1	State of Arkansas	A Bill	
2	90th General Assembly	A DIII	CENIATE DILL 600
3	Regular Session, 2015		SENATE BILL 688
4 5	By: Senators Caldwell Maloch G	Stubblefield	
6	By: Senators Caldwell, Maloch, G. Stubblefield By: Representatives M. Gray, Vaught, Eubanks, Bragg		
7	by. Representatives ivi. Gray, vac	ight, Dubanks, Bragg	
8		For An Act To Be Entitled	
9	AN ACT TO AMEND THE LAWS REGARDING MAXIMUM ALLOWABLE		
10	COST LISTS; TO CREATE ACCOUNTABILITY IN THE		
11	ESTABLISHMENT OF PRESCRIPTION DRUG PRICING; AND FOR		
12	OTHER PURPOSES.		
13			
14			
15		Subtitle	
16	TO AMEND	THE LAWS REGARDING MAXIMUM	
17	ALLOWABI	LE COST LISTS; AND TO CREATE	
18	ACCOUNTA	ABILITY IN THE ESTABLISHMENT	OF
19	PRESCRIF	PTION DRUG PRICING.	
20			
21			
22	BE IT ENACTED BY THE GENE	RAL ASSEMBLY OF THE STATE OF	ARKANSAS:
23			
24	SECTION 1. Arkansa	s Code § 17-92-507 is amended	d to read as follows:
25	17-92-507. Maximum	Allowable Cost Lists.	
26	(a) As used in thi		
27		Allowable Cost List" means a	
28	• •	nager setting the maximum all	
29	-	cy or pharmacist may be based	
30		eutical wholesaler" means a p	•
31		scription pharmaceutical prod	-
32		brand-name, generic, and ove	
33	_	offers regular and private of	
34 35		macist" means a licensed phar	rmacist as delined in §
35 36	17-92-101;	magist sorvices" mages and	ata sooda on somilar-
20	(3) (4) "Phar	macist services" means produc	cis, goods, or services

- 1 provided as a part of the practice of pharmacy in Arkansas; 2 $\frac{(4)}{(5)}$ "Pharmacy" means the same as in § 17-92-101; (5)(6) "Pharmacy acquisition cost" means the amount that a 3 4 pharmaceutical wholesaler currently charges for a pharmaceutical product as 5 listed on the pharmacy's billing invoice; 6 "Pharmacy benefits manager" means an entity that administers 7 or manages a pharmacy benefits plan or program; and 8 (8) "Pharmacy benefits manager affiliate" means a pharmacy or 9 pharmacist that directly or indirectly, through one (1) or more 10 intermediaries owns or controls, is owned or controlled by, or is under 11 common ownership or control with a pharmacy benefits manager; and 12 (6)(9) "Pharmacy benefits plan or program" means a plan or 13 program that pays for, reimburses, covers the cost of, or otherwise provides 14 for pharmacist services to individuals who reside in or are employed in this 15 state. 16 Before a pharmacy benefits manager places or continues a 17 particular drug on a Maximum Allowable Cost List, the drug: 18 (1) Shall be listed as therapeutically equivalent and 19 pharmaceutically equivalent "A" or "B" "AB" rated in the United States Food and Drug Administration's most recent version of the "Orange Book" or "Green 20 Book" or has an NR or NA rating by $Medi-span^{TM}$ or a similar rating by a 21 22 nationally recognized reference; 23 (2) Shall be available for purchase by each pharmacy in the 24 state from national or regional wholesalers operating in Arkansas; 25 and
- 26 Shall not be obsolete. (3)

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- 27 (c) A pharmacy benefits manager shall:
 - (1) Provide access to its Maximum Allowable Cost List to each pharmacy subject to the Maximum Allowable Cost List;
- 30 (2) Update its Maximum Allowable Cost List on a timely basis, 31 but in no event longer than seven (7) calendar days from an increase of ten 32 percent (10%) or more in the pharmacy acquisition cost or a change in the methodology on which the Maximum Allowable Cost List is based or in the value 33 34 of a variable involved in the methodology;
- 35 (3) Provide a process for each pharmacy subject to the Maximum 36 Allowable Cost List to receive prompt notification of an update to the

