House		Amendment NO
	Offered By	
	Committee Substitute for House Bill No. 198, Page all of said lines from the bill and inserting in lieu the	
"376.413	. 1. For purposes of this section, the following term	ms mean:
(1) "340]	B drug", a drug that is:	
(a) A cov	vered outpatient drug as defined in Section 340B of	f the Public Health Service Act,
42 U.S.C. Section	on 256b, enacted by Section 602 of the Veterans Hea	alth Care Act of 1992, Pub. L.
102-585; and		
(b) Purch	hased under an agreement entered into under 42 U.S	S.C. Section 256b;
(2) "Cov	vered entity", the same meaning given to the term in	Section 340B(a)(4) of the
Public Health Se	ervice Act, 42 U.S.C. Section 256b(a)(4);	
(3) "Hea	olth carrier", the same meaning given to the term in	section 376.1350;
(4) "Phai	rmacy", an entity licensed under chapter 338;	
(5) "Phai	rmacy benefits manager", the same meaning given	to the term in section 376.388.
2. A heal	lth carrier, a pharmacy benefits manager, or an ager	nt or affiliate of such health
arrier or pharma	acy benefits manager, not including a pharmaceutic	al manufacturer, shall not
liscriminate agai	inst a covered entity or a pharmacy including, but r	not limited to, by doing any of
the following:		
(1) Reim	nbursing a covered entity or pharmacy for a quantity	y of a 340B drug in an amount
less than it would	d pay to any other similarly situated pharmacy that	is not a covered entity or a
pharmacy for suc	ch quantity of such drug on the basis that the entity	or pharmacy is a covered entity
or pharmacy or the	hat the entity or pharmacy dispenses 340B drugs;	
(2) Impo	osing any terms or conditions on covered entities or	pharmacies that differ from such
terms or conditio	ons applied to other similarly situated pharmacies of	r entities that are not covered
entities on the ba	asis that the entity or pharmacy is a covered entity of	or that the entity or pharmacy
dispenses 340B d	drugs including, but not limited to, terms or conditi	ons with respect to any of the
following:		
(a) Fees,	, chargebacks, clawbacks, adjustments, or other asso	essments;
(b) Profe	essional dispensing fees;	
Action Take	en	Date

- 1 (c) Restrictions or requirements regarding participation in standard or preferred pharmacy networks;
 - (d) Requirements relating to the frequency or scope of audits or to inventory management systems using generally accepted accounting principles; and
 - (e) Any other restrictions, conditions, practices, or policies that, as specified by the director of the department of commerce and insurance, interfere with the ability of a covered entity to maximize the value of discounts provided under 42 U.S.C. Section 256b;
 - (3) Interfering with an individual's choice to receive a 340B drug from a covered entity or pharmacy, whether in person or via direct delivery, mail, or other form of shipment, by any means including, but not limited to, modifying a patient's payment limitations or cost-sharing obligations on the basis of participation, in whole or in part, in the 340B drug pricing program;
 - (4) Requiring a covered entity or pharmacy to identify, either directly or through a third party, 340B drugs. However, a pharmaceutical manufacturer may enter into a contract to utilize an industry standard platform to identify a 340B dispensation no sooner than forty-five days after the point of sale of the 340B drug. A health carrier, pharmacy benefits manager, or agent or affiliate of such health carrier or pharmacy benefits manager may only use such identification information to comply with rebate transparency requirements of a pharmaceutical manufacturer;
 - (5) Refusing to contract with a covered entity or pharmacy for reasons other than those that apply equally to entities that are not covered entities or similarly situated pharmacies, or on the basis that:
 - (a) The entity is a covered entity; or

- (b) The entity or pharmacy is described in any of subparagraphs (A) to (O) of 42 U.S.C. Section 256b(a)(4);
- (6) Denying the covered entity the ability to purchase drugs at 340B program pricing by substituting a rebate discount;
 - (7) Refusing to cover drugs purchased under the 340B drug pricing program; or
- (8) Requiring a covered entity or pharmacy to reverse, resubmit, or clarify a 340B-drug pricing claim after the initial adjudication unless these actions are in the normal course of pharmacy business and not related to 340B drug pricing, except as required by federal law.
- 3. The director of the department of commerce and insurance shall impose a civil penalty on any health carrier, pharmacy benefits manager, or agent or affiliate of such health carrier or pharmacy benefits manager that violates the requirements of this section. Such penalty shall not exceed five thousand dollars per violation per day.
- 4. The director of the department of commerce and insurance shall promulgate rules to implement the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to

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disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking
authority and any rule proposed or adopted after August 28, 2023, shall be invalid and void."; and
Further amend said bill, Pages 3-5, Section 376.414, Lines 1-74, by deleting all of said section from the bill; and
Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.