



124th MAINE LEGISLATURE

SECOND REGULAR SESSION-2010

Legislative Document No. 1498

In Senate, December 8, 2009

S.P. 576

An Act To Adopt a Drug Benefit Equity Law

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 203.

Received by the Secretary of the Senate on December 8, 2009. Referred to the Committee on Insurance and Financial Services pursuant to Joint Rule 308.2 and ordered printed.

JOY J. O'BRIEN Secretary of the Senate

Presented by Senator MILLS of Somerset.

1	Be it enacted by the People of the State of Maine as follows:
2	Sec. 1. 24-A MRSA §4317 is enacted to read:
3	§4317. Pharmacy providers
4 5	1. Requirements. A carrier that provides coverage for prescription drugs as part of a health plan:
6 7 8 9 10 11 12	A. Prior to entering into an agreement with a pharmacy provider, must establish terms and conditions that must be met by pharmacy providers desiring to contract with the carrier. The terms and conditions may not discriminate against a pharmacy provider. A carrier may not refuse to contract with a pharmacy provider that meets the terms and conditions established by the health plan. If a pharmacy provider rejects the terms and conditions established, the carrier may offer other terms and conditions necessary to comply with any network adequacy requirements;
13 14 15 16 17	B. Shall apply the same coinsurance, copayment, and deductible factors to all drug prescriptions filled by a pharmacy provider that participates in the health plan's network. Nothing in this subsection prohibits a health plan from applying different coinsurance, copayment and deductible factors between brand name drugs and generic drugs when a generic equivalent exists for the brand name drug; and
18 19 20	C. May not set a limit on the quantity of drugs that an enrollee may obtain at one time with a prescription unless the limit is applied uniformly to all pharmacy providers in the health plan's network.
21 22 23 24	2. Application. The requirements of this section apply to all individual and group policies, contracts and certificates executed, delivered, issued for delivery, continued or renewed in this State. For purposes of this section, all contracts are deemed to be renewed no later than the next yearly anniversary of the contract date.
25	SUMMARY
26 27 28	The purpose of this bill is to bar health insurance carriers from favoring certain types of pharmacies, such as mail order pharmacies, over other types of pharmacies, such as independent retail pharmacies. This bill:
29 30	1. Prohibits a carrier from refusing to contract with a pharmacy provider that meets the terms and conditions established by the health plan;
31 32	2. Requires that coinsurance, copayment and deductible factors be applied uniformly regardless of the type of pharmacy the health plan enrollee chooses; and
33 34 35	3. Prohibits a carrier from limiting the quantity of drugs that an enrollee may obtain at one time unless the limit is applied uniformly to all pharmacy providers within the health plan's network.