HB 2690-2 (LC 290) 4/9/19 (LHF/ps)

Requested by HOUSE COMMITTEE ON HEALTH CARE (at the request of Representative Andrea Salinas)

PROPOSED AMENDMENTS TO HOUSE BILL 2690

1 On page 1 of the printed bill, delete lines 7 through 29 and delete page 2 2 and insert:

3 "SECTION 2. (1) As used in this section:

4 "(a) 'Enrollee' means an individual who is a beneficiary under a
5 health plan.

6 "(b) 'Health plan' means a policy or certificate of health insurance 7 offered to an individual, a group or a small employer.

6 "(c) 'Out-of-pocket cost' means the cost to an enrollee to acquire 9 a prescription drug that is covered by a health plan, including any 10 deductible, copayment, coinsurance or other charge specified by the 11 Department of Consumer and Business Services by rule.

12 "(d) 'Pharmacist' has the meaning given that term in ORS 689.005.

13 "(e) 'Pharmacy' has the meaning given that term in ORS 689.005.

14 "(2) An insurer offering a health plan in this state:

15 "(a) May not directly or indirectly restrict a pharmacy or 16 pharmacist from informing an enrollee or penalize a pharmacy or 17 pharmacy for informing an enrollee of the difference between the 18 enrollee's out-of-pocket cost to acquire a prescription drug using the 19 enrollee's health plan coverage and the enrollee's cost to purchase the 20 prescription drug without using the health plan coverage; and

21 "(b) Shall ensure that any entity that contracts with the insurer to

1 manage the pharmacy benefits under a health plan offered by the 2 insurer does not directly or indirectly restrict a pharmacy or 3 pharmacist for informing an enrollee or penalize a pharmacy or 4 pharmacist for informing an enrollee of the difference between the 5 enrollee's out-of-pocket cost to acquire a prescription drug using the 6 enrollee's health plan coverage and the enrollee's cost to purchase the 7 prescription drug without using the health plan coverage.".

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