1 2 INTRODUCED BY Wingo mckee Barnett 3 4 ENTITLED: "AN ACT REVISING THE LAWS RELATING TO OUT-OF-STATE MAIL SERVICE PHARMACIES; SPECIFYING THE REQUIREMENTS FOR SALE OF PRESCRIPTION DRUGS BY 5 OUT-OF-STATE MAIL SERVICE PHARMACIES TO MEMBERS OF A GROUP HEALTH INSURANCE 6 7 CONTRACT OR PLAN FOR A UNIT OF STATE OR LOCAL GOVERNMENT; REMOVING LICENSING OF AND REQUIRING REGISTRATION OF OUT-OF-STATE MAIL SERVICE PHARMACIES; SPECIFYING REGISTRATION 8 REQUIREMENTS; GRANTING RULEMAKING AUTHORITY TO THE BOARD OF PHARMACY REGARDING 9 OUT-OF-STATE MAIL SERVICE PHARMACIES; AMENDING SECTIONS 2-18-704, 37-7-701, AND 37-7-703, 10 MCA; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE." 11 12 STATEMENT OF INTENT 13 A statement of intent is required for this bill because the bill gives the board of pharmacy authority 14 15 to adopt administrative rules for the registration of out-of-state mail service pharmacies. It is the intent of the legislature to correct a deficiency in Title 37, chapter 7, part 7 (Chapter 664, 16 Laws of 1991), that arose from a defective attempt to grant rulemaking authority to the board of pharmacy 17 to carry out the provisions regarding out-of-state mail service pharmacies. [Section 4] is specifically 18 intended to grant rulemaking authority to the board of pharmacy to carry out the purpose and to enforce 19 20 the provisions of Title 37, chapter 7, part 7. Sections 37-7-701 and 37-7-703 are intended to provide for 21 regulation of out-of-state pharmacies and pharmacists through recognition of the licenses issued by their states of domicile through registration, rather than licensure, by the state of Montana. 22 23 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA: 24 25 Section 1. Section 2-18-704, MCA, is amended to read: 26 27 "2-18-704. Mandatory provisions. (1) An insurance contract or plan issued under this part must 28 contain provisions that permit: 29 (a) the member of a group who retires from active service under the appropriate retirement

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provisions provided by law to remain a member of the group until the member becomes eligible for medicare

54th Legislature LC1356.01

under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is a participant in another group plan with substantially the same or greater benefits at an equivalent cost or unless the member is employed and, by virtue of that employment, is eligible to participate in another group plan with substantially the same or greater benefits at an equivalent cost:

- (b) the surviving spouse of a member to remain a member of the group as long as the spouse is eligible for retirement benefits accrued by the deceased member as provided by law unless the spouse is eligible for medicare under the federal Health Insurance for the Aged Act or unless the spouse has or is eligible for equivalent insurance coverage as provided in subsection (1)(a);
- (c) the surviving children of a member to remain members of the group as long as they are eligible for retirement benefits accrued by the deceased member as provided by law unless they have equivalent coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employment of a surviving parent or legal guardian.
- (2) An insurance contract or plan issued after June 30, 1983, under this part must contain the provisions of subsection (1) for remaining a member of the group and also must permit:
 - (a) the spouse of a retired member the same rights as a surviving spouse under subsection (1)(b);
 - (b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and
- (c) continued membership in the group by anyone eligible under the provisions of this section, notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act.
- (3) (a) A state insurance contract or plan issued after August 31, 1891, must contain provisions that permit a legislator to remain a member of the state's group plan until the legislator becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, if the legislator:
- (i) terminates service in the legislature and is a vested member of a state retirement system provided by law; and
- (ii) notifies the department of administration in writing within 90 days of the end of his the legislator's legislative term.
- (b) A former legislator may not remain a member of the group plan under the provisions of subsection (3) if the person:
 - (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or
- (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan



- with substantially the same or greater benefits at an equivalent cost.
- (c) A legislator who remains a member of the group under the provisions of subsection (3) and subsequently terminates membership may not rejoin the group unless the person again serves as a legislator.
- (4) A person electing to remain a member of the group under subsection (1), (2), or (3) shall pay the full premium for coverage and for that of the person's covered dependents.
- (5) An insurance contract or plan issued under this part after June 30, 1993, that provides for the dispensing of prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702:
- (a) must permit any member of a group to obtain prescription drugs from a pharmacy located in Montana that is willing to match the price charged to the group or plan and to meet all terms and conditions, including the same administrative, financial, and professional requirements that are met by the mail service pharmacy for a drug, without financial penalty to the member; and
- (b) may only be with an out-of-state mail service pharmacy that is licensed by registered with the board under Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation."

