

GREEN SHEET REDIGEST

HB 1236

2026 Regular Session

Dewitt

INSURANCE: Provides relative to pharmacy benefit managers reimbursements.

DIGEST

Present law prohibits pharmacy benefit managers or persons acting on behalf of a pharmacy benefit manager from reimbursing a contracted or local pharmacy or pharmacist in this state an amount less than the acquisition cost for the covered drug, device, or service. Proposed law retains present law.

Present law defines certain terms. Proposed law amends the definitions of "acquisition cost" and "reimbursement formula" and adds "professional dispensing fee" to the list of definitions.

Proposed law provides additional reimbursement guidelines for a claim submitted by any local pharmacy to a pharmacy benefit manager administering claims on behalf of a health plan, except for the Office of Group Benefits.

Proposed law deletes adjustment factors from the prescription drug reimbursement formula.

Proposed law retains present law relative to appeals process for pharmacists to challenge claim payment errors, but makes technical changes.

Proposed law prohibits pharmacy benefit managers from amending or changing the amount a prescription drug consumer must pay for an out-of-pocket cost share or expense.

Proposed law requires pharmacy benefit managers to bear all costs associated with the reimbursement of professional dispensing fees. Proposed law prohibits such costs from being assigned to plans, members, pharmacies, and pharmacists.

Proposed law authorizes the commissioner of insurance to require submission of claims-level data, including but not limited to reimbursement amounts, dispensing fees, and any adjustments, for the purpose of verifying compliance with proposed law.

Proposed law provides that the provisions of proposed law shall be given prospective and retroactive application.

Proposed law requires the reimbursement formula created by proposed law to be retroactively adopted dating back to Jan. 1, 2026.

Effective upon signature of governor or lapse of time for gubernatorial action.

(Amends R.S. 22:1868(B)(intro. para.), (1), and (4) and (C)(1), (2), and (3)(c) and (d); adds R.S. 22:1868(B)(5), (D), and (E); repeals R.S. 22:1868(B)(2))

Summary of Amendments Adopted by House

The House Floor Amendments to the engrossed bill:

1. Re-define the term "reimbursement formula".
2. Add provision that a health insurance issuer or pharmacy benefit manager may implement copay assistance benefit plans, also known as copay maximizer plans, for its members or enrollees as permitted by federal law. Participation by a member or enrollee shall be optional.
3. Provide for retroactive application for the reimbursement formula.
4. Repeal statutory provisions in present law (R.S. 22:1868(B)(2)).

5. Make technical changes.

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the reengrossed bill

1. Delete provisions of proposed law authorizing copay assistance benefit plans.
2. Make technical changes.