By Senator Jones

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A bill to be entitled

An act relating to prohibitions against discriminatory practices relating to 340B entities and 340B drugs; providing a short title; creating s. 499.061, F.S.; providing definitions; prohibiting drug manufacturers from engaging in certain acts relating to the acquisition of 340B drugs by and the delivery of such drugs to specified pharmacies; providing an exception; prohibiting drug manufacturers from interfering with pharmacies' rights to contract with 340B entities; providing that each commission of certain acts constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act and subjects the violator to certain actions and penalties; providing construction and applicability; creating s. 626.8829, F.S.; providing definitions; prohibiting health insurance issuers, pharmacy benefit managers, and other third-party payors, and agents thereof, from engaging in certain discriminatory acts relating to reimbursement to 340B entities for 340B drugs; providing applicability; providing that each commission of certain acts constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act and subjects the violator to certain actions and penalties; providing construction; creating ss. 627.64743, 627.65733, and 641.31543, F.S.; providing definitions; prohibiting individual health insurers, group, blanket, and franchise health insurers, and health maintenance organizations, respectively, and

pharmacy benefit managers on behalf of such insurers and health maintenance organizations, from engaging in certain discriminatory acts relating to reimbursement to 340B entities for 340B drugs; providing applicability; providing that each commission of certain acts constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act and subjects the violator to certain actions and penalties; providing construction; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. This act may be cited as the "Defending Affordable Prescription Drug Costs Act."

Section 2. Section 499.061, Florida Statutes, is created to read:

499.061 Prohibitions against manufacturers' discriminatory practices relating to 340B drugs and 340B entities.—

(1) As used in this section, the term:

(a) "340B drug" means a drug that has been subject to any offer for reduced prices by a manufacturer pursuant to 42 U.S.C. s. 256b and is purchased by a covered entity as defined in 42 U.S.C. s. 256b(a)(4).

(b) "340B entity" means an entity participating or authorized to participate in the 340B Drug Pricing Program, as described in 42 U.S.C. s. 256b, including its pharmacy, or any pharmacy contracted with the participating entity to dispense drugs purchased through the 340B Drug Pricing Program.

(2) A manufacturer may not:

(a) Deny, restrict, prohibit, or otherwise interfere with, directly or indirectly, the acquisition of a 340B drug by, or delivery of a 340B drug to, a pharmacy that is under contract with a 340B entity and is authorized under such contract to receive and dispense 340B drugs on behalf of the covered entity unless such receipt is prohibited by the United States Department of Health and Human Services; or

(b) Interfere with a pharmacy's right to contract with a 340B entity.

(3) The commission of any act prohibited by this section is a deceptive and unfair trade practice and constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act under part II of chapter 501, and subjects the violator to all actions, including, but not limited to, investigative demands, remedies, and penalties, provided for in the Florida Deceptive and Unfair Trade Practices Act.

(4) This section may not be construed to be less restrictive than federal law for a person or entity to which this section applies. This section may not be construed to be in conflict with any of the following:

(a) Applicable federal law or regulations.

(b) Other laws of this state which are compatible with applicable federal law.

(5) Limited distribution of a drug that is subject to a risk evaluation and mitigation strategy under 21 U.S.C. s. 355-1 is not a violation of this section.

Section 3. Section 626.8829, Florida Statutes, is created to read:

626.8829 Reimbursement to 340B entities for 340B drugs.—

(1) As used in this section, the term:

(a) "340B drug" means a drug that has been subject to any offer for reduced prices by a manufacturer pursuant to 42 U.S.C. s. 256b and is purchased by a covered entity as defined in 42 U.S.C. s. 256b(a)(4).

(b) "340B entity" means an entity participating or authorized to participate in the 340B Drug Pricing Program, as described in 42 U.S.C. s. 256b, including its pharmacy, or any pharmacy contracted with the participating entity to dispense drugs purchased through the 340B Drug Pricing Program.

