

ASSEMBLY, No. 2181

STATE OF NEW JERSEY

219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by:

Assemblyman RAJ MUKHERJI

District 33 (Hudson)

SYNOPSIS

Requires all Medicaid managed care organizations to permit all pharmacies in State to dispense prescriptions for all covered medications.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel.



1 **AN ACT** concerning the dispensation of prescriptions covered by
2 Medicaid managed care organizations and supplementing Title
3 30 of the Revised Statutes.

4
5 **BE IT ENACTED** *by the Senate and General Assembly of the State*
6 *of New Jersey:*

7
8 1. As used in this act:

9 “Division” means the Division of Medical Assistance and Health
10 Services in the Department of Human Services.

11 “Medicaid managed care contract” means a contract for the
12 provision of health care services by a managed care organization to
13 individuals eligible for the Medicaid program pursuant to P.L.1968,
14 c.413 (C.30:4D-1 et seq.) or the NJ FamilyCare program pursuant
15 to P.L.2005, c.156 (C.30:4J-8 et al.).

16
17 2. A Medicaid managed care contract shall include pharmacy
18 choice as a required benefit for any enrollee, to be provided as
19 follows:

20 a. any Medicaid managed care organization operating in this
21 State shall permit all pharmacies in this State to dispense
22 prescriptions for all covered medications regardless of the cost of
23 medication or other criteria developed by the carrier;

24 b. a pharmacy in this State shall be required to accept the terms
25 and conditions of the plan, but in no case shall the pharmacy be
26 required to dispense medication at a rate below the pharmacy's cost
27 of acquisition; and

28 c. the terms and conditions must be designed to allow fair
29 participation by all pharmacies.

30
31 3. To ensure that enrollees have access to a competitive
32 selection of providers, a Medicaid managed care organization shall:

33 a. permit the enrollee to choose any qualified pharmacy
34 provided that the qualified pharmacy is a contracting provider;

35 b. provide that no pharmacy shall be denied the right to
36 participate as a contracting provider, under the same terms and
37 conditions currently applicable to all other contracting pharmacies,
38 provided that the pharmacy accepts the terms and conditions of the
39 Medicaid managed care contract; and

40 c. provide that no copayment, fee, or other condition shall be
41 imposed upon an enrollee selecting a pharmacy that is not also
42 equally imposed upon all enrollees selecting a qualified pharmacy.

43
44 4. The Commissioner of Human Services shall adopt rules and
45 regulations, pursuant to the "Administrative Procedure Act,"
46 P.L.1968, c.410 (C.52:14B-1 et seq.), in order to effectuate the
47 purposes of this act.

STATEMENT

These conditions would apply to any Medicaid managed care contract executed on or after the effective date of the bill.