Section 2. Section 37-7-701, MCA, is amended to read:

"37-7-701. Legislative declaration. The legislature recognizes that with the proliferation of alternate methods of health care delivery, there has arisen among third-party payers payors and insurance companies the desire to control the cost and utilization use of pharmacy services through a variety of mechanisms, including the use of mail service pharmacies located outside this state. As a result, the legislature finds and declares that to continue to protect the consumer-patients of this state, all out-of-state mail service pharmacies that provide services to this state's residents must be licensed registered with the board, shall disclose specific information about their services, shall meet the same standards for utilization of technicians as an in-state pharmacy, and shall provide pharmacy services at a high level of competence."

Section 3. Section 37-7-703, MCA, is amended to read:

"37-7-703. License Registration requirements. Each out-of-state mail service pharmacy must be licensed by registered with the board of pharmacy. In order to be licensed by registered with the board to do business in this state and for annual renewal of its license registration, an out-of-state mail service pharmacy:



1	(1) (a) must be shall submit a certificate from the appropriate licensing authority with which it is
2	currently licensed and in good standing in the state in which its dispensing facilities are located; and
3	(b) shall comply with all applicable laws, regulations, and standards of that state and the United
4	States and, if requested by the board, provide evidence that it has so complied;
5	(2) shall submit an application in form and content as determined by register with the board,

- (2) shall submit an application in form and content as determined by register with the board, including and provide information on ownership and location, including the names and titles of the corporate officers, of the out-of-state mail service pharmacy and the identity of a pharmacist licensed in the state in which the pharmacy is located who is in charge of dispensing prescriptions for shipment to Montana from the out-of-state mail service pharmacy;
- (3) shall submit a utilization plan for the employment of pharmacy technicians if allowed by the state where the mail service pharmacy is located. Any plan that has a ratio of technicians to pharmacists greater than the maximum ratio allowed for an in state retail pharmacy under the board's rules must be If the state in which the pharmacy is located does not establish a ratio of technicians to pharmacists for determining the number of pharmacy technicians compounding or dispensing drugs at the pharmacy, then the out-of-state mail service pharmacy may not allow a pharmacist to supervise more than one supportive person at any one time in the compounding or dispensing of prescription drugs, unless approved by the board as provided in 37-7-307 through 37-7-309.
- (4) shall register each pharmacist identified under subsection (2) with submit to the board, with proof of the pharmacist's good standing with the licensing authority in the state where the pharmacist is employed and with the pharmacist's written commitment to comply with the utilization plan, if any, for each pharmacist identified under subsection (2) and shall provide to the board the same toll-free telephone service referenced in 37-7-706 in order to comply with all information requests by the board; and
- (5) shall pay an initial license registration fee and annual renewal fee in an amount to be determined by the board."

<u>NEW SECTION.</u> Section 4. Rulemaking authority. The board of pharmacy may adopt rules to implement this part.

NEW SECTION. Section 5. Codification instruction. [Section 4] is intended to be codified as an integral part of Title 37, chapter 7, part 7, and the provisions of Title 37, chapter 7, part 7, apply to



1	[section 4].
2	
3	NEW SECTION. Section 6. Severability. If a part of [this act] is invalid, all valid parts that are
4	severable from the invalid part remain in effect. If a part of [this act] is invalid in one or more of its
5	applications, the part remains in effect in all valid applications that are severable from the invalid
6	applications.
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8	NEW SECTION. Section 7. Effective date. [This act] is effective on passage and approval.
9	-END-

STATE OF MONTANA - FISCAL NOTE

Fiscal Note for HB0536, as introduced

<u>DESCRIPTION OF PROPOSED LEGISLATION</u>: An act revising the laws relating to out-of-state mail service pharmacies; specifying the requirements for sale of prescription drugs by out-of-state mail service pharmacies to members of a group health insurance contract or plan for a unit of state or local government; removing licensing of requiring registration of out-of-state mail service pharmacies; specifying registration requirements; granting rule making authority to the Board of Pharmacy regarding out-of-state mail service pharmacies.

