

**GREEN SHEET REDIGEST**

**HB 603**

**2024 Regular Session**

**Firment**

**INSURANCE/HEALTH: Provides relative to claims of pharmacies and pharmacists.**

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DIGEST

Present law defines "health insurance issuer". Proposed law modifies the definition to include a pharmacy benefit manager and any person acting on behalf of a pharmacy benefit manager. Otherwise retains present law.

Present law provides for audits of pharmacy records. Proposed law retains present law.

Present law does not prohibit the review of a claim filed by a pharmacy to determine if the claim is payable or paid correctly. Provides that such review may require the pharmacy's submission of prescription copies and other documentation related to the specific claims under review.

Proposed law retains present law.

Proposed law requires the commissioner to formulate and promulgate standards relative to pharmacy record audits, claims reviews, quality assurance reviews, and fraud or willful misrepresentation audits.

(Amends R.S. 22:1852(A)(intro. para.) and (7) and 1856.1(B)(2)(b); adds R.S. 22:1856.1(H))

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Insurance to the original bill:

1. Modify the definition of "health insurance issuer" to remove the agent of an insurance company from inclusion in the definition. Provide that a "health insurance issuer" includes a pharmacy benefit manager and any person acting on behalf of a pharmacy benefit manager.
2. Make technical changes.

Summary of Amendments Adopted by Senate

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

1. Make technical changes.
2. Restore present law relative to the records of a pharmacy.
3. Require the commissioner to formulate and promulgate standards relative to pharmacy record audits, claims reviews, quality assurance reviews, and fraud or willful misrepresentation audits.