1 AMENDMENT NO. 1

- 2 On page 1, line 2, after "reenact" delete the remainder of the line and delete lines 3 through
- 5 in their entirety and insert in lieu thereof "R.S. 22:1657.1(A) and (B)(introductory
- 4 paragraph) and (4) and to enact R.S. 22:1657.1(D) and 1860.3(F), relative to pharmacy
- 5 benefit managers; to modify the definition of rebates; to provide for reimbursement of
- 6 pharmacists and pharmacies; to provide for the commissioner of insurance's examination of
- 7 records and reimbursement programs; and to provide for related matters."

## 8 AMENDMENT NO. 2

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9 On page 1, delete lines 7 through 19 in their entirety and insert in lieu thereof the following:

"Section 1. R.S. 22:1657.1(A) and (B)(introductory paragraph) and (4) are hereby amended and reenacted and R.S. 22:1657.1(D) and 1860.3(F) are hereby enacted to read as follows:

§1657.1. Pharmacy benefit manager rebate transparency report; examination by commissioner

A. Each pharmacy benefit manager licensed by the commissioner of insurance shall submit an annual transparency report as a condition of maintaining licensure.

B. As used in this Section, the following definitions shall apply:

\* \* \*

- (4) "Rebates" means all rebates, discounts, and other price concessions, based on utilization of a prescription drug and paid by the manufacturer or other party other than an enrollee, directly or indirectly, to the pharmacy benefit manager after the claim has been adjudicated at the pharmacy. Rebates shall include a reasonable estimate of any volume-based discount or other discounts mean either of the following:
- (a) Negotiated price concessions such as base price concessions, including those labeled as a rebate or otherwise; reasonable estimates of any price protection rebates; and performance-based price concessions that may accrue directly or indirectly to the health insurance issuer, plan, or other party on behalf of the health insurance issuer or plan, including a pharmacy benefit manager, during the coverage year. These concessions may come from a pharmaceutical manufacturer, dispensing pharmacy, or other party in connection with the dispensing or administration of a prescription drug.
- (b) Reasonable estimates of any negotiated price concessions, fees, and other administrative costs that are passed through, or are reasonably anticipated to be passed through, to the health insurance issuer or plan that serve to reduce the health insurance issuer's or plan's liabilities for a prescription drug.

D.(1) The commissioner may examine the books or records of a pharmacy benefit manager to determine the accuracy of the transparency report; the individual and aggregate amount paid by a health insurance issuer to the pharmacy benefit manager for drugs, devices, or services provided by a pharmacist or pharmacy; and the individual and aggregate amount a pharmacy benefit manger paid to a pharmacist or pharmacy for drugs, devices, or services.

(2) This Section does not limit the power of the commissioner to examine or audit the books or records of a pharmacy benefit manager.

§1860.3. Reimbursements; review by commissioner

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

1	* * *
2	F. (1) The commissioner shall review and approve the compensation program
3	of a pharmacy benefit manager or person acting on behalf of a pharmacy benefit
4	manager with a health insurance issuer, pharmacy services administrative
5	organization, pharmacy, or pharmacist, or any person acting on their behalf, to
6	ensure that the reimbursement for drugs, devices, and services paid to the pharmacis
7	or pharmacy is fair and reasonable.
8	(2) Information provided to the commissioner, as well as the terms and
9	conditions of any contract and such other proprietary information, as specifically
10	identified by the pharmacy benefit manager, shall be given confidential treatment
11	and shall not be subject to subpoena nor be made public by the commissioner or any
12	other person, except to the insurance departments of other states or any adjudicatory
13	hearing or court proceeding invoked by the commissioner in accordance with the
14	provisions of this Part "