As Reported by the Senate Health, Human Services and Medicaid Committee

133rd General Assembly

Regular Session

Sub. H. B. No. 365

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Representative Manning, G.

Cosponsors: Representatives Carruthers, Lanese, Richardson, Roemer, Rogers, Seitz, Stein

Senator Huffman, S.

A BILL

То	amend sections 4758.20, 4758.42, 5164.751, and	1
	5167.01 and to enact sections 3902.50, 3902.51,	2
	4729.49, and 5167.123 of the Revised Code to	3
	revise the requirements for a chemical	4
	dependency counselor II license and to prohibit	5
	a health plan issuer or Medicaid managed care	6
	organization from taking certain actions with	7
	respect to reimbursements to 340B covered	8
	entities.	9

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 4758.20, 4758.42, 5164.751, and	10
5167.01 be amended and sections 3902.50, 3902.51, 4729.49, and	11
5167.123 of the Revised Code be enacted to read as follows:	12
Sec. 3902.50. As used in this section and section 3902.51 of the Revised Code:	13 14
(A) "340B covered entity" and "third-party administrator"	15

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have the same meanings as in section 5167.01 of the Revised	16
Code.	17
(B) "Health plan issuer" has the same meaning as in	18
section 3922.01 of the Revised Code.	19
(C) "Terminal distributor of dangerous drugs" has the same	20
meaning as in section 4729.01 of the Revised Code.	21
Sec. 3902.51. (A) On and after the effective date of this	22
section, a contract entered into between a health plan issuer,	23
including a third-party administrator, and a 340B covered entity	24
shall not contain any of the following provisions:	25
(1) A reimbursement rate for a prescription drug that is	26
less than the national average drug acquisition cost rate for	27
that drug as determined by the United States centers for	28
medicare and medicaid services, measured at the time the drug is	29
administered or dispensed, or, if no such rate is available at	30
that time, a reimbursement rate that is less than the wholesale	31
acquisition cost of the drug, as defined in 42 U.S.C. 1395w-	32
3a(c)(6)(B);	33
(2) A dispensing fee reimbursement amount that is less	34
than the reimbursement amount provided to a terminal distributor	35
of dangerous drugs under section 5164.753 of the Revised Code;	36
(3) A fee that is not imposed on a health care provider	37
that is not a 340B covered entity;	38
(4) A fee amount that exceeds the fee amount for a health	39
care provider that is not a 340B covered entity.	40
(B) No health plan issuer or third-party administrator	41
making payments pursuant to a health benefit plan shall	42
discriminate against a 340B covered entity in a manner that	43

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prevents or interferes with an enrollee's choice to receive a	44
prescription drug from a 340B covered entity or its contracted	45
pharmacies.	46
(C) Any provision of a contract entered into between a	47
health plan issuer and a 340B covered entity that is contrary to	48
division (A) of this section is unenforceable and shall be	49
replaced with the dispensing fee or reimbursement rate that	50
applies for health care providers that are not 340B covered	51
entities.	52
Sec. 4729.49. (A) As used in this section, "340B covered	53
entity," "medicaid managed care organization," and "third-party	54
administrator" have the same meanings as in section 5167.01 of	55
the Revised Code.	56
(B) A contract between a terminal distributor of dangerous	57
drugs and a 340B covered entity shall require the terminal	58
distributor to comply with division (C) of this section.	59
(C) When paying a 340B covered entity for a dangerous drug	60
dispensed to a patient, a terminal distributor shall pay to the	61
340B covered entity the full reimbursement amount the terminal	62
distributor receives from the patient and the patient's health	63
insurer, including a third-party administrator or medicaid	64
managed care organization, except that the terminal distributor	65
may deduct from the full reimbursement amount a fee agreed on in	66
writing by the terminal distributor and the 340B covered entity.	67
Sec. 4758.20. (A) The chemical dependency professionals	68
board shall adopt rules to establish, specify, or provide for	69
all of the following:	70
(1) Fees for the purposes authorized by section 4758.21 of	71
the Revised Code;	72