(c) "Health insurance issuer" means an entity subject to the insurance laws and regulations of this state, or subject to the jurisdiction of the Commissioner of Insurance Regulation, which contracts, offers to contract, or enters into an agreement to provide, deliver, arrange for, pay for, or reimburse any of the costs of health care services. The term includes an accident and sickness insurance company, a health maintenance organization, a preferred provider organization or any similar entity, or any other entity providing a plan of health insurance or health benefits.

(d) "Pharmacy" has the same meaning as in s. 465.003.

(2) With respect to reimbursement to a 340B entity for a 340B drug, a health insurance issuer, pharmacy benefit manager, or other third-party payor, or its agents, may not do any of the following:

(a) Reimburse the 340B entity for the 340B drug at a rate lower than that paid for the same drug to non-340B entities or to entities owned or operated by the pharmacy benefit manager on the basis that the claim is for a 340B drug.

(b) Impose any terms or conditions on the 340B entity which differ from such terms or conditions applied to non-340B entities on the basis that the entity participates in the 340B Drug Pricing Program set forth in 42 U.S.C. s. 256b or that the drug is a 340B drug, including, but not limited to, any of the following terms or conditions:

1. Fees, charges, clawbacks, or other adjustments or assessments. As used in this subparagraph, the term "other adjustments" includes, but is not limited to, placing any additional requirements, restrictions, or unnecessary burdens on the 340B entity which result in administrative costs or fees to the 340B entity and which are not placed on non-340B entities, including affiliate pharmacies of the health insurance issuer, pharmacy benefit manager, or other third-party payor.

2. Dispensing fees that are less than dispensing fees for non-340B entities.

3. Restrictions or requirements regarding participation in standard or preferred pharmacy networks.

4. Requirements relating to the frequency or scope of audits of inventory management systems.

5. Requirements that a claim for a drug include any identification, billing modifier, attestation, or other indication that a drug is a 340B drug in order to be processed or resubmitted unless it is required by the Centers for Medicare and Medicaid Services or the Agency for Health Care Administration for the administration of the Medicaid program.

6. Any other restrictions, conditions, practices, or policies that are not imposed on non-340B entities.

(c) Require the 340B entity to reverse, resubmit, or

clarify a claim after the initial adjudication unless such actions are in the normal course of pharmacy business and not related to 340B drug pricing.

(d) Base an action or contract requirement solely on the basis that the entity is a participant in the 340B Drug Pricing Program in such a manner that prevents or interferes with any patient's choice to receive such drugs from the 340B entity or its contracted pharmacy, including the creation of a restriction or additional charge on a patient who chooses to receive drugs from a 340B entity or its contracted pharmacy through direct dispensing, delivery, mail order, or administration of such drugs, regardless of the type of insurance coverage or medication. For purposes of this paragraph, it is considered a prohibited practice that prevents or interferes with a patient's choice to receive drugs from a 340B entity or its contracted pharmacy if a health insurance issuer, pharmacy benefit manager, or other third-party payor places any additional requirements, restrictions, or unnecessary burdens on the 340B entity or its contracted pharmacy beyond that of any other pharmacy dispensing medications within the scope of general law, including, but not limited to, requiring a claim for a drug to include any identification, billing modifier, attestation, or other indication that a drug is a 340B drug in order to be processed or resubmitted, unless it is required by the Centers for Medicare and Medicaid Services or the Agency for Health Care Administration in administration of the Medicaid program.

(e) Require or compel the submission of ingredient costs or pricing data pertaining to 340B drugs to any health insurance issuer, pharmacy benefit manager, or other third-party payor.

(f) Exclude the 340B entity from the network of the health insurance issuer, pharmacy benefit manager, or other third-party payor on the basis that the 340B entity dispenses drugs subject to an agreement under 42 U.S.C. s. 256b, or refuse to contract with the 340B entity for reasons other than those that apply equally to non-340B entities.

(3) Subsection (2) does not apply to the Medicaid program as payor when Medicaid provides reimbursement for covered outpatient drugs as defined in 42 U.S.C. s. 1396r-8(k).

