
The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Senate Legislative Services. The keyword, summary, 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)]

SB 337 Original

DIGEST
2026 Regular Session

Harris

Present law provides for definitions.

Proposed law retains present law and adds definitions for "enrollee", "healthcare service", "person", "pharmacy benefit management fee", "pharmacy benefit management service", "provider", and "related entity". Proposed law also amends the definition for "rebates".

Proposed law provides for a PBM's duty of care and good faith and fair dealing to enrollees, health plans, and providers.

Proposed law provides for PBM compensation through pharmacy benefit manager fees and prohibits a PBM from retaining rebates and fees.

Proposed law allows the commissioner of insurance and any health insurance issuer or health plan contracted with a PBM to audit the PBM once per calendar year. Proposed law further provides for information that may be requested as part of the audit and provides for the protection of confidential and proprietary information through a public records exemption.

Proposed law requires PBM contracts to specify all forms of revenue to be paid by the health insurance issuer or health plan to the pharmacy benefit manager and to acknowledge that spread pricing is not permitted.

Proposed law provides that, in addition to any other civil or criminal penalty authorized by law, a violation of proposed law is punishable by the commissioner through a civil monetary penalty not to exceed \$1,000 per claim.

Proposed law is to be implemented to regulate a PBM or health insurance issuer only to the extent permissible under applicable law.

Effective August 1, 2026.

(Amends R.S. 22:1863 and R.S. 44:4.1(B)(11); adds R.S. 22:1867.1; repeals R.S.22:1868.1)