ASSUMPTIONS:

- 1. The number of registrants for out-of-state mail service pharmacies is expected to be 100. Costs associated with rule-making and implementation of this program will be absorbed in the Executive Budget for the 1997 Biennium.
- 2. Fees for an expected 100 out-of-state mail service pharmacies will be set commensurate with costs and is expected to be \$200 for initial registration and \$100 for annual renewal.

FISCAL IMPACT: Department of Commerce

Revenues:

	FY96	FY97
	Difference	Difference
Registration Fees	2,000	0
Renewal Fees	0	<u>1,000</u>
Total	2,000	1,000
Pharmacy SSR (02)	2,000	1,000

LONG-RANGE EFFECTS OF PROPOSED LEGISLATION:

The requirement for a one-to-one ratio of technicians to pharmacists in out-of-state mail order pharmacies may result in fewer bidders and potentially higher costs for state group insurance benefits.

DAVE LEWIS, BUDGET DIRECTOR DATE
Office of Budget and Program Planning

NORM MILLS, PRIMARY SPONSOR

DATE

STATE OF MONTANA - FISCAL NOTE

Fiscal Note for HB0536, as introduced

<u>DESCRIPTION OF PROPOSED LEGISLATION</u>: An act revising the laws relating to out-of-state mail service pharmacies; specifying the requirements for sale of prescription drugs by out-of-state mail service pharmacies to members of a group health insurance contract or plan for a unit of state or local government; removing licensing of requiring registration of out-of-state mail service pharmacies; specifying registration requirements; granting rule making authority to the Board of Pharmacy regarding out-of-state mail service pharmacies.

ASSUMPTIONS:

- 1. The number of registrants for out-of-state mail service pharmacies is expected to be 100. Costs associated with rule-making and implementation of this program will be absorbed in the Executive Budget for the 1997 Biennium.
- 2. Fees for an expected 100 out-of-state mail service pharmacies will be set commensurate with costs and is expected to be \$200 for initial registration and \$100 for annual renewal.

FISCAL IMPACT: Department of Commerce

Revenues:

	FY96	FY97
	Difference	Difference
Registration Fees	20,000	0
Renewal Fees	0	10,000
Total	20,000	10,000
Pharmacy SSR (02)	20,000	10,000

LONG-RANGE EFFECTS OF PROPOSED LEGISLATION:

The requirement for a one-to-one ratio of technicians to pharmacists in out-of-state mail order pharmacies may result in fewer bidders and potentially higher costs for state group insurance benefits.

DAVE LEWIS, BUDGET DIRECTOR DATE
Office of Budget and Program Planning

NORM MILLS, PRIMARY SPONSOR

Fiscal Note for HB536, as introduced

HB 536.#2

DATE

1	HOUSE BILL NO. 536
2	INTRODUCED BY MILLS, ELLIS, SIMON, SQUIRES, BARTLETT, BOHLINGER, MCKEE, BARNETT,
3	DENNY, COCCHIARELLA
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE LAWS RELATING TO OUT-OF-STATE MAIL
6	SERVICE PHARMACIES; SPECIFYING THE REQUIREMENTS FOR SALE OF PRESCRIPTION DRUGS BY
7	OUT-OF-STATE MAIL SERVICE PHARMACIES TO MEMBERS OF A GROUP HEALTH INSURANCE
8	CONTRACT OR PLAN FOR A UNIT OF STATE OR LOCAL GOVERNMENT; REMOVING LICENSING OF AND
9	REQUIRING REGISTRATION OF OUT-OF-STATE MAIL SERVICE PHARMACIES; SPECIFYING REGISTRATION
10	REQUIREMENTS; GRANTING RULEMAKING AUTHORITY TO THE BOARD OF PHARMACY REGARDING
11	OUT-OF-STATE MAIL SERVICE PHARMACIES; AMENDING SECTIONS 2-18-704, 37-7-701, AND 37-7-703,
12	MCA; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE."
13	
14	STATEMENT OF INTENT
15	A statement of intent is required for this bill because the bill gives the board of pharmacy authority
16	to adopt administrative rules for the registration of out-of-state mail service pharmacies.
17	It is the intent of the legislature to correct a deficiency in Title 37, chapter 7, part 7 (Chapter 664,
18	Laws of 1991), that arose from a defective attempt to grant rulemaking authority to the board of pharmacy
19	to carry out the provisions regarding out-of-state mail service pharmacies. [Section 4] is specifically
20	intended to grant rulemaking authority to the board of pharmacy to carry out the purpose and to enforce
21	the provisions of Title 37, chapter 7, part 7. Sections 37-7-701 and 37-7-703 are intended to provide for
22	regulation of out-of-state pharmacies and pharmacists through recognition of the licenses issued by their
23	states of domicile through registration, rather than licensure, by the state of Montana.
24	
25	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
26	
27	Section 1. Section 2-18-704, MCA, is amended to read:
28	"2-18-704. Mandatory provisions. (1) An insurance contract or plan issued under this part must
29	contain provisions that permit:
30	(a) the member of a group who retires from active service under the appropriate retirement

