RÉSUMÉ DIGEST

ACT 768 (SB 444)

2024 Regular Session

Jackson-Andrews

<u>Existing law</u> provides certain reimbursement requirements and prohibitions for pharmacy benefit managers or persons acting on behalf of a pharmacy benefit manager.

<u>New law</u> prohibits pharmacy benefit managers or persons acting on behalf of pharmacy benefit managers from reimbursing a pharmacy or pharmacist in this state an amount less than the acquisition cost for any covered drug, device, or service. <u>New law</u> applies to only a contracted pharmacist or pharmacy that does not own more than five shares or a five percent interest in a pharmaceutical wholesale group purchasing organization or vendor of any covered drug, device, or service.

<u>Existing law</u> establishes an administrative appeal procedure for pharmacies to challenge reimbursement received from a pharmacy benefit manager. <u>Prior law</u> required the pharmacy benefit manager to make information necessary to resolve a complaint available to the commissioner of insurance upon request.

<u>New law</u> removes the requirement for the commissioner to request the information and requires the pharmacy benefit manager to provide to the commissioner the information necessary to resolve a complaint.

<u>New law</u> does not apply to Office of Group Benefits programs; however, <u>new law</u> requires the Office of Group Benefits to report to the House and Senate committees on insurance concerning the matters of new law by March 31, 2025.

Effective June 19, 2024.

(Amends R.S. 22:1865(E); adds R.S. 22:1860.3(E))