

AMENDMENTS TO LB316

Introduced by Banking, Commerce and Insurance.

1           1. Strike the original sections and insert the following new  
2 section:

3           Section 1. (1) For purposes of this section:

4           (a) Contracted pharmacy means a pharmacy located in this state that  
5 participates either in the network of a pharmacy benefit manager or in a  
6 health care or pharmacy benefits management plan through a direct  
7 contract or through a contract with a pharmacy services administration  
8 organization, a group purchasing organization, or another contracting  
9 agent;

10          (b) Covered entity means (i) a nonprofit hospital or medical  
11 services corporation, an insurer, a third-party payor, a managed care  
12 company, or a health maintenance organization, (ii) a health program  
13 administered by the state in the capacity of provider of health insurance  
14 coverage, or (iii) an employer, a labor union, or any other group of  
15 persons organized in the state that provides health insurance coverage;

16          (c) Covered individual means a member, participant, enrollee,  
17 contract holder, policyholder, or beneficiary of a covered entity who is  
18 provided health insurance coverage by the covered entity and includes a  
19 dependent or other person provided health insurance coverage through a  
20 policy, contract, or plan for a covered individual;

21          (d)(i) Insurer means any person providing life insurance, sickness  
22 and accident insurance, workers' compensation insurance, or annuities in  
23 this state.

24          (ii) Insurer includes an authorized insurance company, a prepaid  
25 hospital or medical care plan, a managed care plan, a health maintenance  
26 organization, any other person providing a plan of insurance subject to  
27 state insurance regulation, and an employer who is approved by the

1 Nebraska Workers' Compensation Court as a self-covered entity;

2 (e) Pharmacist has the same meaning as in section 38-2832;

3 (f) Pharmacy has the same meaning as in section 71-425;

4 (g) Pharmacy benefit manager means a person or an entity that  
5 performs pharmacy benefits management services for a covered entity and  
6 includes any other person or entity acting on behalf of a pharmacy  
7 benefit manager pursuant to a contractual or employment relationship;

8 (h) Pharmacy benefits management means the administration or  
9 management of prescription drug benefits provided by a covered entity  
10 under the terms and conditions of the contract between the pharmacy  
11 benefit manager and the covered entity; and

12 (i) Prescription drug means a prescription drug or device or legend  
13 drug or device as defined in section 38-2841.

14 (2) A pharmacist or contracted pharmacy shall not be prohibited from  
15 or subject to penalties or removal from a network or plan for sharing  
16 information regarding the cost, price, or copayment of a prescription  
17 drug with a covered individual or a covered individual's caregiver. A  
18 pharmacy benefit manager shall not prohibit or inhibit a pharmacist or  
19 contracted pharmacy from discussing any such information or selling a  
20 more affordable alternative to a covered individual or a covered  
21 individual's caregiver.

22 (3) An insurer that offers a health plan which covers prescription  
23 drugs shall not require a covered individual to make a payment for a  
24 prescription drug at the point of sale in an amount that exceeds the  
25 lesser of:

26 (a) The covered individual's copayment, deductible, or coinsurance  
27 for such prescription drug; or

28 (b) The amount any individual would pay for such prescription drug  
29 if that individual paid in cash.