(4) The commission of any act prohibited by this section is a deceptive and unfair trade practice, constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act under part II of chapter 501, and subjects the violator to all actions, including, but not limited to, investigative demands, remedies, and penalties, provided for in the Florida Deceptive and Unfair Trade Practices Act.

(5) This section may not be construed to be less restrictive than federal law for a person or entity to which this section applies. This section may not be construed to be in conflict with any of the following:

(a) Applicable federal law or regulations.

(b) Other laws of this state that are compatible with applicable federal law.

(6) Limited distribution of a drug that is subject to a risk evaluation and mitigation strategy under 21 U.S.C. s. 355-1 is not a violation of this section.

Section 4. Section 627.64743, Florida Statutes, is created to read:

627.64743 Reimbursement to 340B entities for 340B drugs.—

(1) As used in this section, the term:

(a) "340B drug" means a drug that has been subject to any offer for reduced prices by a manufacturer pursuant to 42 U.S.C. s. 256b and is purchased by a covered entity as defined in 42 U.S.C. s. 256b(a)(4).

(b) "340B entity" means an entity participating or authorized to participate in the 340B Drug Pricing Program, as described in 42 U.S.C. s. 256b, including its pharmacy, or any pharmacy contracted with the participating entity to dispense drugs purchased through the 340B Drug Pricing Program.

(c) "Pharmacy" has the same meaning as in s. 465.003.

(d) "Pharmacy benefit manager" has the same meaning as in s. 627.64741(1).

(2) With respect to reimbursement to a 340B entity for a 340B drug, an insurer issuing, delivering, or renewing an individual health insurance policy in this state which provides prescription drug coverage, or a pharmacy benefit manager on behalf of such insurer, may not do any of the following:

(a) Reimburse the 340B entity for the 340B drug at a rate lower than that paid for the same drug to non-340B entities on the basis that the claim is for a 340B drug.

(b) Impose any terms or conditions on the 340B entity which differ from such terms or conditions applied to non-340B entities on the basis that the entity participates in the 340B Drug Pricing Program set forth in 42 U.S.C. s. 256b or that the drug is a 340B drug, including, but not limited to, any of the following terms or conditions:

1. Fees, charges, clawbacks, or other adjustments or assessments. As used in this subparagraph, the term "other

adjustments" includes, but is not limited to, placing any additional requirements, restrictions, or unnecessary burdens on the 340B entity which result in administrative costs or fees to the 340B entity and which are not placed on non-340B entities, including affiliate pharmacies or in-network pharmacies of the insurer or of the pharmacy benefit manager.

2. Dispensing fees that are less than dispensing fees for non-340B entities.

3. Restrictions or requirements regarding participation in standard or preferred pharmacy networks.

4. Requirements relating to the frequency or scope of audits of inventory management systems.

5. Requirements that a claim for a drug include any identification, billing modifier, attestation, or other indication that a drug is a 340B drug in order to be processed or resubmitted unless it is required by the Centers for Medicare and Medicaid Services or the Agency for Health Care Administration for the administration of the Medicaid program.

6. Any other restrictions, conditions, practices, or policies that are not imposed on non-340B entities.

(c) Require the 340B entity to reverse, resubmit, or clarify a claim after the initial adjudication unless such actions are in the normal course of pharmacy business and not related to 340B drug pricing.

(d) Base an action or a contract requirement solely on the basis that the entity is a participant in the 340B Drug Pricing Program in such a manner that prevents or interferes with a patient's choice to receive such drugs from the 340B entity or its contracted pharmacy, including the creation of a restriction

or an additional charge on a patient who chooses to receive drugs from a 340B entity or its contracted pharmacy through direct dispensing, delivery, mail order, or administration of such drugs, regardless of the type of insurance coverage or medication. For purposes of this paragraph, it is considered a prohibited practice that prevents or interferes with a patient's choice to receive drugs from a 340B entity or its contracted pharmacy if the insurer, or the pharmacy benefit manager on behalf of the insurer, places any additional requirements, restrictions, or unnecessary burdens on the 340B entity or its contracted pharmacy beyond that of any other pharmacy dispensing medications within the scope of general law, including, but not limited to, requiring a claim for a drug to include any identification, billing modifier, attestation, or other indication that a drug is a 340B drug in order to be processed or resubmitted, unless it is required by the Centers for Medicare and Medicaid Services or the Agency for Health Care Administration in administration of the Medicaid program.