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- provisions provided by law to remain a member of the group until the member becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is a participant in another group plan with substantially the same or greater benefits at an equivalent cost or unless the member is employed and, by virtue of that employment, is eligible to participate in another group plan with substantially the same or greater benefits at an equivalent cost;
 - (b) the surviving spouse of a member to remain a member of the group as long as the spouse is eligible for retirement benefits accrued by the deceased member as provided by law unless the spouse is eligible for medicare under the federal Health Insurance for the Aged Act or unless the spouse has or is eligible for equivalent insurance coverage as provided in subsection (1)(a);
 - (c) the surviving children of a member to remain members of the group as long as they are eligible for retirement benefits accrued by the deceased member as provided by law unless they have equivalent coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employment of a surviving parent or legal guardian.
 - (2) An insurance contract or plan issued after June 30, 1983, under this part must contain the provisions of subsection (1) for remaining a member of the group and also must permit:
 - (a) the spouse of a retired member the same rights as a surviving spouse under subsection (1)(b);
 - (b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and
 - (c) continued membership in the group by anyone eligible under the provisions of this section, notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act.
 - (3) (a) A state insurance contract or plan issued after August 31, 1991, must contain provisions that permit a legislator to remain a member of the state's group plan until the legislator becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, if the legislator:
 - (i) terminates service in the legislature and is a vested member of a state retirement system provided by law; and
 - (ii) notifies the department of administration in writing within 90 days of the end of his the legislator's legislative term.
 - (b) A former legislator may not remain a member of the group plan under the provisions of subsection (3) if the person:
 - (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or



- (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan with substantially the same or greater benefits at an equivalent cost.
- (c) A legislator who remains a member of the group under the provisions of subsection (3) and subsequently terminates membership may not rejoin the group unless the person again serves as a legislator.
- (4) A person electing to remain a member of the group under subsection (1), (2), or (3) shall pay the full premium for coverage and for that of the person's covered dependents.
- (5) An insurance contract or plan issued under this part after June 30, 1993, that provides for the dispensing of prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702:
- (a) must permit any member of a group to obtain prescription drugs from a pharmacy located in Montana that is willing to match the price charged to the group or plan and to meet all terms and conditions, including the same administrative, financial, and professional requirements that are met by the mail service pharmacy for a drug, without financial penalty to the member; and
- (b) may only be with an out-of-state mail service pharmacy that is licensed by registered with the board under Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation."

Section 2. Section 37-7-701, MCA, is amended to read:

"37-7-701. Legislative declaration. The legislature recognizes that with the proliferation of alternate methods of health care delivery, there has arisen among third-party payors payors and insurance companies the desire to control the cost and utilization use of pharmacy services through a variety of mechanisms, including the use of mail service pharmacies located outside this state. As a result, the legislature finds and declares that to continue to protect the consumer-patients of this state, all out-of-state mail service pharmacies that provide services to this state's residents must be licensed registered with the board, shall disclose specific information about their services, shall meet the same standards for utilization of technicians as an in-state pharmacy, and shall provide pharmacy services at a high level of competence."

