1	State of Arkansas	$\mathop{\mathrm{As}}_{Bill}^{Engrossed:} \mathbb{S}^{3/12/15}$		
2	90th General Assembly	A Bill		
3	Regular Session, 2015		SENATE BILL 688	
4				
5	By: Senators Caldwell, Maloch,			
6	By: Representatives M. Gray, V.	aught, Eubanks, Bragg		
7				
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 PURPOS	SES.		
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15		Subtitle		
16	TO AME	ND THE LAWS REGARDING MAXIMUM		
17	ALLOWAI	BLE COST LISTS; AND TO CREATE		
18	ACCOUNT	TABILITY IN THE ESTABLISHMENT OF		
19	PRESCR:	IPTION DRUG PRICING.		
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21				
22	BE IT ENACTED BY THE GEN	NERAL ASSEMBLY OF THE STATE OF AR	KANSAS:	
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24		sas Code § 17-92-507 is amended t	o read as follows:	
25		um Allowable Cost Lists.		
26	(a) As used in th			
27		um Allowable Cost List" means a 1	-	
28		manager setting the maximum allow	able cost on which	
29	-	macy or pharmacist may be based;		
30		aceutical wholesaler" means a per	-	
31	-	rescription pharmaceutical produc	-	
32		of brand-name, generic, and over-		
33	_	at offers regular and private del	-	
34		armacist" means a licensed pharma	cist as defined in §	
35	17-92-101;			
36	(3) (4) "Pha	armacist services" means products	, goods, or services	

As Engrossed: S3/12/15 SB688

1 provided as a part of the practice of pharmacy in Arkansas; 2 (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 charges for a pharmaceutical product as listed on 5 the pharmacy's billing invoice; 6 "Pharmacy benefits manager" means an entity that administers (7) 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" rated in the United States Food and 20 Drug Administration's most recent version of the "Orange Book" or "Green Book" or has an NR or NA rating by Medi-span Gold Standard, or a similar 21 22 rating by a 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; Arkansas; 25 and Shall not be obsolete. 26 (3) 27 (c) A pharmacy benefits manager shall: 28 (1) Provide access to its Maximum Allowable Cost List to each 29 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 from sixty percent (60%) or more of the pharmaceutical wholesaler doing business in the state or 33 34 a change in the methodology on which the Maximum Allowable Cost List is based 35 or in the value of a variable involved in the methodology;

(3) Provide a process for each pharmacy subject to the Maximum

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As Engrossed: S3/12/15 SB688

1	Allowable Cost List to receive prompt notification of an update to the
2	Maximum Allowable Cost List; and
3	(4)(A)(i) Within three (3) business days after the applicable
4	fill date, provide Provide a reasonable administrative appeal procedure to
5	allow pharmacies to challenge maximum allowable costs and reimbursements made
6	under a maximum allowable cost for a specific drug or drugs as:
7	(i)(a) Not meeting the requirements of this section;
8	or
9	(ii)(b) Being below the cost at which the pharmacy
10	may obtain the drug pharmacy acquisition cost.
11	(ii) The reasonable administrative appeal procedure
12	shall include the following:
13	(a) A dedicated telephone number and email
14	address or website for the purpose of submitting administrative appeals;
15	(b) The ability to submit an administrative
16	appeal directly to the pharmacy benefits manager regarding the pharmacy
17	benefits plan or program or through a pharmacy service administrative
18	organization; and
19	(c) No less than seven (7) business days to
20	file an administrative appeal.
21	(B) The pharmacy benefits manager shall respond to the
22	challenge under subdivision (c)(4)(A) $\frac{(i)}{(i)}$ of this section within seven (7)
23	business days after receipt of the challenge.
24	(C) If a challenge is under subdivision $(c)(4)(A)$ of
25	this section, the pharmacy benefits manager shall within seven (7) business
26	days after receipt of the challenge either:
27	(i) If the appeal is upheld:
28	(a) Make the change in the maximum allowable
29	cost;
30	(b) Permit the challenging pharmacy or
31	pharmacist to reverse and rebill the claim in question; and
32	(c) Provide the National Drug Code number that
33	the increase or change is based on to the pharmacy or pharmacist; and
34	(e)(d) Make the change under subdivision
35	(c)(4)(C)(i)(a) of this section effective for each similarly situated
36	pharmacy as defined by the payor subject to the Maximum Allowable Cost List;

As Engrossed: \$3/12/15 SB688

1	or		
2	(ii) If the appeal is denied, provide the		
3	challenging pharmacy or pharmacist the National Drug Code number from and the		
4	name of the national or regional pharmaceutical wholesalers operating in		
5	Arkansas that have the drug currently in stock at a price below the Maximum		
6	Allowable Cost List+; or		
7	(iii) If the National Drug Code number provided by		
8	the pharmacy benefits manager is not available below the pharmacy acquisition		
9	cost from the pharmaceutical wholesaler from whom the pharmacy or pharmacist		
10	purchases the majority of prescription drugs for resale, then the pharmacy		
11	benefits manager shall adjust the Maximum Allowable Cost List above the		
12	challenging pharmacy's pharmacy acquisition cost and permit the pharmacy to		
13	reverse and rebill each claim affected by the inability to procure the drug		
14	at a cost that is equal to or less than the previously challenged maximum		
15	allowable cost.		
16	(d)(1) A pharmacy benefits manager shall not reimburse a pharmacy or		
17	pharmacist in the state an amount less than the amount that the pharmacy		
18	benefits manager reimburses a pharmacy benefits manager affiliate for		
19	providing the same pharmacist services.		
20	(2) The amount shall be calculated on a per unit basis based on		
21	the same generic product identifier or generic code number.		
22	(e) A pharmacy or pharmacist may decline to provide the pharmacist		
23	services to a patient or pharmacy benefits manager if, as a result of a		
24	Maximum Allowable Cost List, a pharmacy or pharmacist is to be paid less than		
25	the pharmacy acquisition cost of the pharmacy providing pharmacist services.		
26	$\underline{(f)(1)}$ This section does not apply to a Maximum Allowable Cost List		
27	maintained by the $\underline{\text{Arkansas}}$ Medicaid $\underline{\textit{Program or the Employee Benefits Division}}$		
28	of the Department of Finance and Administration.		
29	(2) This section shall apply to the pharmacy benefits manager		
30	employed by the Arkansas Medicaid Program or the Employee Benefits Division		
31	if, at any time, the Arkansas Medicaid Program or the Employee Benefits		
32	Division engages the services of a pharmacy benefits manager to maintain a		
33	Maximum Allowable Cost List.		
34	$\frac{(e)(g)}{(g)}$ A violation of this section is a deceptive and unconscionable		

trade practice under \S 4-88-101 et seq.

1	/s/Caldwell
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