(e) Require or compel the submission of ingredient costs or pricing data pertaining to 340B drugs to the insurer or the pharmacy benefit manager.

(f) Exclude the 340B entity from the network of the insurer or pharmacy benefit manager on the basis that the 340B entity dispenses drugs subject to an agreement under 42 U.S.C. s. 256b, or refuse to contract with the 340B entity for reasons other than those that apply equally to non-340B entities.

(3) Subsection (2) does not apply to the Medicaid program as payor when Medicaid provides reimbursement for covered outpatient drugs as defined in 42 U.S.C. s. 1396r-8(k).

(4) The commission of any act prohibited by this section is a deceptive and unfair trade practice, constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act under part II of chapter 501, and subjects the violator to all actions, including, but not limited to, investigative demands, remedies, and penalties, provided for in the Florida Deceptive and Unfair Trade Practices Act. Each commission of a prohibited act constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act.

(5) This section may not be construed to be less restrictive than federal law for a person or entity to which this section applies. This section may not be construed to be in conflict with any of the following:

(a) Applicable federal law or federal regulations.

(b) Other laws of this state that are compatible with applicable federal law.

(6) Limited distribution of a drug that is subject to a risk evaluation and mitigation strategy under 21 U.S.C. s. 355-1 is not a violation of this section.

Section 5. Section 627.65733, Florida Statutes, is created to read:

627.65733 Reimbursement to 340B entities for 340B drugs.—

(1) As used in this section, the term:

(a) "340B drug" means a drug that has been subject to any offer for reduced prices by a manufacturer pursuant to 42 U.S.C. s. 256b and is purchased by a covered entity as defined in 42 U.S.C. s. 256b(a)(4).

(b) "340B entity" means an entity participating or authorized to participate in the 340B Drug Pricing Program, as

described in 42 U.S.C. s. 256b, including its pharmacy, or any pharmacy contracted with the participating entity to dispense drugs purchased through the 340B Drug Pricing Program.

(c) "Pharmacy" has the same meaning as in s. 465.003.

(d) "Pharmacy benefit manager" has the same meaning as in s. 627.6572(1).

(2) With respect to reimbursement to a 340B entity for 340B drugs, an insurer issuing, delivering, or renewing a group, blanket, or franchise health insurance policy in this state which provides prescription drug coverage, or a pharmacy benefit manager on behalf of such insurer, may not do any of the following:

(a) Reimburse the 340B entity for 340B drugs at a rate lower than that paid for the same drug to non-340B entities on the basis that the claim is for a 340B drug.

(b) Impose any terms or conditions on the 340B entity which differ from such terms or conditions applied to non-340B entities on the basis that the entity participates in the 340B Drug Pricing Program set forth in 42 U.S.C. s. 256b or that a drug is a 340B drug, including, but not limited to, any of the following terms or conditions:

1. Fees, charges, clawbacks, or other adjustments or assessments. As used in this subparagraph, the term "other adjustments" includes, but is not limited to, placing any additional requirements, restrictions, or unnecessary burdens on the 340B entity which result in administrative costs or fees to the 340B entity and which are not placed on non-340B entities, including affiliate pharmacies or in-network pharmacies of the insurer or of the pharmacy benefit manager.

2. Dispensing fees that are less than dispensing fees for non-340B entities.

3. Restrictions or requirements regarding participation in standard or preferred pharmacy networks.

4. Requirements relating to the frequency or scope of audits of inventory management systems.

5. Requirements that a claim for a drug include any identification, billing modifier, attestation, or other indication that a drug is a 340B drug in order to be processed or resubmitted unless it is required by the Centers for Medicare and Medicaid Services or the Agency for Health Care Administration for the administration of the Medicaid program.

