HOUSE BILL 877

45TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2001

INTRODUCED BY

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AN ACT

RELATING TO PRESCRIPTION DRUGS; PROVIDING A PRESCRIPTION DRUG PROGRAM TO ASSIST PERSONS WITHOUT PRESCRIPTION DRUG COVERAGE; CREATING A BOARD; CREATING A FUND.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. SHORT TITLE. -- This act may be cited as the "Prescription Program Act".

Section 2. DEFINITIONS. -- As used in the Prescription Program Act:

- A. "board" means the prescription program board;
- B. "department" means the department of health;
- C. "subsidy grant" means an amount payable to a prescription benefits manager on behalf of an eligible participant or senior citizen for participation in the program;

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- D. "participant" means a person who is determined by the department to be eligible to participate in the program;
- E. "program" means a plan that provides coverage and benefits to a variety of prescription medications for certain residents and senior citizens of the state pursuant to the Prescription Program Act; and
- F. "prescription benefits manager" means an entity that provides pharmaceutical services integrating both the financing and delivery of pharmaceuticals to provide or increase access to pharmaceuticals and to obtain pharmaceuticals at the most favorable and competitive discounted prices available and to increase access to pharmaceuticals.
- Section 3. PRESCRIPTION MEDICATION PURCHASING PROGRAM CONTRACTS ELIGIBILITY PROGRAM GOALS PROGRAM TERMINATION DEFINITION. -
- A. The department shall establish a voluntary, statewide program to provide access to a variety of prescription medications at the lowest possible rate for certain residents and senior citizens of the state.
- B. The department shall contract with at least two prescription benefits managers for the program. The department may contract with only one prescription benefits manager if only one prescription benefits manager responds to .136877.1ms

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the request for proposal.

- C. The contracted prescription benefits manager may allow participants to purchase their prescription medication by mail or through a pharmacy network.
- D. The department shall develop a formulary in consultation with a coalition of consumers, consumer advocacy groups and the prescription benefits managers.
- E. The department may adjust the requirements and terms of the program to ensure compliance with a new or existing federal prescription drug program.

Section 4. ELIGIBILITY. --

- A. A resident of the state is an eligible participant in the prescription program if he:
- (1) does not have prescription drug coverage under a private or public health insurance plan or program; and
- (2) has been domiciled in the state for at least one year prior to the date of application.
- B. A senior citizen is an eligible participant in the program and may qualify for a subsidy grant if he:
- is at least sixty years of age at the time of application for the program;
 - (2) is ineligible for medicaid; and
- (3) has been domiciled in the state for at least one year prior to the date of the application.

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C. The department shall undertake outreach efforts to build public awareness of the program and maximize enrollment for eligible residents and senior citizens.

Section 5. SUBSIDY GRANT. --

- A. The department shall pay a subsidy grant out of the prescription program fund for certain senior citizens to assist them with the cost of the program premium. The payment shall be made directly to the prescription benefits manager with whom the department has entered into a contract.
- B. The amount of the subsidy grant for which a senior citizen may be eligible shall be determined according to the following schedules and available money in the fund:
- (1) if the annual household income is less than twelve thousand seven hundred dollars (\$12,700), ninety percent of the program premium is payable as a subsidy grant;
- (2) if the annual household income is greater than or equal to twelve thousand seven hundred dollars (\$12,700) and less than fourteen thousand eight hundred dollars (\$14,800), eighty percent of the program premium is payable as a subsidy grant;
- (3) if the annual household income is greater than or equal to fourteen thousand eight hundred dollars (\$14,800) and less than seventeen thousand dollars (\$17,000), fifty percent of the program premium is payable as a subsidy grant;

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(4) if the annual household income is greater
than or equal to seventeen thousand dollars (\$17,000) and less
than nineteen thousand one hundred dollars (\$19,100), twenty-
five percent of the program premium is payable as a subsidy
grant;

- (5) if the annual household income is greater than or equal to nineteen thousand one hundred dollars (\$19,100) and less than twenty-one thousand five hundred dollars (\$21,500), ten percent of the program premium is payable as a subsidy grant; and
- (6) if the annual household income is greater than or equal to twenty-one thousand five hundred dollars (\$21,500), no part of the program premium is payable as a subsidy grant.

Section 6. ADMINISTRATION. --

- A. The department is responsible for the administration of the program.
- B. A resident of the state who wishes to become a program participant shall submit an application to the department. The department shall examine the application and shall either grant or deny it within thirty days of receipt. If the application is granted, the department shall assess the program premium established by the department to the participant.
- C. An eligible senior citizen who wishes to . 136877.1ms

receive a subsidy grant shall submit an application to the department. The department shall examine the application and shall either grant or deny it within thirty days of receipt. If the application is granted, the department shall determine the amount of the subsidy grant for which the senior citizen is eligible.

Section 7. PRESCRIPTION PROGRAM BOARD--DUTIES. --

- A. The "prescription program board" is created.
- B. The board shall consist of seven members who shall be appointed by the governor. Each member shall serve a term of four years; except that, initially, three members shall serve terms of two years and two members shall serve terms of three years. No more than three members may be employed by the private insurance or prescription benefits management industry.
- C. Members of the board shall be paid per diem and mileage in accordance with the provisions of the Per Diem and Mileage Act.

D. The board shall:

- (1) meet at the discretion of the chairman but not less than four times per year;
- (2) develop policies and procedures for the expenditure of the interest and income earned on the money in the prescription program fund;
- $\hspace{1cm} \textbf{(3)} \hspace{0.2cm} \textbf{devel} \hspace{0.1cm} \textbf{op} \hspace{0.1cm} \textbf{policies} \hspace{0.1cm} \textbf{and} \hspace{0.1cm} \\ \textbf{.} \hspace{0.1cm} \textbf{136877.} \hspace{0.1cm} \textbf{1ms}$

oversee the department's administration of the program; and

(4) provide to the legislative health and human services committee and the legislative finance committee by October 1 of each year a report on the program's operations and expenditures during the previous fiscal year.

Section 8. PRESCRIPTION PROGRAM FUND. --

- A. The "prescription program fund" is created.
- B. The prescription program fund shall be credited with money received from private sources specifically designated for the fund and money received through federal grants or support. The fund is subject to appropriation by the legislature.
- C. Money deposited in the prescription program fund and all interest earned on money in the fund shall remain in the fund to administer the program. No more than ninety-five percent of the money in the fund appropriated per fiscal year may be expended. No more than ten percent of the money in the fund may be used for administrative expenses or other indirect costs. Any unexpended or unencumbered balance remaining in the fund at the end of a fiscal year shall not revert to the general fund.

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