

**MARYLAND INSURANCE ADMINISTRATION
MARYLAND DEPARTMENT OF HEALTH
PHARMACEUTICAL SERVICES WORKGROUP MEETING
AGENDA**

**APRIL 15, 2019
10:00 A.M.**

1-470-329-0327 PIN: 750469281#

I. Opening Remarks, including Future Workgroup Meeting Schedule

Wednesday, April 24th, at 2pm
Monday, April 29th, at 10am
Monday, May 6th, at 10am
Tuesday, June 11th, at 2pm
Tuesday, July 9th, at 2pm
Tuesday, August 13th, at 10am
Tuesday, September 10th, 2pm
Tuesday, October 8th, at 10am
Tuesday, November 19th at 10am

All meetings are currently scheduled to be held at the MIA at 200 St. Paul Place, 24th Floor, Baltimore, Maryland 21202. Please note that some meeting locations may change.

II. Discussion Topics

- 1) Department of Health Overview of How Medicaid Market Functions:
 - a. MCO Contracts
 - b. DOH Prescription Drug Benefit Oversight

- 2) New § 15-102.3 of the Health General Article states:

THE PROVISIONS OF § 15–1628.3¹ OF THE INSURANCE ARTICLE APPLY TO PHARMACY BENEFITS MANAGERS THAT CONTRACT WITH MANAGED CARE ORGANIZATIONS IN THE SAME MANNER AS THEY APPLY TO A PHARMACY BENEFITS MANAGERS THAT CONTRACT WITH CARRIERS.

- a. What do the current PBM/Pharmacy contracts say about DIR type fees in the MCO market?

¹ A pharmacy benefits manager or a purchaser may not directly or indirectly charge a contracted pharmacy, or hold a contracted pharmacy responsible for, a fee or performance-based reimbursement related to the adjudication of a claim or an incentive program that is not:

(1) specifically enumerated by the pharmacy benefits manager or purchaser at the time of claim processing; or
(2) reported on the initial remittance advice of an adjudicated claim.

- b. What do the current PBM/Pharmacy contracts say about GER Arrangements or Fees?
 - c. What can the MIA anticipate for volume of complaints to be filed?
- 3) Maryland Insurance Administration Template Form Filing – File and Use

(B) (1) A CONTRACT OR AN AMENDMENT TO A CONTRACT BETWEEN A PHARMACY BENEFITS MANAGER, A PHARMACY SERVICES ADMINISTRATION ORGANIZATION, OR A GROUP PURCHASING ORGANIZATION AND A PHARMACY MAY NOT BECOME EFFECTIVE UNLESS:

- (I) AT LEAST 30 DAYS BEFORE THE CONTRACT OR AMENDMENT IS TO BECOME EFFECTIVE, THE PHARMACY BENEFITS MANAGER, PHARMACY SERVICES ADMINISTRATION ORGANIZATION, OR GROUP PURCHASING ORGANIZATION FILES THE CONTRACT OR AMENDMENT WITH THE COMMISSIONER IN THE FORM REQUIRED BY THE COMMISSIONER; AND
- (II) THE COMMISSIONER DOES NOT DISAPPROVE THE FILING WITHIN 30 DAYS AFTER THE CONTRACT OR AMENDMENT IS FILED.

(2) THE COMMISSIONER SHALL ADOPT REGULATIONS TO ESTABLISH THE CIRCUMSTANCES UNDER WHICH THE COMMISSIONER MAY DISAPPROVE A CONTRACT.

- a. Timing of initial filings?
- b. Contracts have already become effective, so regulations must contemplate this scenario.
- c. So what needs to be filed by the Pharmacy Benefit Managers?
 - i. Nothing that violates new § 15-1628.3 or Title 15, Subtitle
 - ii. What, if anything, should be included as part of the standards for a “form required by the Commissioner”?

III. Wrap Up