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    Maximum Allowable Cost List; and
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                 (4)(A)(i) Within three (3) business days after the applicable
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     fill date, provide Provide a reasonable administrative appeal procedure to
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     allow pharmacies to challenge maximum allowable costs for a specific drug or
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     drugs as:
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                             (i)(a) Not meeting the requirements of this section;
 7
     or
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                             (ii)(b) Being below the cost at which the pharmacy
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     may reasonably obtain the drug.
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                             (ii) The reasonable administrative appeal procedure
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     shall include the following:
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                                   (a) A dedicated telephone number and email
     address or website for the purpose of submitting administrative appeals;
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                                   (b) The ability to submit an administrative
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     appeal directly to the pharmacy benefits manager regarding the pharmacy
     benefits plan or program, or through a pharmacy third-party contacting
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     entity, including a pharmacy service administrative organization; and
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                                   (c) No less than seven (7) business days to
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     file an administrative appeal.
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                       (B) The pharmacy benefits manager shall respond to the
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     challenge under subdivision (c)(4)(A)(i) of this section within seven (7)
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     business days after receipt of the challenge.
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                       (C) If a challenge is under subdivision (c)(4)(A)(i) of
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     this section, the pharmacy benefits manager shall within seven (7) business
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     days after receipt of the challenge either:
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                             (i) If the appeal is upheld:
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                                   (a) Make the change in the maximum allowable
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     cost;
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                                   (b) Permit the challenging pharmacy or
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     pharmacist to reverse and rebill the claim in question; and
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                                   (c) Provide the National Drug Code number that
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     the increase or change is based on to the pharmacy or pharmacist; and
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                                   (c)(d) Make the change under subdivision
     (c)(4)(C)(i)(a) of this section effective for each similarly situated
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     pharmacy as defined by the payor subject to the Maximum Allowable Cost List;
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     or
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1	(ii) If the appeal is denied, provide the		
2	challenging pharmacy or pharmacist the National Drug Code number from and the		
3	name of the national or regional pharmaceutical wholesalers operating in		
4	Arkansas that have the drug currently in stock at a price below the Maximum		
5	Allowable Cost List+; or		
6	(iii) If the National Drug Code number provided by		
7	the pharmacy benefits manager is not available below the pharmacy acquisition		
8	cost from the pharmaceutical wholesaler when the pharmacy or pharmacist		
9	purchases the majority of prescription drugs for resale, then the pharmacy		
10	benefits manager shall adjust the Maximum Allowable Cost List above the		
11	challenging pharmacy's pharmacy acquisition cost.		
12	(d)(1) A pharmacy benefits manager shall be subject to disciplinary		
13	oversight by the Arkansas State Board of Pharmacy.		
14	(2) The board may:		
15	(A) Fine the pharmacy benefits manager or take other		
16	action against the pharmacy benefits manager; and		
17	(B) Force a reasonable change in a Maximum Allowable Cost		
18	List if the administrative appeals procedure does not produce a resolution		
19	based on current product availability and pricing from pharmaceutical		
20	wholesalers in the state.		
21	(e) A pharmacy benefits manager shall not reimburse a pharmacy or		
22	pharmacist in the state an amount less than the amount reimbursed to a		
23	pharmacy benefits manager affiliate for providing the same pharmacist		
24	services.		
25	(f) A pharmacy or pharmacist may decline to provide the pharmacist		
26	services to a patient or pharmacy benefits manager if, as a result of a		
27	Maximum Allowable Cost List, a particular drug is purchased below the		
28	pharmacy acquisition cost of the pharmacy providing pharmacist services.		
29	(g)(1) This section does not apply to a Maximum Allowable Cost List		
30	maintained by the <u>Arkansas</u> Medicaid Program.		
31	(2) This section shall apply to the pharmacy benefits manager		
32	employed by the Arkansas Medicaid Program if, at any time, the Arkansas		
33	Medicaid Program engages the services of a pharmacy benefits manager to		
34	maintain a Maximum Allowable Cost List.		
35	(e)(h) A violation of this section is a deceptive and unconscionable		
36	trade practice under § 4-88-101 et seq.		