86R24904 LED-F

By:  Hunter, Raney, Zedler, et al. H.B. No. 1455

Substitute the following for H.B. No. 1455:

By:  Lucio III C.S.H.B. No. 1455

A BILL TO BE ENTITLED

AN ACT

relating to the audit of wholesale invoices during certain audits of pharmacists and pharmacies.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1.  Subchapter F, Chapter 1369, Insurance Code, is amended by adding Section 1369.2581 to read as follows:

Sec. 1369.2581.  AUDIT DISCREPANCIES; WHOLESALE INVOICES. (a) A health benefit plan issuer or pharmacy benefit manager that audits wholesale invoices during an audit of a pharmacist or pharmacy may not audit the pharmacy claims of another health benefit plan or pharmacy benefit manager.

(b)  A health benefit plan issuer or pharmacy benefit manager shall reverse a finding of a discrepancy if:

(1)  the National Drug Code for the dispensed drug is in a quantity that is a subunit or multiple of the drug purchased by the pharmacist or pharmacy as supported by a wholesale invoice;

(2)  the pharmacist or pharmacy dispensed the correct quantity of the drug according to the prescription; and

(3)  the drug dispensed by the pharmacist or pharmacy shares all but the last two digits of the National Drug Code of the drug reflected on the supplier invoice.

(c)  A health benefit plan issuer or pharmacy benefit manager must accept as evidence to support the validity of a pharmacy claim related to a dispensed drug:

(1)  subject to validation, including validation by pharmacy purchase order and payment of a supplier invoice, copies of supplier invoices in the pharmacist's or pharmacy's possession, including:

(A)  supplier invoices issued before the date the drug was dispensed and not earlier than 60 days before the first day of the audit period; and

(B)  invoices and any supporting documents from any supplier authorized by federal or state law to transfer ownership of the drug acquired by the pharmacist or pharmacy; and

(2)  reports required by any state board or agency.

(d)  A health benefit plan issuer or pharmacy benefit manager must provide, not later than the fifth business day after the date of a request by the pharmacist or pharmacy, any supporting documents the pharmacist's or pharmacy's suppliers provided to the health benefit plan issuer or pharmacy benefit manager.

SECTION 2.  The changes in law made by this Act apply only to an audit conducted under a contract between a pharmacist or pharmacy and a health benefit plan issuer or pharmacy benefit manager entered into, amended, or renewed on or after the effective date of this Act.

SECTION 3.  This Act takes effect September 1, 2019.