

HB

32

ALASKA STATE HOUSE OF REPRESENTATIVES

Interim Address:

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North Pole, AK 99705
(907)-488-5725
Fax# (907)-488-4721



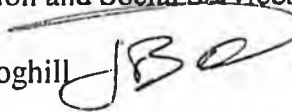
Session Contact:
(907)-465-3719
FAX# (907)-465-3258
State Capitol
Room 204

REPRESENTATIVE JOHN COGHILL

Memorandum

Date: Thursday, May 08, 2003

To: Representative Peggy Wilson, Chair
House Health, Education and Social Services

From: Representative John Coghill 

Re: Hearing Request for HB 32

Please Schedule HB 32, "An Act relating to use of a uniform prescription drug information card and forms, standards, and procedures in processing health insurance claims; and providing for an effective date." for a committee hearing at your earliest convenience. I have attached the committee packet.

Thank you for your consideration.

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REPRESENTATIVE JOHN COGHILL MAJORITY LEADER

Sponsor Statement HB 32 – Uniform Prescription Information Card

The intent of HB32 is to have a uniform prescription card implemented to expedite the amount of time a pharmacy technician spends gathering necessary information from the insurance company in order to process the insurance claim. Pharmacists are spending a disproportionate amount of time trying to address reimbursement issues rather than serving the health care needs of their customers. HB 32 would allow for more face-to-face care between pharmacists and patients. It would also minimize confusion, eliminate unnecessary paperwork, decrease administrative burdens, and streamline the dispensation of prescription products paid for by third party payors.

LETTER OF INTENT

OFFERED IN THE HOUSE HEALTH, EDUCATION AND SOCIAL SERVICES
BY REP. COGHILL

TO: CS for HB 32

1 It is the intent of the Alaska State Legislature that any entity that provides coverage for
2 prescription drugs and issues an insurance card shall provide on the insurance card uniform
3 information necessary for claims submission and adjudication.

4

5 The uniform prescription card should consist of items that are required for the adjudication
6 of claims. The card may include but is not limited to: the health care insurer's name,
7 address, business identification number, the covered individual's identification number,
8 telephone number of the pharmacy benefit manager (if different from the health care
9 insurer), processor control number, group number, person code. If an insurance company
10 issues medical cards that have the necessary pharmacy information on them, there will be
11 no need to reissue new, separate pharmacy cards.

12

13 It is also the Alaska State Legislature's intent that the Division of Insurance confer with
14 covered individuals, pharmacies or their representatives, and insurance companies or their
15 representatives in developing regulations to implement the act.

16

23-LS0203\D
Ford
3/5/03

CS FOR HOUSE BILL NO. 32()
IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTY-THIRD LEGISLATURE - FIRST SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVES COGHILL, Gruenberg, Whitaker

A BILL
FOR AN ACT ENTITLED

1 "An Act relating to use of a uniform prescription drug information card and forms,
2 standards, and procedures in processing health insurance claims; and providing for an
3 effective date."

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

5 * Section 1. AS 21.06.085(a) is amended to read:

6 Sec. 21.06.085. Uniform data and procedures for health claims. (a) The
7 director shall adopt by regulation uniform claims forms, uniform prescription drug
8 information cards, uniform standards, and uniform procedures for the processing of
9 data relating to billing for and payment of health care services provided to state
10 residents. A health care insurer shall use the uniform claims forms and comply with
11 the uniform standards and procedures established under this section.

12 * Sec. 2. AS 21.06.085(b)(2) is amended to read:

13 (2) "health care services" has the meaning given in AS 21.86.900 and
14 includes prescription drugs.

1

* Sec. 3. This Act takes effect immediately under AS 01.10.070(c).



NATIONAL ASSOCIATION OF
CHAIN DRUG STORES

May 8, 2003

The Honorable John Coghill
Alaska State House of Representatives
State Capitol, Room 204
Juneau, AK 99801-1182

Dear Representative Coghill,

Thank you so much for your testimony yesterday afternoon before the House Labor and Commerce Committee. On behalf of the Alaska members of the National Association of Chain Drug Stores, I want to thank you for presenting this important issue to your colleagues in such a clear and succinct manner.

After listening to the hearing, I felt remiss in perhaps not having provided you with important information you needed in responding to some of the questions from your colleagues.

I am proud to announce that 26 states have passed legislation adopting uniform prescription drug cards ... both Washington and Oregon are among those states.

To clarify for Representative Gatto, it is not the intent, nor desire of the pharmacy community to require insurers to issue yet another card, but to put the necessary information on the cards that are currently issued.