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associate's or bachelor's degree in either of the following with	298
a specialization in chemical dependency counseling:	299
(a) A behavioral science;	300
(b) Nursing.	301
(2) Have a minimum of one hundred eighty hours of	302
education in chemical dependency that meets the requirements	303
specified in rules adopted under section 4758.20 of the Revised	304
Code;	305
(3) While holding a valid chemical dependency counselor	306
assistant certificate, have successfully completed at least one	30
semester of practicum experience in chemical dependency that	308
meets the requirements specified in rules adopted under section	309
4758.20 of the Revised Code and includes at least sixteen hours	310
per week of practicum experience, at least two hours per week of	311
which is supervised practicum experience;	312
(4) Have at least one thousand hours of compensated work	313
<pre>experience as a chemical dependency counselor assistant;</pre>	314
(5) Provide to the chemical dependency professionals board	315
a written recommendation from an individual who supervised the	316
individual's practice of chemical dependency counseling as a	31
chemical dependency counselor assistant as required by division	318
(B) of section 4758.59 of the Revised Code;	319
(6) Pass one or more examinations administered pursuant to	320
section 4758.22 of the Revised Code for the purpose of	321
determining competence to practice as a chemical dependency	322
counselor II.	323
(D) To meet the requirements of this division, an	324
individual must meet all of the following requirements:	325

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(1) Since at least December 31, 2008, continuously have	326
done both of the following:	327
(a) Held a valid chemical dependency counselor assistant	328
<pre>certificate;</pre>	329
(b) Practiced chemical dependency counseling while under	330
supervision as required by division (B) of section 4758.59 of	331
the Revised Code.	332
(2) Provide to the board a written recommendation from an	333
individual who supervised the individual's practice of chemical	334
dependency counseling as a chemical dependency counselor	335
assistant;	336
(3) Have a minimum of the number of hours specified in	337
rules adopted under section 4758.20 of the Revised Code of	338
training in chemical dependency that meets the requirements	339
specified in those rules;	340
(4) Pass one or more examinations administered pursuant to	341
section 4758.22 of the Revised Code for the purpose of	342
determining competence to practice as a chemical dependency	343
<pre>counselor II.</pre>	344
Sec. 5164.751. (A) As used in this section, "state maximum	345
allowable cost" means the per unit amount the medicaid program	346
pays a terminal distributor of dangerous drugs for a prescribed	347
drug included in the state maximum allowable cost program	348
established under division (B) of this section. "State maximum	349
allowable cost" excludes dispensing fees and copayments,	350
coinsurance, or other cost-sharing charges, if any.	351
(B) The Subject to section 5167.123 of the Revised Code,	352
<pre>the medicaid director shall establish a state maximum allowable</pre>	353
cost program for purposes of managing medicaid payments to	354

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terminal distributors of dangerous drugs for prescribed drugs	355
identified by the director pursuant to this division. The	356
director shall do all of the following with respect to the	357
program:	358
(1) Identify and create a list of prescribed drugs to be	359
included in the program.	360
(2) Update the list of prescribed drugs described in	361
division (B)(1) of this section on a weekly basis.	362
(3) Review the state maximum allowable cost for each	363
prescribed drug included on the list described in division (B)	364
(1) of this section on a weekly basis.	365
Sec. 5167.01. As used in this chapter:	366
(A) "340B covered entity" means an entity described in	367
section 340B(a)(4) of the "Public Health Service Act," 42 U.S.C.	368
256b(a)(4) and includes any pharmacy under contract with the	369
entity to dispense drugs on behalf of the entity.	370
(B) "Affiliated company" means an entity, including a	371
third-party payer or specialty pharmacy, with common ownership,	372
members of a board of directors, or managers, or that is a	373
parent company, subsidiary company, jointly held company, or	374
holding company with respect to the other entity.	375
(B) (C) "Care management system" means the system	376
established under section 5167.03 of the Revised Code.	377
$\frac{(C)}{(D)}$ "Controlled substance" has the same meaning as in	378
section 3719.01 of the Revised Code.	379
$\frac{(D)-(E)}{(D)}$ "Dual eligible individual" has the same meaning as	380
in section 5160.01 of the Revised Code.	381

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or dispensed, or, if no such rate is available at that time, a	437
reimbursement rate that is less than the wholesale acquisition	438
cost of the drug, as defined in 42 U.S.C. 1395w-3a(c)(6)(B);	439
(2) A fee that is not imposed on a health care provider	440
that is not a 340B covered entity;	441
(3) A fee amount that exceeds the amount for a health care	442
provider that is not a 340B covered entity.	443
(B) The organization, or its contracted third-party	444
administrators, shall not discriminate against a 340B covered	445
entity in a manner that prevents or interferes with a medicaid	446
recipient's choice to receive a prescription drug from a 340B	447
covered entity or its contracted pharmacies.	448
(C) Any provision of a contract entered into between the	449
organization and a 340B covered entity that is contrary to	450
division (A) of this section is unenforceable and shall be	451
replaced with the dispensing fee or payment rate that applies	452
for health care providers that are not 340B covered entities.	453
Section 2. That existing sections 4758.20, 4758.42,	454
5164.751, and 5167.01 of the Revised Code are hereby repealed.	455