Section 3. Section 37-7-703, MCA, is amended to read:

"37-7-703. <u>License Registration</u> requirements. Each out-of-state mail service pharmacy must be licensed by registered with the board of pharmacy. In order to be licensed by registered with the board to do business in this state and for annual renewal of its license registration, an out-of-state mail service



pharmacy:

- (1) (a) must be shall submit a certificate from the appropriate licensing authority with which it is currently licensed and in good standing in the state in which its dispensing facilities are located; and
- (b) shall comply with all applicable laws, regulations, and standards of that state and the United States and, if requested by the board, provide evidence that it has so complied;
- (2) shall submit an application in form and content as determined by register with the board, including and provide information on ownership and location, including the names and titles of the corporate officers, of the out-of-state mail service pharmacy and the identity of a pharmacist licensed in the state in which the pharmacy is located who is in charge of dispensing prescriptions for shipment to Montana from the out-of-state mail service pharmacy;
- (3) shall submit a utilization plan for the employment of pharmacy technicians if allowed by the state where the mail service pharmacy is located. Any plan that has a ratio of technicians to pharmacists greater than the maximum ratio allowed for an in state retail pharmacy under the board's rules must be If the state in which the pharmacy is located does not establish a ratio of technicians to pharmacists for determining the number of pharmacy technicians compounding or dispensing drugs at the pharmacy, then the out-of-state mail service pharmacy may not allow a pharmacist to supervise more than one supportive person at any one time in the compounding or dispensing of prescription drugs, unless approved by the board as provided in 37-7-307 through 37-7-309.
- (4) shall register each pharmacist identified under subsection (2) with submit to the board, with proof of the pharmacist's good standing with the licensing authority in the state where the pharmacist is employed and with the pharmacist's written commitment to comply with the utilization plan, if any, for each pharmacist identified under subsection (2) and shall provide to the board the same toll-free telephone service referenced in 37-7-706 in order to comply with all information requests by the board; and
- (5) shall pay an initial license registration fee and annual renewal fee in an amount to be determined by the board-; AND
- (6) SHALL PROVIDE ORAL PHARMACEUTICAL CONSULTATION, AS PROVIDED IN 37-7-706, TO THE PERSON TO WHOM THE PRESCRIPTION IS BEING SENT AND SHALL DOCUMENT AND MAINTAIN FOR A REASONABLE LENGTH OF TIME A RECORD OF THE PHARMACEUTICAL CONSULTATION."

NEW SECTION. Section 4. Rulemaking authority. The board of pharmacy may adopt rules to



1	implement this part.
2	
3	NEW SECTION. Section 5. Codification instruction. [Section 4] is intended to be codified as an
4	integral part of Title 37, chapter 7, part 7, and the provisions of Title 37, chapter 7, part 7, apply to
5	[section 4].
6	
7	NEW SECTION. Section 6. Severability. If a part of [this act] is invalid, all valid parts that are
8	severable from the invalid part remain in effect. If a part of [this act] is invalid in one or more of its
9	applications, the part remains in effect in all valid applications that are severable from the invalid
10	applications.
11	
12	NEW SECTION. Section 7. Effective date. [This act] is effective on passage and approval.
13	-END-

