



**THE OKLAHOMA
PATIENT'S RIGHT TO PHARMACY CHOICE ACT
ADVISORY COMMITTEE MEETING**

February 18, 2021



PATIENT'S RIGHT TO PHARMACY CHOICE ADVISORY COMMITTEE

REVISED A G E N D A – EXHIBIT A

The next regular meeting of the Patient's Right to Pharmacy Choice Advisory Committee as established by Insurance Commissioner Glen Mulready will be held on Thursday, February 18, 2021, at 10:00 am. The meeting will take place virtually or by phone due to the weather that has transpired.

This public meeting is being held consistent with the amendments to the Open Meeting Act, 25 O.S. § 301 et seq., signed into law by Gov. Stitt on February 8, 2021. See SB 1031, 2021

CONFERENCE LINE: +1-844-621-3956 United States (Toll Free) Conference ID: 182 951 4772#

The following advisory committee members will be attending via the WebEx virtual platform: Mark Lewandowski, Jim Consedine, Bill Moore, Melanie Maxwell, The Honorable Bryan Dixon, Rose Thomas-Bendel, Toby Baldwin

The following OID staff will be attending via WebEx virtual platform: Ron White, Kim Bailey, Ashley Scott, Rick Wagnon and Benna Nye

Loss of connectivity: If connection is lost at any time during this meeting, the meeting will be stopped, and reconvened once connection is reestablished. If connection cannot be restored after thirty (30) minutes, the meeting will be stopped and a special meeting will be scheduled.

Meeting Etiquette: In an effort to provide the best connectivity for all virtual attendees, we asked that only the advisory members use the video option when attending the meeting. All other attendees should join the meeting by audio connection only. Thank you for your cooperation.

Agenda

- I. Call to Order**
- II. Committee Roll Call**
- III. Review and Approval of the Minutes**
- IV. PBM Complaint Case Review**
- V. Director's Report**
 - a. Ron White, Director of PBM Regulatory Compliance, OK Insurance
Department**
- VI. New Business**
- VII. Adjournment**

Presentation Complaint ID without PBM #	Pharmacy Type	Complaint Type	Complainant Acknowledgement	PBM Notice Sent	PBM Response Received	Health Plan Type	Supportive Plan Documentation Received
Referred to Network Provider Owned or Affiliated with the PBM/Health Plan							
		1. Oklahoma Consumer-directed to PBM owned Mail Order pharmacy after In-network Non-Preferred Retail Pharmacy Claim Denial.					
		2. Oklahoma Consumer pharmacy benefits incentivize their choice by higher qty available at Mail Order without a limitation of fills / Rx limitations applied.					
		3. The In-Network Non-Preferred Retail Network pharmacies are limited to 30 days dispensing and commonly a limited number of fills / Rx.					
		4. This is in potential violation to Sections 6961(C), 6963(E) and 6963(D)					
218211	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	9/29/2020	10/2/2020	10/20/2020	XXX Plan	no
218212	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/6/2020	11/6/2020	12/4/2021	ERISA Self-Funded Plan	no
218213	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/6/2020	11/6/2020	1/28/2021	ERISA Self-Funded Plan	no
218214	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/6/2020	11/6/2020	1/28/2021	ERISA Self-Funded Plan	no
2118215	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/6/2020	11/6/2020	12/17/2020	ERISA Self-Funded Plan	yes
218216	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	1/25/2021	1/25/2028	1/28/2021	ERISA self-funded plan	yes
218217	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	1/12/2021	1/12/2021	1/26/2021	ERISA self-funded plan	yes
218218	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	1/8/2021	1/8/2021	1/17/2021	ERISA self-funded plan	yes
218219	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	1/8/2021	1/8/2021	1/17/2021	ERISA self-funded plan	yes
2182110	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	1/8/2021	1/8/2021	1/26/2021	ERISA self-funded plan	yes
2182111	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/6/2020	11/6/2020	1/17/2021	ERISA self-funded plan	yes
2182112	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/6/2020	11/6/2020	11/13/2021	ERISA self-funded plan	yes
2182113	Mail Order	Consumer Mail or Preferred Network opt Out Denied at PBM or Health Plan	11/5/2020	11/5/2020	1/15/2021	ERISA Self-Funded Plan	yes
2182114	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/9/2020	11/9/2020	1/16/2021	XXX	yes

Presentation Complaint ID without PBM #	Pharmacy Type	Complaint Type	Complainant Acknowledgement	PBM Notice Sent	PBM Response Received	Health Plan Type	Supportive Plan Documentation Received
Network Consumer Share (Co-pay) Differential							
		1. Oklahoma consumers are not provided the same out of pocket at mail order as Non-Preferred Retail					
		2. Oklahoma consumers are incentivized to use Mail Order with Larger qty and less out of pocket to select PBM-owned mail order pharmacy.					
		3. This is a potential violation of O.S. §6963(E)					
2182115	Mail Order	Network Consumer Share (Co-pay) Differential	1/8/2021	1/8/2021	1/26/2021	ERISA Self-Funded Plan	yes
2182116	Mail Order	Network Consumer Share (Co-pay) Differential	1/25/2021	1/25/2021	1/28/2021	ERISA Self-Funded Plan	No
Consumer Mandated Specialty Pharmacy							
		1. Oklahoma Consumers are being directed PBM Owned Specialty pharmacy.					
		2. In-Network Non-Preferred or Preferred Pharmacies have all specialty claims denied referring to PBM owned Specialty Pharmacy.					
		3. This is in potential violation of O.S. §36.6961.C.					
2182117	Specialty	Consumer Mandated PBM Owned Specialty Pharmacy	10/20/2020	10/21/2020	1/6/2021	ERISA Self-Funded Plan	yes
2182118	Specialty	Consumer Mandated PBM Owened Specialty Pharmacy	11/6/2020	11/6/2020	12/3/2020	ERISA Self-Funded Plan	yes