In some states we've made arrangements for stickers with the information to be placed on the cards until new cards are normally issued if it would be a time/money saver in the short-term.

Unfortunately as Ms. Campbell stated there is little we can do to combine all the cards into one. That would have to be something worked out among and between the insurance companies.

I am attaching for your information the rules that were adopted by the Washington State Office of the Insurance Commissioner to implement the uniform drug card statute that was passed here in 2001.

Like Alaska, we have a number of insurance companies in Washington, both large and small. In dealing with this issue in Alaska, the two companies most involved in the discussions have been Aetna and Blue Cross. Both companies operate in Washington State and beginning July 1, 2003 will have to comply with the rules as adopted here.

Once they have made the formatting changes for Washington, adopting similar requirements in Alaska would eliminate any additional charges.

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P.O. Box 1417-D49
Alexandria, Virginia
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www.nacds.org

In Washington, we have also given them a year to comply with the new format. It is not the intent of community pharmacy to over burden the insurance companies by having to "drop everything" and issue new cards. That being said, some companies do not issue new cards unless there is a major change in benefit or claims processor. We would like them to be required to issue the new cards within the 12 month time frame.

I would be happy to provide you with the rules adopted in Oregon as well as the statutes enacting both laws if that would be of assistance in writing the letter of intent as discussed yesterday. As part of the letter, it may also be helpful to outline to whom this law applies. It is important to pharmacists that it apply across the board to any entity issuing cards that can be used for acquiring prescription drug benefits.

Again, thank you so much for your support of community pharmacy. If I can be of assistance to you or Willow, please do not hesitate to call.

Sincerely,



Lis Houchen Merten
Regional Director, State Government Affairs
924 Capitol Way South, Suite 216
Olympia, WA 98501
(360) 236-1246
lmerten@nacds.org

cc: Nancy Davis, AKPhA
Frank Bickford

Subject: HB 32-Uniform Prescription Card

Date: Wed, 07 May 2003 10:01:19 +0000

From: aimee.mortemore@att.net

To: Representative_Tom_Anderson@legis.state.ak.us, Representative_Bob_Lynn@legis.sate.ak.us,
Representative_Nancy_Dahlstrom@legis.state.ak.us,
Representative_Carl_Gatto@legis.state.ak.us,
Representative_Norm_Rokeberg@legis.state.ak.us,
Representative_Harry_Crawford@legis.state.ak.us,
Representative_David_Guttenberg@legis.state.ak.us.

Please vote in favor of HB32 when it comes to Committee.

A uniform prescription drug card will greatly benefit the citizens of Alaska. They will be able to obtain their prescription medication with much less hassle.

Thank You,
Aimee Mortemore
330 Old Steese Hwy #344
Fairbanks, AK 99701
aimee.mortemore@att.net
Pharmacist at Fairbanks Memorial Hospital

Subject: HB 32

Date: Wed, 07 May 2003 06:48:41 -0800

From: Roger Penrod <pharmboy@gci.net>

To: Tom Anderson <Representative_Tom_Anderson@legis.state.ak.us>

Representative Anderson,

Please vote in favor of HB 32 when it comes to your committee.

Roger Penrod R.Ph.
Fairbanks, AK

<p>Roger Penrod <pharmboy@gci.net> Staff Pharmacist Fairbanks Professional Pharmacy</p>

Subject: HB32-Uniform Prescription Drug Card

Date: Wed, 7 May 2003 02:11:59 -0800

From: "Roger Mortemore" <r.mortemore@worldnet.att.net>

To: <Representative_Tom_Anderson@legis.state.ak.us>,
<Representative_Bob_Lynn@legis.state.ak.us>,
<Representative_Nancy_Dahlstrom@legis.state.ak.us>,
<Representatvie_Carl_Gatto@legis.state.ak.us>,
<Representative_Norm_Rokeberg@legis.state.ak.us>,
<Representatvie_Harry_Crawford@legis.state.ak.us>,
<Representative_David_Guttenberg@legis.state.ak.us>

Please vote in favor of HB 32 when it comes to committee.

This bill will help the citizens of Alaska and the Pharmacists of Alaska to better serve the public. It will save time and money by not wasting time making phone calls to the insurance company which will allow the sick patients to return home and work much quicker.

