

[DISCUSSION DRAFT]

115TH CONGRESS
2^D SESSION

H. R. _____

To amend title XXVII of the Public Health Service Act and title XVIII of the Social Security Act to prohibit group health plans, health insurance issuers, prescription drug plan sponsors, and Medicare Advantage organizations from limiting certain information on drug prices.

IN THE HOUSE OF REPRESENTATIVES

Mr. CARTER of Georgia introduced the following bill; which was referred to the Committee on _____

A BILL

To amend title XXVII of the Public Health Service Act and title XVIII of the Social Security Act to prohibit group health plans, health insurance issuers, prescription drug plan sponsors, and Medicare Advantage organizations from limiting certain information on drug prices.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the
5 “_____ Act of 2018”.

1 **SEC. 2. PROHIBITION ON LIMITING CERTAIN INFORMATION**
2 **ON DRUG PRICES.**

3 (a) GROUP HEALTH PLANS AND HEALTH INSUR-
4 ANCE ISSUERS.—Subpart II of part A of title XXVII of
5 the Public Health Service Act (42 U.S.C. 300gg–11 et
6 seq.) is amended by adding at the end the following:

7 **“SEC. 2729. INFORMATION ON PRESCRIPTION DRUGS.**

8 “(a) IN GENERAL.—A group health plan or a health
9 insurance issuer offering group or individual health insur-
10 ance coverage shall—

11 “(1) not restrict, directly or indirectly, any
12 pharmacy that dispenses a prescription drug to an
13 enrollee in the plan or coverage from informing (or
14 penalize such pharmacy for informing) an enrollee of
15 any differential between the enrollee’s out-of-pocket
16 cost under the plan or coverage with respect to ac-
17 quisition of the drug and the amount an individual
18 would pay for acquisition of the drug without using
19 any health plan or health insurance coverage; and

20 “(2) ensure that any entity that provides phar-
21 macy benefits management services under a contract
22 with any such health plan or health insurance cov-
23 erage does not, with respect to such plan or cov-
24 erage, restrict, directly or indirectly, a pharmacy
25 that dispenses a prescription drug from informing
26 (or penalize such pharmacy for informing) an en-

1 rollee of any differential between the enrollee’s out-
2 of-pocket cost under the plan or coverage with re-
3 spect to acquisition of the drug and the amount an
4 individual would pay for acquisition of the drug
5 without using any health plan or health insurance
6 coverage.

7 “(b) DEFINITION.—For purposes of this section, the
8 term ‘out-of-pocket cost’, with respect to acquisition of a
9 drug, means the amount to be paid by the enrollee under
10 the plan or coverage, including any cost-sharing (including
11 any deductible, copayment, or coinsurance) and, as deter-
12 mined by the Secretary, any other expenditure.”.

13 (b) PRESCRIPTION DRUG PLAN SPONSORS AND
14 MEDICARE ADVANTAGE ORGANIZATIONS.—Section
15 1860D–4 of the Social Security Act (42 U.S.C. 1395w–
16 104) is amended by adding at the end the following new
17 subsection:

18 “(m) PROHIBITION ON LIMITING CERTAIN INFORMA-
19 TION ON DRUG PRICES.—A PDP sponsor and a Medicare
20 Advantage organization shall ensure that each prescrip-
21 tion drug plan or MA–PD plan offered by the sponsor or
22 organization does not restrict a pharmacy that dispenses
23 a prescription drug or biological from informing, nor pe-
24 nalize such pharmacy for informing, an enrollee in such
25 plan of any differential between the negotiated price of,

1 or copayment or coinsurance for, the drug or biological
2 to the enrollee under the plan and a lower price the indi-
3 vidual would pay for the drug or biological if the enrollee
4 obtained the drug without using any health insurance cov-
5 erage.”.

6 (c) EFFECTIVE DATE.—The amendments made by
7 this section shall apply to plan years beginning on or after
8 January 1, 2020.