

## S 1058

### Pharmacy Competition and Consumer Choice Act of 2011

**Congress:** 112 (2011–2013, Ended)

**Chamber:** Senate

**Policy Area:** Health

**Introduced:** May 24, 2011

**Current Status:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions.

**Latest Action:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions. (May 24, 2011)

**Official Text:** <https://www.congress.gov/bill/112th-congress/senate-bill/1058>

## Sponsor

**Name:** Sen. Pryor, Mark L. [D-AR]

**Party:** Democratic • **State:** AR • **Chamber:** Senate

## Cosponsors (6 total)

| Cosponsor                    | Party / State | Role | Date Joined  |
|------------------------------|---------------|------|--------------|
| Sen. Moran, Jerry [R-KS]     | R · KS        |      | May 24, 2011 |
| Sen. Boozman, John [R-AR]    | R · AR        |      | Jul 5, 2011  |
| Sen. Johnson, Tim [D-SD]     | D · SD        |      | Jul 11, 2011 |
| Sen. Wicker, Roger F. [R-MS] | R · MS        |      | Jul 29, 2011 |
| Sen. Cochran, Thad [R-MS]    | R · MS        |      | Feb 7, 2012  |
| Sen. Conrad, Kent [D-ND]     | D · ND        |      | May 10, 2012 |

## Committee Activity

| Committee  | Chamber | Activity    | Date         |
|--|---------|-------------|--------------|
| Health, Education, Labor, and Pensions Committee | Senate  | Referred To | May 24, 2011 |

## Subjects & Policy Tags

### Policy Area:

Health

## Related Bills

| Bill        | Relationship   | Last Action   |
|-------------|----------------|---|
| 112 HR 1971 | Identical bill | Sep 8, 2011: Referred to the Subcommittee on Health, Employment, Labor, and Pensions. |

Pharmacy Competition and Consumer Choice Act of 2011 - Amends the Public Health Service Act, the Employee Retirement Income Security Act of 1974 (ERISA), the Internal Revenue Code, and part D (Voluntary Prescription Drug Benefit Program) of title XVIII (Medicare) of the Social Security Act to prohibit a group or individual health plan from entering into a contract with any pharmacy benefits manager (PBM) to manage the prescription drug coverage provided under such plan or to control the costs of such coverage, unless the PBM satisfies the requirements of this Act.

Directs a PBM to provide at least annually a report to each plan sponsor that includes information on the number and total costs of prescriptions under the contract, payments to pharmacies, payments from pharmaceutical manufacturers, and generic drugs and brand name drugs dispensed.

Sets forth provisions governing the interaction between a PBM and pharmacies that contract with the PBM, including requiring a PBM to: (1) include in contracts drug pricing information and agree to provide timely updates on pricing, (2) agree to pay pharmacies promptly for clean claims, (3) not exclude qualifying pharmacies willing to accept terms and conditions of PBM, and (4) require each pharmacy to sign a contract before assuming responsibility to fill prescriptions for a PBM.

Prohibits a PBM from mandating or providing incentives to beneficiaries for use of a pharmacy in which the PBM has an ownership interest.

Sets forth limits on audits of pharmacy providers by PBM, including with respect to record keeping, appeals, and recoupment.

Establishes limits and notice requirements related to PBM's selling claims or utilization data.

## **Actions Timeline**

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- **May 24, 2011:** Introduced in Senate
- **May 24, 2011:** Read twice and referred to the Committee on Health, Education, Labor, and Pensions.