

SECOND REGULAR SESSION  
HOUSE COMMITTEE SUBSTITUTE FOR  
**HOUSE BILL NO. 1542**  
**99TH GENERAL ASSEMBLY**

5330H.02C

D. ADAM CRUMBLISS, Chief Clerk

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**AN ACT**

To amend chapter 376, RSMo, by adding thereto one new section relating to pharmacy benefits managers.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Chapter 376, RSMo, is amended by adding thereto one new section, to be  
2 known as section 376.387, to read as follows:

**376.387. 1. For purposes of this section, the following terms shall mean:**

2       **(1) “Covered person”, the same meaning as such term is defined in section**  
3 **376.1257;**

4       **(2) “Health benefit plan”, the same meaning as such term is defined in section**  
5 **376.1350;**

6       **(3) “Health carrier”, the same meaning as such term is defined in section 376.1350;**

7       **(4) “Pharmacy benefits manager”, the same meaning as such term is defined in**  
8 **section 376.388.**

9       **2. No pharmacy benefits manager shall charge or collect from a covered person a**  
10 **co-payment for a prescription or pharmacy service that exceeds the amount retained by**  
11 **the pharmacist or pharmacy from all payment sources for filling the prescription or**  
12 **providing the service.**

13       **3. No pharmacy benefits manager shall prohibit a pharmacist or pharmacy with**  
14 **which the pharmacy benefits manager has entered a contract from doing either of the**  
15 **following:**

16       **(1) Informing a covered person of the difference between the covered person’s co-**  
17 **payment for a prescription drug and the amount the covered person would pay if the**  
18 **covered person did not use a health benefit plan to cover the cost; or**

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

19           **(2) Selling a prescription drug to a covered person who chooses not to use a health**  
20 **benefit plan to cover the cost, provided the cost to the covered person is less than the**  
21 **covered person's co-payment for the drug.**

22           **4. No pharmacy benefits manager shall restrict or interfere with a pharmacists's**  
23 **ability to provide pharmacy care to a covered person, including providing pharmacist-**  
24 **patient communications and discussing alternative drug options.**

25           **5. No pharmacy benefits manager shall charge or hold a pharmacist or pharmacy**  
26 **responsible for any fee that is related to a claim unless the amount of the fee can be**  
27 **determined and has been disclosed to the pharmacist or pharmacy at the time of the**  
28 **claim's adjudication.**

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