Thank You,

Roger Mortemore, R.Ph.
Member, Board of Directors,
Alaska Pharmacist Association
1550 Holy Cross
Fairbanks, AK 99709
r.mortemore@att.net
Pharmacy Manager/Pharmacist
Safeway Bentley Mall
30 College Road
Fairbanks, AK 99701

January 28, 2003

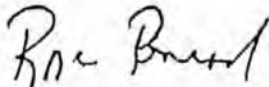
Representative John Coghill
House of Representatives
State Capitol
Juneau, AK 99801-1102

Dear Representative Coghill,

I commend you for your introduction of HB 32 concerning Uniform Prescription Information Cards. This legislation will benefit the general public in many ways. The first thing it will accomplish is saving time for the patient when at a pharmacy to get a prescription drug order filled. Having this information in a clear format will allow the pharmacists and technicians of the given pharmacy to enter the insurance information into the computer in a timely manner and will help to avoid calls to the insurance company "help desk". These calls to insurance companies are quite time consuming and you usually have to navigate through a voice message maze to get the answers you need. Secondly, by clarifying this information, it is a time saving factor that allows the pharmacist to spend more time with their patient (customer) to be sure they understand their medications.

As you may know, nineteen states have already enacted this type of legislation. It truly provides a win-win situation for the consumer and the provider. Thank you for your time.

Sincerely,



Roger Penrod, RPh.
Fairbanks Professional Pharmacy
1001 Nobel Street
Fairbanks, AK 99701
907/452-2556

Subject: HB 32

Date: Wed, 30 Apr 2003 00:52:22 -0800

From: Gerald KW Brown <gkwbrown@alaska.com>

Organization: Brown Family Computer

To: Representative_Tom_Anderson@legis.state.ak.us

Dear Chairperson Anderson,

I am writing you asking you to support HB 32, which is asking for Uniform and standard information to be put on all health care and Prescription Coverage cards issued to to all insured in the State of Alaska. Too many times, we get blank cards (No names or id numbers) cards that lack information as to where to send the information, what company to send it to, what numbers need to be submitted, who the card holder is what control, group or carrier numbers are, who to call if we have questions, this all takes time (some times 15-60 minutes or longer) some times they are only open 9:00AM - 5:00PM Eastern time so when we get a prescription at 8PM the help desk is closed 4 hours earlier and won't be open til 9AM then next day or Monday, and we have a small child with and ear ache or need pain medication for a burn or broken arm. All we are asking for is to have the needed information issued on the card. simple straight forward. Thank you

Gerald KW Brown, President
Alaska Pharmacists Association
gkwbrown@alaska.com
907-452-1514

Subject: HB 32

Date: Tue, 29 Apr 2003 22:49:45 -0800

From: "Eric and Angie LeBoeuf" <ericleb@alaska.net>

To: <Representative_Tom_Anderson@legis.state.ak.us>

Angie LeBoeuf<?xml:namespace prefix = o ns =
"urn:schemas-microsoft-com:office:office" />

PO Box 110982

Anchorage, AK 99511

April 29, 2003

The Honorable Representative Tom Anderson

State Capitol

Juneau, Alaska

Dear Representative Anderson ,

I would like to ask you to vote in favor of HB 32 when it comes to your committee. This bill will ease the already over tasked pharmacy staff by making the billing process direct and smooth . The end result will be a happier citizen who receives his or her medication in a more timely manner. Currently some insurance cards do not contain all the necessary information needed to process a prescription claim. HB 32 will require that information on the insurance card and prevent unnecessary phone calls to insurance providers. It is a win-win situation for all.

Thank you.

Sincerely,

Angie LeBoeuf

Pharmacist

South Anchorage

Subject: HB 32- Uniform Prescription Drug Card

Date: Tue, 29 Apr 2003 09:32:52 -0800

From: Barry D Christensen <island.pharm@juno.com>

**To: Representative_David_Guttenberg@legis.state.ak.us,
Representative_Harry_Crawford@legis.state.ak.us,
Representative_Norm_Rokeberg@legis.state.ak.us,
Representative_Carl_Gatto@legis.state.ak.us,
Representative_Nancy_Dahlstrom@legis.state.ak.us,
Representative_Bob_Lynn@legis.state.ak.us, Representative_Tom_Anderson@legis.state.ak.us**

CC: BPGAlaska@aol.com

Dear Members of the House Labor and Commerce Committee,

As a practicing Community Pharmacist in Ketchikan I urge your support for HB 32 when it appears in your committee. The intent of the bill is to provide for consistent information on prescription drug cards so that pharmacist and patients aren't hindered in picking up a prescription simply because of a lack of information or misinformation on a prescription drug card. The bill is simply a win/win/win for pharmacists/patients/insurance companies in terms of simplifying the filling of a prescription involving a prescription drug card.