6. Any other restrictions, conditions, practices, or policies that are not imposed on non-340B entities.

(c) Require the 340B entity to reverse, resubmit, or clarify a claim after the initial adjudication unless such actions are in the normal course of pharmacy business and not related to 340B drug pricing.

(d) Base an action or contract requirement solely on the basis that the entity is a participant in the 340B Drug Pricing Program in such a manner that prevents or interferes with any patient's choice to receive such drugs from the 340B entity or its contracted pharmacy, including the creation of a restriction or additional charge on a patient who chooses to receive drugs from a 340B entity or its contracted pharmacy through direct dispensing, delivery, mail order, or administration of such drugs, regardless of the type of insurance coverage or medication. For purposes of this paragraph, it is considered a prohibited practice that prevents or interferes with a patient's

choice to receive drugs from a 340B entity or its contracted pharmacy if the insurer, or the pharmacy benefit manager on behalf of the insurer, places any additional requirements, restrictions, or unnecessary burdens on the 340B entity beyond that of any other pharmacy dispensing medications within the scope of general law, including, but not limited to, requiring a claim for a drug to include any identification, billing modifier, attestation, or other indication that a drug is a 340B drug in order to be processed or resubmitted, unless it is required by the Centers for Medicare and Medicaid Services or the Agency for Health Care Administration in administration of the Medicaid program.

(e) Require or compel the submission of ingredient costs or pricing data pertaining to 340B drugs to the insurer or the pharmacy benefit manager.

(f) Exclude the 340B entity from the network of the insurer or pharmacy benefit manager on the basis that the 340B entity dispenses drugs subject to an agreement under 42 U.S.C. s. 256b, or refuse to contract with the 340B entity for reasons other than those that apply equally to non-340B entities.

(3) Subsection (2) does not apply to the Medicaid program as payor when Medicaid provides reimbursement for covered outpatient drugs as defined in 42 U.S.C. s. 1396r-8(k).

(4) The commission of any act prohibited by this section is a deceptive and unfair trade practice, constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act under part II of chapter 501, and subjects the violator to all actions, including, but not limited to, investigative demands, remedies, and penalties, provided for in the Florida Deceptive

and Unfair Trade Practices Act. Each commission of a prohibited act constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act.

(5) This section may not be construed to be less restrictive than federal law for a person or entity to which this section applies. This section may not be construed to be in conflict with any of the following:

(a) Applicable federal law or regulations.

(b) Other laws of this state that are compatible with applicable federal law.

(6) Limited distribution of a drug that is subject to a risk evaluation and mitigation strategy under 21 U.S.C. s. 355-1 is not a violation of this section.

Section 6. Section 641.31543, Florida Statutes, is created to read:

641.31543 Reimbursement to 340B entities for 340B drugs.—

(1) As used in this section, the term:

(a) "340B drug" means a drug that has been subject to any offer for reduced prices by a manufacturer pursuant to 42 U.S.C. s. 256b and is purchased by a covered entity as defined in 42 U.S.C. s. 256b(a)(4).

(b) "340B entity" means an entity participating or authorized to participate in the 340B Drug Pricing Program, as described in 42 U.S.C. s. 256b, including its pharmacy, or any pharmacy contracted with the participating entity to dispense drugs purchased through the 340B Drug Pricing Program.

(c) "Pharmacy" has the same meaning as in s. 465.003.

(d) "Pharmacy benefit manager" has the same meaning as in s. 641.314(1).

(2) With respect to reimbursement to a 340B entity for a 340B drug, a health maintenance organization issuing, delivering, or renewing a health maintenance contract in this state which provides prescription drug coverage, or a pharmacy benefit manager on behalf of such health maintenance organization, may not do any of the following:

(a) Reimburse the 340B entity for the 340B drug at a rate lower than that paid for the same drug to non-340B entities on the basis that the claim is for a 340B drug.

