By: Brown H.B. No. 3678

A BILL TO BE ENTITLED

1	AN ACT
2	relating to implementation of certain cost-saving measures for the
3	Medicaid vendor drug program and child health plan program
4	prescription drug benefits.
5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
6	SECTION 1. Subchapter B, Chapter 531, Government Code, is
7	amended by adding Section 531.0695 to read as follows:
8	Sec. 531.0695. COST-SAVING MEASURES FOR PRESCRIPTION
9	DRUGS. The commission shall implement:
10	(1) uniform limits on prescription drugs provided to a
11	Medicaid recipient, regardless of whether the recipient receives
12	benefits under a fee-for-service model or a managed care model,
13	including the primary care case management model;
13 14	<pre>including the primary care case management model;</pre>
14	(2) cost-containment strategies to:
14 15	(2) cost-containment strategies to: (A) manage prescription drug benefits under the
14 15 16	(2) cost-containment strategies to: (A) manage prescription drug benefits under the Medicaid program and the child health plan program; and
14151617	(2) cost-containment strategies to: (A) manage prescription drug benefits under the Medicaid program and the child health plan program; and (B) where possible, shift from brand name
14 15 16 17 18	(2) cost-containment strategies to: (A) manage prescription drug benefits under the Medicaid program and the child health plan program; and (B) where possible, shift from brand name prescription drug use to generic prescription drug use to achieve a
14 15 16 17 18	(2) cost-containment strategies to: (A) manage prescription drug benefits under the Medicaid program and the child health plan program; and (B) where possible, shift from brand name prescription drug use to generic prescription drug use to achieve a four percent or greater increase in generic prescription drugs, and
14 15 16 17 18 19	(2) cost-containment strategies to: (A) manage prescription drug benefits under the Medicaid program and the child health plan program; and (B) where possible, shift from brand name prescription drug use to generic prescription drug use to achieve a four percent or greater increase in generic prescription drugs, and a corresponding decrease in brand name prescription drugs, under
14 15 16 17 18 19 20 21	(2) cost-containment strategies to: (A) manage prescription drug benefits under the Medicaid program and the child health plan program; and (B) where possible, shift from brand name prescription drug use to generic prescription drug use to achieve a four percent or greater increase in generic prescription drugs, and a corresponding decrease in brand name prescription drugs, under the Medicaid and child health plan programs, as compared to the

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- 1 for under the Medicaid and child health plan programs.
- 2 SECTION 2. If before implementing any provision of this Act
- 3 a state agency determines that a waiver or authorization from a
- 4 federal agency is necessary for implementation of that provision,
- 5 the agency affected by the provision shall request the waiver or
- 6 authorization and may delay implementing that provision until the
- 7 waiver or authorization is granted.
- 8 SECTION 3. This Act takes effect September 1, 2011.