1	HOUSE BILL 165
2	56TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2024
3	INTRODUCED BY
4	Gail Armstrong and Tara Jaramillo and Crystal Diamond Brantley
5	and Pete Campos
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10	AN ACT
11	RELATING TO PHARMACEUTICAL DRUGS; REQUIRING MEDICAID MANAGED
12	CARE ORGANIZATIONS TO REIMBURSE COMMUNITY-BASED PHARMACY
13	PROVIDERS FOR THE FULL COST OF PRESCRIPTION DRUGS PLUS A
14	PROFESSIONAL DISPENSING FEE; REQUIRING THE HEALTH CARE
15	AUTHORITY DEPARTMENT TO CONDUCT A STUDY TO DETERMINE AND SET A
16	REASONABLE PROFESSIONAL DISPENSING FEE FOR PHARMACY PROVIDERS
17	THAT PROVIDE SERVICES TO MEDICAID RECIPIENTS; MAKING AN
18	APPROPRIATION.
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20	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
21	SECTION 1. A new section of the Public Assistance Act,
22	Section 27-2-12.34 NMSA 1978, is enacted to read:
23	"27-2-12.34. [ <u>NEW MATERIAL</u> ] COMMUNITY-BASED PHARMACY
24	REIMBURSEMENT
25	A. Each managed care organization that contracts
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with the department shall ensure that community-based pharmacy providers that provide services to medicaid recipients are reimbursed as follows:

4 (1) for the ingredient cost of a drug at a
5 value that is at least equal to the national average drug
6 acquisition cost for the prescription drug at the time that the
7 drug is administered or dispensed, or if data for the national
8 average drug acquisition is unavailable, the wholesale
9 acquisition cost of the drug; and

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(2) a professional dispensing fee.

B. Each time that the department issues a request for proposals for managed care organizations, the department shall conduct a study to determine a reasonable professional dispensing fee that covers the costs of dispensing a prescription drug, including the cost of a pharmacist's professional services. Until the department sets a reasonable professional dispensing fee, the professional dispensing fee reimbursed to community-based pharmacy providers shall be equal to the professional dispensing fee reimbursed to communitybased pharmacy providers for covered outpatient drugs in the medicaid fee-for-service program.

C. By January 1, 2025, and annually thereafter, the department shall compile a list of all community-based pharmacy providers in the state and publish the list on the department's website.

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1 D. For the purposes of this section: 2 (1)"community-based pharmacy provider" means 3 a pharmacy that is: 4 (a) open to the public for prescriptions 5 to be filled, regardless of the facility or practice where the 6 prescription was written; 7 (b) located in the state or near the 8 state border, if the border town is a primary source of prescription drugs for medicaid recipients residing in the 9 10 border area; and 11 (c) not: 1) government-owned; 2) 12 hospital-owned; 3) owned by a corporation that owns hospitals; 13 4) an extension of a medical practice or special facility; 5) 14 owned by a corporate chain of pharmacies with stores outside of 15 the state; or 6) a mail-order pharmacy; 16 "ingredient cost" means the actual amount (2) 17 paid to a community-based pharmacy provider for a prescription 18 drug, not including the professional dispensing fee or cost 19 sharing; 20 "managed care organization" means a person (3) 21 or entity eligible to enter into risk-based prepaid capitation 22 agreements with the department to provide health care and 23 related services; 24 "medicaid" means the medical assistance (4) 25 program established pursuant to Title 19 of the federal Social .226982.3

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Security Act and regulations issued pursuant to that act;

2 "medicaid recipient" means a person whom (5) 3 the department has determined to be eligible to receive 4 medicaid-related services;

"national average drug acquisition cost" (6) means the national average of prices at which pharmacies 7 purchase a prescription drug from manufacturers or wholesalers; 8 and

9 (7) "wholesale acquisition cost" means a manufacturer's list price for a prescription drug sold to wholesalers in the United States, not including discounts, rebates or reductions in price."

SECTION 2. APPROPRIATION. -- Seven million five hundred thousand dollars (\$7,500,000) is appropriated from the general fund to the health care authority department for expenditure in fiscal year 2025 to increase reimbursement for community-based pharmacy provider services and to conduct a study to determine a reasonable professional dispensing fee for pharmacy providers. Any unexpended or unencumbered balance remaining at the end of fiscal year 2025 shall revert to the general fund.

**SECTION 3.** EFFECTIVE DATE.--The effective date of the provisions of this act is July 1, 2024.

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