(b) Impose any terms or conditions on the 340B entity which differ from such terms or conditions applied to non-340B entities on the basis that the entity participates in the 340B Drug Pricing Program set forth in 42 U.S.C. s. 256b or that a drug is a 340B drug, including, but not limited to, any of the following terms or conditions:

1. Fees, charges, clawbacks, or other adjustments or assessments. For purposes of this subparagraph, the term "other adjustments" includes, but is not limited to, placing any additional requirements, restrictions, or unnecessary burdens on the 340B entity which result in administrative costs or fees to the 340B entity which are not placed on non-340B entities, including affiliate pharmacies or in-network pharmacies of the health maintenance organization or of the pharmacy benefit manager.

2. Dispensing of fees that are less than dispensing fees for non-340B entities.

3. Restrictions or requirements regarding participation in standard or preferred pharmacy networks.

4. Requirements relating to the frequency or scope of

audits of inventory management systems.

5. Requirements that a claim for a drug include any identification, billing modifier, attestation, or other indication that a drug is a 340B drug in order to be processed or resubmitted unless it is required by the Centers for Medicare and Medicaid Services or the Agency for Health Care Administration for the administration of the Medicaid program.

6. Any other restrictions, conditions, practices, or policies that are not imposed on non-340B entities.

(c) Require the 340B entity to reverse, resubmit, or clarify a claim after the initial adjudication unless such actions are in the normal course of pharmacy business and not related to 340B drug pricing.

(d) Base an action or contract requirement solely on the basis that the entity is a participant in the 340B Drug Pricing Program in such a manner that prevents or interferes with any patient's choice to receive such drugs from the 340B entity or its contracted pharmacy, including the creation of a restriction or additional charge on a patient who chooses to receive drugs from a 340B entity or its contracted pharmacy through direct dispensing, delivery, mail order, or administration of such drugs, regardless of the type of insurance coverage or medication. For purposes of this paragraph, it is considered a prohibited practice that prevents or interferes with a patient's choice to receive drugs from a 340B entity or its contracted pharmacy if the health maintenance organization, or the pharmacy benefit manager on behalf of the health maintenance organization, places any additional requirements, restrictions, or unnecessary burdens on the 340B entity or its contracted

pharmacy beyond that of any other pharmacy dispensing medications within the scope of general law, including, but not limited to, requiring a claim for a drug to include any identification, billing modifier, attestation, or other indication that a drug is a 340B drug in order to be processed or resubmitted, unless it is required by the Centers for Medicare and Medicaid Services or the Agency for Health Care Administration in administration of the Medicaid program.

(e) Require or compel the submission of ingredient costs or pricing data pertaining to 340B drugs to the health maintenance organization or the pharmacy benefit manager.

(f) Exclude the 340B entity from the network of the health maintenance organization or pharmacy benefit manager on the basis that the 340B entity dispenses drugs subject to an agreement under 42 U.S.C. s. 256b, or refuse to contract with the 340B entity for reasons other than those that apply equally to non-340B entities.

(3) Subsection (2) does not apply to the Medicaid program as payor when Medicaid provides reimbursement for covered outpatient drugs as defined in 42 U.S.C. s. 1396r-8(k).

(4) The commission of any act prohibited by this section is a deceptive and unfair trade practice, constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act under part II of chapter 501, and subjects the violator to all actions, including, but not limited to, investigative demands, remedies, and penalties, provided for in the Florida Deceptive and Unfair Trade Practices Act. Each commission of a prohibited act constitutes a violation of the Florida Deceptive and Unfair Trade Practices Act.

(5) This section may not be construed to be less restrictive than federal law for a person or entity to which this section applies. This section may not be construed to be in conflict with any of the following:

(a) Applicable federal law or regulations.

(b) Other laws of this state that are compatible with applicable federal law.

(6) Limited distribution of a drug that is subject to a risk evaluation and mitigation strategy under 21 U.S.C. s. 355-1 is not a violation of this section.

Section 7. This act shall take effect July 1, 2026.