

116TH CONGRESS
1ST SESSION

H. R. 3223

To require the Comptroller General of the United States to study the role pharmacy benefit managers play in the pharmaceutical supply chain and to provide Congress with appropriate policy recommendations, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 12, 2019

Mr. MARSHALL (for himself, Mr. WELCH, Mr. CARTER of Georgia, and Mr. GONZALEZ of Texas) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To require the Comptroller General of the United States to study the role pharmacy benefit managers play in the pharmaceutical supply chain and to provide Congress with appropriate policy recommendations, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Pharmacy Benefit
5 Manager Accountability Study Act of 2019”.

1 **SEC. 2. STUDY BY COMPTROLLER GENERAL OF UNITED**
2 **STATES.**

3 (a) **IN GENERAL.**—The Comptroller General of the
4 United States shall, in consultation with appropriate
5 stakeholders, conduct a study on the role of pharmacy
6 benefit managers with respect to federally facilitated Ex-
7 changes operated pursuant to section 1321(c) of the Pa-
8 tient Protection and Affordable Care Act (42 U.S.C.
9 18041(c)).

10 (b) **PERMISSIBLE EXAMINATION.**—In conducting the
11 study required under subsection (a), the Comptroller Gen-
12 eral may examine various qualitative and quantitative as-
13 pects of the role of pharmacy benefit managers with re-
14 spect to federally facilitated Exchanges described in such
15 subsection, such as the following:

16 (1) The role that pharmacy benefit managers
17 play in the pharmaceutical supply chain of such Ex-
18 changes.

19 (2) The state of competition among pharmacy
20 benefit managers on such Exchanges, including the
21 market share for the Nation’s largest pharmacy ben-
22 efit managers.

23 (3) The use of rebates and fees by pharmacy
24 benefit managers with respect to such Exchanges,
25 including—

1 (A) the extent to which rebates are passed
2 on to qualified health plans offered on such Ex-
3 changes and whether such rebates are passed
4 on to individuals enrolled in such plans;

5 (B) the extent to which rebates are kept by
6 such pharmacy benefit managers; and

7 (C) the role of any fees charged by such
8 pharmacy benefit managers.

9 (4) Whether pharmacy benefit managers struc-
10 ture their formularies with respect to such Ex-
11 changes in favor of high-rebate prescription drugs
12 over lower-cost, lower-rebate alternatives.

13 (5) The average prior authorization approval
14 time for pharmacy benefit managers with respect to
15 such Exchanges.

16 (6) Factors affecting the use of step therapy by
17 pharmacy benefit managers with respect to such Ex-
18 changes.

19 (7) The extent to which the price that phar-
20 macy benefit managers charge private payors on
21 such Exchanges for a drug is more than such phar-
22 macy benefit managers pay the pharmacy for the
23 drug.

24 (c) REPORT.—Not later than the date that is three
25 years after the date of enactment of this Act, the Comp-

1 troller General shall submit to the Secretary of Health and
2 Human Services, the Committee on Health, Education,
3 Labor, and Pensions of the Senate, and the Committee
4 on Energy and Commerce of the House of Representatives
5 a report containing the results of the study conducted
6 under subsection (a), including policy recommendations.

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