1	HOUSE BILL NO. 536
2	INTRODUCED BY MILLS, ELLIS, SIMON, SQUIRES, BARTLETT, BOHLINGER, MCKEE, BARNETT,
3	DENNY, COCCHIARELLA
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE LAWS RELATING TO OUT-OF-STATE MAIL
6	SERVICE PHARMACIES; SPECIFYING THE REQUIREMENTS FOR SALE OF PRESCRIPTION DRUGS BY
7	OUT-OF-STATE MAIL SERVICE PHARMACIES TO MEMBERS OF A GROUP HEALTH INSURANCE
8	CONTRACT OR PLAN FOR A UNIT OF STATE OR LOCAL GOVERNMENT; REMOVING LICENSING OF AND
9	REQUIRING REGISTRATION OF OUT-OF-STATE MAIL SERVICE PHARMACIES; SPECIFYING REGISTRATION
10	REQUIREMENTS; GRANTING RULEMAKING AUTHORITY TO THE BOARD OF PHARMACY REGARDING
11	OUT-OF-STATE MAIL SERVICE PHARMACIES; AMENDING SECTIONS 2-18-704, 37-7-701, AND 37-7-703,
12	MCA; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE."
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14	STATEMENT OF INTENT
15	A statement of intent is required for this bill because the bill gives the board of pharmacy authority
16	to adopt administrative rules for the registration of out-of-state mail service pharmacies.
17	It is the intent of the legislature to correct a deficiency in Title 37, chapter 7, part 7 (Chapter 664,
18	Laws of 1991), that arose from a defective attempt to grant rulemaking authority to the board of pharmacy
19	to carry out the provisions regarding out-of-state mail service pharmacies. [Section 4] is specifically
20	intended to grant rulemaking authority to the board of pharmacy to carry out the purpose and to enforce
21	the provisions of Title 37, chapter 7, part 7. Sections 37-7-701 and 37-7-703 are intended to provide for
22	regulation of out-of-state pharmacies and pharmacists through recognition of the licenses issued by their
23	states of domicile through registration, rather than licensure, by the state of Montana.
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25	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
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27	Section 1. Section 2-18-704, MCA, is amended to read:
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- provisions provided by law to remain a member of the group until the member becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is a participant in another group plan with substantially the same or greater benefits at an equivalent cost or unless the member is employed and, by virtue of that employment, is eligible to participate in another group plan with substantially the same or greater benefits at an equivalent cost;
 - (b) the surviving spouse of a member to remain a member of the group as long as the spouse is eligible for retirement benefits accrued by the deceased member as provided by law unless the spouse is eligible for medicare under the federal Health Insurance for the Aged Act or unless the spouse has or is eligible for equivalent insurance coverage as provided in subsection (1)(a);
 - (c) the surviving children of a member to remain members of the group as long as they are eligible for retirement benefits accrued by the deceased member as provided by law unless they have equivalent coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employment of a surviving parent or legal guardian.
 - (2) An insurance contract or plan issued after June 30, 1983, under this part must contain the provisions of subsection (1) for remaining a member of the group and also must permit:
 - (a) the spouse of a retired member the same rights as a surviving spouse under subsection (1)(b);
 - (b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and
 - (c) continued membership in the group by anyone eligible under the provisions of this section, notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act.
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 - (i) terminates service in the legislature and is a vested member of a state retirement system provided by law; and
 - (ii) notifies the department of administration in writing within 90 days of the end of his the legislator's legislative term.
 - (b) A former legislator may not remain a member of the group plan under the provisions of subsection (3) if the person:
 - (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or



- (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan with substantially the same or greater benefits at an equivalent cost.
- (c) A legislator who remains a member of the group under the provisions of subsection (3) and subsequently terminates membership may not rejoin the group unless the person again serves as a legislator.
- (4) A person electing to remain a member of the group under subsection (1), (2), or (3) shall pay the full premium for coverage and for that of the person's covered dependents.
- (5) An insurance contract or plan issued under this part after June 30,-1993, that provides for the dispensing of prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702:
- (a) must permit any member of a group to obtain prescription drugs from a pharmacy located in Montana that is willing to match the price charged to the group or plan and to meet all terms and conditions, including the same administrative, financial, and professional requirements that are met by the mail service pharmacy for a drug, without financial penalty to the member; and
- (b) may only be with an out-of-state mail service pharmacy that is licensed by registered with the board under Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation."

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"37-7-703. License Registration requirements. Each out-of-state mail service pharmacy must be licensed by registered with the board of pharmacy. In order to be licensed by registered with the board to do business in this state and for annual renewal of its license registration, an out-of-state mail service



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- (1) (a) must be shall submit a certificate from the appropriate licensing authority with which it is currently licensed and in good standing in the state in which its dispensing facilities are located; and
- (b) shall comply with all applicable laws, regulations, and standards of that state and the United States and, if requested by the board, provide evidence that it has so complied;
- (2) shall submit an application in form and content as determined by register with the board, including and provide information on ownership and location, including the names and titles of the corporate officers, of the out-of-state mail service pharmacy and the identity of a pharmacist licensed in the state in which the pharmacy is located who is in charge of dispensing prescriptions for shipment to Montana from the out-of-state mail service pharmacy;
- (3) shall submit a utilization plan for the employment of pharmacy technicians if allowed by the state where the mail service pharmacy is located. Any plan that has a ratio of technicians to pharmacists greater than the maximum ratio allowed for an in state retail pharmacy under the board's rules must be If the state in which the pharmacy is located does not establish a ratio of technicians to pharmacists for determining the number of pharmacy technicians OR OTHERWISE DEFINE THE ROLE OF THE PHARMACIST IN compounding or dispensing drugs at the pharmacy, then the out-of-state mail service pharmacy may not allow a pharmacist to supervise more than one supportive person at any one time in the compounding or dispensing of prescription drugs, unless approved by the board as provided in 37-7-307 through 37-7-309.
- (4) shall register each pharmacist identified under subsection (2) with submit to the board, with proof of the pharmacist's good standing with the licensing authority in the state where the pharmacist is employed and with the pharmacist's written commitment to comply with the utilization plan, if any, for each pharmacist identified under subsection (2) and shall provide to the board the same toll-free telephone service referenced in 37-7-706 in order to comply with all information requests by the board; and AND
- (5) shall pay an initial license registration fee and annual renewal fee in an amount to be determined by the board. AND.
- (6) SHALL PROVIDE ORAL PHARMACEUTICAL CONSULTATION, AS PROVIDED IN 37-7-706, TO THE PERSON TO WHOM THE PRESCRIPTION IS BEING SENT AND SHALL DOCUMENT AND MAINTAIN FOR A REASONABLE LENGTH OF TIME A RECORD OF THE PHARMACEUTICAL CONSULTATION."