The bill does not require the insurance industry to reissue cards immediately so it should not have a fiscal impact upon them. The bill only requires that when they do reissue cards that they follow a format that will provide pharmacist with the information they need to bill the patients insurance without have to make multiple phone calls to the insurance company.

Again, I urge your support for HB32. If you have any questions regarding this bill please do not hesitate to contact me.

Sincerely,

Barry Christensen, Pharmacist
Island Pharmacy 3526 Tongass Ave.
Ketchikan, AK 99901
Phone: 907-225-6186 Fax: 907-225-6187
e-mail: island.pharm@juno.com

January 28, 2003


Representative John Coghill
House of Representatives
State Capitol
Juneau, AK 99801-1182

Dear Representative Coghill,

I commend you for your introduction of HB 32 concerning Uniform Prescription Information Cards. This legislation will benefit the general public in many ways. The first thing it will accomplish is saving time for the patient when at a pharmacy to get a prescription drug order filled. Having this information in a clear format will allow the pharmacists and technicians of the given pharmacy to enter the insurance information into the computer in a timely manner and will help to avoid calls to the insurance company "help desk". These calls to insurance companies are quite time consuming and you usually have to navigate through a voice message maze to get the answers you need. Secondly, by clarifying this information, it is a time saving factor that allows the pharmacist to spend more time with their patient (customer) to be sure they understand their medications.

As you may know, nineteen states have already enacted this type of legislation. It truly provides a win-win situation for the consumer and the provider. Thank you for your time.

Sincerely,



Roger Penrod, RPh.
Fairbanks Professional Pharmacy
1001 Nobel Street
Fairbanks, AK 99701
907/452-2556

Washington

December 04, 2002

Proposed Rules

Office of Insurance Commissioner - WAC 284-43

WSR 02-23-092

PROPOSED RULES

OFFICE OF INSURANCE COMMISSIONER

[Filed November 20, 2002, 10:17 a.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 02-14-151.

Title of Rule: Pharmacy identification cards.

Purpose: This proposed regulation will implement RCW 48.43.023.

Statute Being Implemented: RCW 48.43.023.

Summary: RCW 48.43.023 requires an entity that provides coverage for prescription drugs provided on an outpatient basis and issues a card or other technology for claims processing to issue to its enrollees a pharmacy identification card or other technology containing all information required for proper prescription drug claims adjudication.

Reasons Supporting Proposal: This proposed regulation will implement RCW 48.43.023.

Name of Agency Personnel Responsible for Drafting and Implementation: Janis LaFlash, P.O. Box 40255, Olympia, WA 98504-0255, (360) 725-7040; and Enforcement: Carol Sureau, P.O. Box 40255, Olympia, WA 98504-0255, (360) 725-7050.

RCW 48.43.023 requires that a health plan that provides coverage for prescription drugs and issues a card or other technology for claims processing must include all information required for proper prescription drug claims adjudication. RCW 48.43.023(5) states that in the rule making the insurance commissioner should consider any relevant standards developed by the **National Council for Prescription Drug Programs NCPDP** and the requirements of the federal Health Insurance Portability and Accountability Act of 1996.

Date of Intended Adoption: January 22, 2003.

November 20, 2002

Mike Kaidler

Insurance Commissioner

OTS-6058.2

SUBCHAPTER C

PROVIDER ((AND FACILITY)) CONTRACTS AND PAYMENT

NEW SECTION

WAC 284-43-323 Pharmacy identification cards. (1) This rule outlines the minimum standards for prescription claims processing as directed by RCW 48.43.023.

(2) The pharmacy identification card or other technology must include the data element consistent with the "BIN number," "IIN/BIN number" or "RxBIN" which is the ANSI assigned international identification number, identified in the National Council for Prescription Drug Programs (**NCPDP**) Pharmacy ID Card Implementation Guide. Other data elements of the **NCPDP** Guide must be included on the card only if they are required for the processing of claims.

(3) This rule does not compel the issuance of a separate pharmacy identification card provided that the enrollee health plan identification card contains the required data elements.

(4) All plans that use a card or other technology for prescription claims processing that are delivered, issued for delivery or renewed on or after July 1, 2003, must comply with the requirements of this rule.