Presentation Complaint ID without PBM #	Pharmacy Type	Complaint Type	Complainant Acknowledgement	PBM Notice Sent	PBM Response Received	Health Plan Type	Supportive Plan Documentation Received
Pharmacy Charged a Fee to be credentialled and added to the Retail Pharmacy Network.							
		1. PBMs require credentialling of Network pharmacies every 3 to 5 years. 2. PBM now requiring Network pharmacies to pay \$600 to be credentialled 3. This is potential violation of O.S. 36.6962.B.2.					
2182119		Pharmacy Requested Network Contract and not received	2/4/2021	N/A	N/A	N/A	N/A
2182120		Pharmacy Requested Network Contract and not received	2/4/2021	N/A	N/A	N/A	N/A

Presentation Complaint ID without PBM #	Pharmacy Type	Complaint Type	Complainant Acknowledgement	PBM Notice Sent	PBM Response Received	Health Plan Type	Supportive Plan Documentation Received
Late PBM response Violation							
		1. PBM did not respond to or with requested information with in 30 days					
		2. In potential violation of O.S. §36.6965.C.					
2182121	Mail Order	PBM did not provide plan documents in a timely manner	9/29/2020	10/2/2020	10/20/2020	XXX Plan	no
2182122	Mail Order	Network Consumer Share (Co-pay) Differential PBM responded by referring to Health/Plan Did not provide required information in a timely manner. The PBM is the licensed entity providing covered services to an Oklahoma consumer.	1/8/2021	1/8/2021	1/15/2021	ERISA Self-Funded Plan	yes
2182123	Mail Order	Consumer Mandated Specialty Pharmacy	10/20/2020	10/21/2020	1/6/2021	ERISA Self-Funded Plan	yes
2182124	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/6/2020	11/6/2020	1/17/2021	ERISA Self-Funded Plan	yes
2182125	Mail Order	Consumer Mail or Preferred Network opt Out Denied at PBM or Health Plan	11/5/2020	11/5/2020	1/15/2021	ERISA Self-Funded Plan	yes
2182126	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	12/21/2020	1/8/2021	1/15/2021	ERISA Self-Funded Plan	yes
2182127	Mail Order	Network Consumer Share (Co-pay) Differential	11/6/2020	11/6/2020	2/3/2021	Fully Insured	yes
2182128	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/5/2020	11/5/2020	2/4/22021	Fully Insured	yes
2182129	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/5/2020	11/5/2020	2/4/2021	Fully Insured	yes
2182130	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/9/2020	11/9/2020	1/16/2021	XXX Plan	yes
2182131	Mail Order	PBM did not provide plan documents in a timely manner	10/21/2020	10/21/2020	11/23/2020	ERISA Self-Funded Plan	no
2182132	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/3/2020	11/3/2020	11/27/2020	ERISA Self-Funded Plan	no
2182133	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/3/2020	11/3/2020	11/27/2020	ERISA Self-Funded Plan	no
2182134	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/3/2020	11/3/2020	11/25/2020	ERISA Self-Funded Plan	no
2182135	Mail Order	Referred to Network Provider Owned or Affiliated with the PBM/Health Plan	11/3/2020	11/3/2020	11/27/2020	ERISA Self-Funded Plan	no

PBM Complaint Review

Effective as of 2/15/21

STATE BASED SYSTEMS POST 9/1/20	CONSUMER	NETWORK	PHARMACY	PBM OWNED	CONSUMER	Network Participation Fees
Individual PBM SBS	CHOICE	Copay/DIFF	NOT ABLE TO	SPECIALTY	MAIL OPT OUT	Credentialing
Complaints Received	RESTRICTION	MAIL VS RETAIL	CONTRACT	RESTRICTION	DENIED	Charge
539	323	47	345	21	59	2
* Many PBM Complaints have multiple complaints						

P & T	NETWORK	PARTIAL LISTING OF	CONTRACT RESTRICTIONS	UM/MAIL ORDER	Pharmacy Fees
FORMULARY	ACCESS	NETWORK PHARMACIES	AGAINST CONSUMER	RESTRICTION	Post Adjudication Transaction Fees
COMPLAINT	Standard	ON MEMBER FACING MATERIAL	EDUCATION	DURING EMERGENCY	Being Charged to Pharmacy
1	17	235	6	5	18,754

PBM Complaint Tracking

ACKNOWLEDGEMENT	SBS PBM	WAITING FOR	WAITING FOR	WAITING	RESOLUTION
LETTER EMAILED	COMPLAINT	PHARMACY	PBM	FOR HEALTH PLAN	PRIOR TO ADVISORY
PHARMACY	OPEN CASES	INFORMATION	INFORMATION	INFORMATION	COMMITTEE REVIEW
539	299	0	63	48	285

COMPLAINT	COMPLAINT	WAITING FOR	ADVISORY	ADVISORY	AC REVIEWED
WITHOUT	WITHDRAWN	ADVISORY	COMMITTEE	COMMITTEE	SENT TO LEGAL
MERIT		AGENDA	THIS MEETING	REVIEWED	FOR ADM REVIEW
22	3	68	35	8	8

ADMINISTRATIVE PBM	ADMINISTRATIVE PBM	ADMINISTRATIVE HP	ADMINISTRATIVE HP
DETERMINATION	DETERMINATION	DETERMINATION	DETERMINATION
# NO VIOLATION	# VIOLATIONS	# NO VIOLATIONS	# VIOLATIONS
285	0	285	0

New Business



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Next Meeting March 18, 2021

