1	INTERIM STUDY PROPOSAL 2017-111
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3	REQUESTING THAT THE HOUSE COMMITTEE ON PUBLIC HEALTH, WELFARE, AND
4	LABOR STUDY MODIFYING PHARMACY BENEFITS MANAGEMENT SERVICES WITHIN THE
5	ARKANSAS WORKS PROGRAM.
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7	WHEREAS, in 2013, the State of Arkansas took a unique approach to
8	implementing the Patient Protection and Affordable Care Act, Pub. L. No. 111-
9	148, to expand the Arkansas Medicaid Program to certain populations through
10	private health insurance; and
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12	WHEREAS, under the Health Care Independence Act of 2013, § 20-77-2401
13	et seq., eligible individuals could enroll in a qualified health plan through
14	the Arkansas Health Insurance Marketplace; and
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16	WHEREAS, under the Health Care Independence Act of 2013, § 20-77-2401
17	et seq., the Department of Human Services pays the premiums and some amounts
18	of cost-sharing for individuals enrolled in a qualified health plans; and
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20	WHEREAS, the Health Care Independence Program established by the Health
21	Care Independence Act of 2013, § 20-77-2401 et seq., terminated on December
22	31, 2016; and
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24	WHEREAS, the Arkansas Works Act of 2016, § 23-61-1001 et seq.,
25	established the Arkansas Works Program; and
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27	WHEREAS, three (3) private insurance companies, Arkansas Blue Cross and
28	Blue Shield, Ambetter from Arkansas Health & Wellness Insurance Company, and
29	QualChoice Life and Health Insurance Company, Inc., offer qualified health
30	plans to individuals enrolled in the Arkansas Works beneficiaries through the
31	Arkansas Health Insurance Marketplace; and
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33	WHEREAS, in January 2018, complaints arose regarding the practices of
34	pharmacy benefits managers used by the three (3) private insurance companies
35	to utilize pharmacy benefits management services for qualified health plans;
36	and

WHEREAS, during the Second Extraordinary Session of 2018, the General Assembly enacted laws to address the oversight of the pharmacy benefits managers as well as other subject matters, but did not address best practices for delivering pharmacy benefits management services on the Arkansas Works Program; and

WHEREAS, "pharmacy benefits management services" means services that manage the provision of pharmacy benefit services, including without limitation claims processing services, network management, benefit consultation, formulary development, drug coverage policy development, and rebate management; and

WHEREAS, an alternative model for pharmacy benefits management services exists as implemented by the Employee Benefits Division of the Department of Finance and Administration through the College of Pharmacy of the University of Arkansas for Medical Sciences, which divides pharmacy benefits management services between a pharmacy benefits manager that provides claims processing services and network management and a managing consultant organization that provides all other pharmacy benefits management services; and

WHEREAS, this alternative model for pharmacy benefits management services is often referred to as a "managing consultant model"; and

WHEREAS, the General Assembly has not undertaken research to determine whether a managing consultant model would suit the Arkansas Works Program better than the present model of providing pharmacy benefits management services; and

WHEREAS, based on the complaints about the practices of pharmacy benefits managers, a need exists to explore alternative models for providing pharmacy benefits management services to consumers in Arkansas,

- 34 NOW THEREFORE,
- 35 BE IT PROPOSED BY THE HOUSE COMMITTEE ON PUBLIC HEALTH, WELFARE, AND LABOR OF
- 36 THE NINETY-FIRST GENERAL ASSEMBLY:

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2	THAT the House Committee on Public Health, Welfare, and Labor study
3	alternative models for providing pharmacy benefits management services to
4	individuals enrolled in the Arkansas Works Program for purpose of maximizing
5	savings to the state and federal taxpayers and to ensure that benefits
6	subsidized by state or federal dollars can gain access to these alternative
7	models.
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9	BE IT FURTHER PROPOSED THAT, the following entities assist, if
10	requested, the House Committee on Public Health, Welfare, and Labor:
11	(1) The Department of Human Services;
12	(2) The State Insurance Department;
13	(3) The Employee Benefits Division of the Department of Finance
14	and Administration;
15	(4) The College of Pharmacy of the University of Arkansas for
16	Medical Sciences; and
17	(5) The Arkansas Health Insurance Marketplace.
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19	Respectfully submitted,
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23	Representative Kim Hammer
24	District 28
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26	Prepared by: JMB/JMB
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