

SENATE AMENDMENT NO. _____

Offered by _____ of _____

Amend SS/HCS/House Bill No. 315, Page 35, Section 338.220, Line 25

2 of said page, by inserting immediately after said line the
3 following:

4 "354.535. 1. If a pharmacy, operated by or contracted with
5 by a health maintenance organization, is closed or is unable to
6 provide health care services to an enrollee in an emergency, a
7 pharmacist may take an assignment of such enrollee's right to
8 reimbursement, if the policy or contract provides for such
9 reimbursement, for those goods or services provided to an
10 enrollee of a health maintenance organization. No health
11 maintenance organization shall refuse to pay the pharmacist any
12 payment due the enrollee under the terms of the policy or
13 contract.

14 2. No health maintenance organization, conducting business
15 in the state of Missouri, shall contract with a pharmacy,
16 pharmacy distributor or wholesale drug distributor, nonresident
17 or otherwise, unless such pharmacy or distributor has been
18 granted a permit or license from the Missouri board of pharmacy
19 to operate in this state.

20 3. Every health maintenance organization shall apply the
21 same coinsurance, co-payment and deductible factors to all drug
22 prescriptions filled by a pharmacy provider who participates in

1 the health maintenance organization's network if the provider
2 meets the contract's explicit product cost determination. If any
3 such contract is rejected by any pharmacy provider, the health
4 maintenance organization may offer other contracts necessary to
5 comply with any network adequacy provisions of this act.

6 However, nothing in this section shall be construed to prohibit
7 the health maintenance organization from applying different
8 coinsurance, co-payment and deductible factors between generic
9 and brand name drugs.

10 4. If the co-payment applied by a health maintenance
11 organization exceeds the usual and customary retail price of the
12 prescription drug, enrollees shall only be required to pay the
13 usual and customary retail price of the prescription drug, and no
14 further charge to the enrollee or plan sponsor shall be incurred
15 on such prescription.

16 5. Health maintenance organizations shall not set a limit
17 on the quantity of drugs which an enrollee may obtain at any one
18 time with a prescription, unless such limit is applied uniformly
19 to all pharmacy providers in the health maintenance
20 organization's network.

21 [5.] 6. Health maintenance organizations shall not insist
22 or mandate any physician or other licensed health care
23 practitioner to change an enrollee's maintenance drug unless the
24 provider and enrollee agree to such change. For the purposes of
25 this provision, a maintenance drug shall mean a drug prescribed
26 by a practitioner who is licensed to prescribe drugs, used to
27 treat a medical condition for a period greater than thirty days.
28 Violations of this provision shall be subject to the penalties
29 provided in section 354.444. Notwithstanding other provisions of

1 law to the contrary, health maintenance organizations that change
2 an enrollee's maintenance drug without the consent of the
3 provider and enrollee shall be liable for any damages resulting
4 from such change. Nothing in this subsection, however, shall
5 apply to the dispensing of generically equivalent products for
6 prescribed brand name maintenance drugs as set forth in section
7 338.056.

8 376.387. If the co-payment for prescription drugs applied
9 by a health insurer or health carrier, as defined in section
10 376.1350, exceeds the usual and customary retail price of the
11 prescription drug, enrollees shall only be required to pay the
12 usual and customary retail price of the prescription drug, and no
13 further charge to the enrollee or plan sponsor shall be incurred
14 on such prescription."; and

15 Further amend the title and enacting clause accordingly.
16