- 4 -

NEW SECTION. Section 4. Rulemaking authority. The board of pharmacy may adopt rules to



HB 536

1	implement this part.
2	
3	NEW SECTION. Section 5. Codification instruction. [Section 4] is intended to be codified as an
4	integral part of Title 37, chapter 7, part 7, and the provisions of Title 37, chapter 7, part 7, apply to
5	[section 4].
6	
7	NEW SECTION. Section 6. Severability. If a part of [this act] is invalid, all valid parts that are
8	severable from the invalid part remain in effect. If a part of [this act] is invalid in one or more of its
9	applications, the part remains in effect in all valid applications that are severable from the invalid
10	applications.
11	
12	NEW SECTION. Section 7. Effective date. [This act] is effective on passage and approval.
13	-END-

1	HOUSE BILL NO. 536
2	INTRODUCED BY MILLS, ELLIS, SIMON, SQUIRES, BARTLETT, BOHLINGER, MCKEE, BARNETT,
3	DENNY, COCCHIARELLA
4	
5	A BILL FOR AN ACT ENTITLED: "AN ACT REVISING THE LAWS RELATING TO OUT-OF-STATE MAIL
6	SERVICE PHARMACIES; SPECIFYING THE REQUIREMENTS FOR SALE OF PRESCRIPTION DRUGS BY
7	OUT-OF-STATE MAIL SERVICE PHARMACIES TO MEMBERS OF A GROUP HEALTH INSURANCE
8	CONTRACT OR PLAN FOR A UNIT OF STATE OR LOCAL GOVERNMENT; REMOVING LICENSING OF AND
9	REQUIRING REGISTRATION OF OUT-OF-STATE MAIL SERVICE PHARMACIES; SPECIFYING REGISTRATION
0	REQUIREMENTS; GRANTING RULEMAKING AUTHORITY TO THE BOARD OF PHARMACY REGARDING
1	OUT-OF-STATE MAIL SERVICE PHARMACIES; AMENDING SECTIONS 2-18-704, 37-7-701, AND 37-7-703
2	MCA; AND PROVIDING AN IMMEDIATE EFFECTIVE DATE."
3	
4	STATEMENT OF INTENT
5	A statement of intent is required for this bill because the bill gives the board of pharmacy authority
6	to adopt administrative rules for the registration of out-of-state mail service pharmacies.
7	It is the intent of the legislature to correct a deficiency in Title 37, chapter 7, part 7 (Chapter 664
8	Laws of 1991), that arose from a defective attempt to grant rulemaking authority to the board of pharmacy
9	to carry out the provisions regarding out-of-state mail service pharmacies. [Section 4] is specifically
0	intended to grant rulemaking authority to the board of pharmacy to carry out the purpose and to enforce
21	the provisions of Title 37, chapter 7, part 7. Sections 37-7-701 and 37-7-703 are intended to provide fo
22	regulation of out-of-state pharmacies and pharmacists through recognition of the licenses issued by their
23	states of domicile through registration, rather than licensure, by the state of Montana.
24	
25	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:
26	
27	Section 1. Section 2-18-704, MCA, is amended to read:
28	"2-18-704. Mandatory provisions. (1) An insurance contract or plan issued under this part mus
29	contain provisions that permit:



(a) the member of a group who retires from active service under the appropriate retirement

provisions provided by law to remain a member of the group until the member becomes eligible for medicare
under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, unless the member is
a participant in another group plan with substantially the same or greater benefits at an equivalent cost or
unless the member is employed and, by virtue of that employment, is eligible to participate in another group
plan with substantially the same or greater benefits at an equivalent cost;

- (b) the surviving spouse of a member to remain a member of the group as long as the spouse is eligible for retirement benefits accrued by the deceased member as provided by law unless the spouse is eligible for medicare under the federal Health Insurance for the Aged Act or unless the spouse has or is eligible for equivalent insurance coverage as provided in subsection (1)(a);
- (c) the surviving children of a member to remain members of the group as long as they are eligible for retirement benefits accrued by the deceased member as provided by law unless they have equivalent coverage as provided in subsection (1)(a) or are eligible for insurance coverage by virtue of the employment of a surviving parent or legal guardian.
- (2) An insurance contract or plan issued after June 30, 1983, under this part must contain the provisions of subsection (1) for remaining a member of the group and also must permit:
 - (a) the spouse of a retired member the same rights as a surviving spouse under subsection (1)(b);
 - (b) the spouse of a retiring member to convert a group policy as provided in 33-22-508; and
- (c) continued membership in the group by anyone eligible under the provisions of this section, notwithstanding the person's eligibility for medicare under the federal Health Insurance for the Aged Act.
- (3) (a) A state insurance contract or plan issued after August 31, 1991, must contain provisions that permit a legislator to remain a member of the state's group plan until the legislator becomes eligible for medicare under the federal Health Insurance for the Aged Act, 42 U.S.C. 1395, as amended, if the legislator:
- (i) terminates service in the legislature and is a vested member of a state retirement system provided by law; and
- (ii) notifies the department of administration in writing within 90 days of the end of his the legislator's legislative term.
- (b) A former legislator may not remain a member of the group plan under the provisions of subsection (3) if the person:
 - (i) is a member of a plan with substantially the same or greater benefits at an equivalent cost; or



- (ii) is employed and, by virtue of that employment, is eligible to participate in another group plan with substantially the same or greater benefits at an equivalent cost.
- (c) A legislator who remains a member of the group under the provisions of subsection (3) and subsequently terminates membership may not rejoin the group unless the person again serves as a legislator.
- (4) A person electing to remain a member of the group under subsection (1), (2), or (3) shall pay the full premium for coverage and for that of the person's covered dependents.
- (5) An insurance contract or plan issued under this part after June 30, 1993, that provides for the dispensing of prescription drugs by an out-of-state mail service pharmacy, as defined in 37-7-702:
- (a) must permit any member of a group to obtain prescription drugs from a pharmacy located in Montana that is willing to match the price charged to the group or plan and to meet all terms and conditions, including the same administrative, financial, and professional requirements that are met by the mail service pharmacy for a drug, without financial penalty to the member; and
- (b) may only be with an out-of-state mail service pharmacy that is licensed by registered with the board under Title 37, chapter 7, part 7, and that is registered in this state as a foreign corporation."

Section 2. Section 37-7-701, MCA, is amended to read:

"37-7-701. Legislative declaration. The legislature recognizes that with the proliferation of alternate methods of health care delivery, there has arisen among third-party payers payors and insurance companies the desire to control the cost and utilization use of pharmacy services through a variety of mechanisms, including the use of mail service pharmacies located outside this state. As a result, the legislature finds and declares that to continue to protect the consumer-patients of this state, all out-of-state mail service pharmacies that provide services to this state's residents must be licensed registered with the board, shall disclose specific information about their services, shall meet the same standards for utilization of technicians as an in-state pharmacy, and shall provide pharmacy services at a high level of competence."

Section 3. Section 37-7-703, MCA, is amended to read:

"37-7-703. License Registration requirements. Each out-of-state mail service pharmacy must be licensed by registered with the board of pharmacy. In order to be licensed by registered with the board to do business in this state and for annual renewal of its license registration, an out-of-state mail service



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- (1) (a) must be shall submit a certificate from the appropriate licensing authority with which it is currently licensed and in good standing in the state in which its dispensing facilities are located; and
- (b) shall comply with all applicable laws, regulations, and standards of that state and the United States and, if requested by the board, provide evidence that it has so complied;
- (2) shall submit an application in form and content as determined by register with the boardincluding and provide information on ownership and location, including the names and titles of the corporate
 officers, of the out-of-state mail service pharmacy and the identity of a pharmacist licensed in the state in
 which the pharmacy is located who is in charge of dispensing prescriptions for shipment to Montana from
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- (5) shall pay an initial license registration fee and annual renewal fee in an amount to be determined by the board—AND.
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