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REPRESENTATIVE JOHN COGHILL
MAJORITY LEADER

Acronym List

ANSI – American National Standards Institute
BIN – Business Identification Number
GRP – Group Number
HIPPA – Health Insurance Portability and Accountability Act
IC – Insurance Commissioner
IIN – Issuer Identification Number
NCPDP – National Council for Prescription Drug Programs
PCN – Processor's Control Number

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>AL H 275 (AL ST § 27-1-22) Enacted – 4/2/00</p> <p>Effective – 8/1/00; 1/1/01 (for new plans)</p>	Yes	No.	Yes – Insurance Commissioner responsible for enforcement(health benefit plan may not conduct business in AL if in violation of law).		Issued upon enrollment; reissued upon any change in enrollees plan that impacts the information on card or if NCPDP revises guidelines.
<p>AR S 800 (AR ST §23-80-401 et. seq)</p> <p>Enacted – 4/9/01</p> <p>Effective – 4/9/03 (upon enactment per emergency clause) See Bulletin 8-2001, dated 11/14/2001.</p>	Yes	No.	Yes – Empowers Insurance Commissioner to promulgate administrative rule to establish format (that complies with national standard); IC responsible for enforcement.		Issued upon enrollment; reissued upon any change in enrollees plan that impacts the information on card.

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>CA A 207 (Health and Safety Code Section 1363.03; Insurance Code Section 10123.194)</p> <p>Enacted – 10/8/01</p> <p>Effective – 7/1/02</p>	<p>No.</p>	<p>(1) The name or logo of the benefit administrator or health care service plan issuing the card, which shall be displayed on the front side of the card.</p> <p>(2) The enrollee's identification number, or the subscriber's identification number when the enrollee is a dependent who accesses services using the subscriber's identification number, which shall be displayed on the front side of the card.</p> <p>(3) A telephone number that pharmacy providers may call for assistance.</p> <p>(4) Information required by the benefit administrator or health care service plan that is necessary to commence processing the pharmacy claim.</p>	<p>No.</p>	<p>Card issuer not required to include the following on the card: (A) Any number that is the same for all of its members, provided that the health care service plan provides this number to the pharmacy on an annual basis. (B) Any information that may result in fraudulent use of the card. (C) Any information that is otherwise prohibited from being included on the card; insurer can issue card or "other technology that performs substantially the same function as a card"; willful violation of act is a crime.</p>	<p>Issued upon enrollment and reissued upon any change in the enrollee's coverage that impacts the data on the card; insurer not required to issue a separate card for rx coverage if the plan issues a card for health insurance in general so long as the card can accommodate all of the required elements; does not apply to nonprofit health plans with 3.5 million + enrollees owning/operating own pharmacies and providing health care services to enrollees in specific geographic area through a mutually exclusive contract with a single medical group.</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>CO S 188 (New section to CRS Title 10, Article 16, Part 1)</p> <p>Enacted – 6/7/02</p> <p>Effective – 1/1/03</p>	<p>Yes – card to be NCPDP approved format, contain all required and situational fields, and comply with most current implementation guide</p>	<p>No.</p>	<p>No.</p>		<p>Card must be issued upon enrollment and reissued when a person's coverage changes and the change affects data on the card or device.</p>
<p>FL S 1412 (627.4302)</p> <p>Enacted -- 5/13/02</p> <p>Effective – 10/1/02</p>	<p>No.</p>	<p>(a) Name of the claims processor; (b) BIN / ANSI number; (c) Group number; (d) Patient identification number; (e) Patient name; (f) Claims submission name and address; (g) Help desk telephone number; and (h) Any other information that the entity finds will assist in the processing of the claim. (a), (b), (g), and (h) must be on the card unless instruction is provided on the card for ready access to such information by electronic means. Card must present info in a manner that is readily identifiable or the info must be embedded in the card through a magnetic strip or smart card.</p>	<p>No.</p>		<p>Card must be issued upon enrollment or renewal of policies after 10/1/02; card must be reissued no later than 60 days after any info on the card changes and becomes effective; may issue a sticker with updated info in lieu of new card until renewal card is sent.</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>GA H 670 (33-24-57.1)</p> <p>Enacted – 5/1/00</p> <p>Effective – 7/1/00</p>	No.	<p>(1) Subscriber's name and (A) names of all other persons included under the subscriber's coverage; or (B) If a separate card is issued for each person included under subscriber's coverage, the name of covered person for whom such card is issued may be alternatively listed</p> <p>(2) Subscriber's identification number;</p> <p>(3) Group number, if applicable;</p> <p>(4) Effective date of coverage;</p> <p>(5) Name of the subscriber's primary care physician, if applicable;</p> <p>(6) Name of the subscriber's insurer, the name of the health plan, and the plan type or product name, if applicable;</p> <p>(7) Address of office where claims to be filed;</p> <p>(8) Insurer's contact phone numbers and the phone number for coverage confirmation and preauthorization, if applicable;</p> <p>(9) Policy's requirements as to copays, co-insurance payments, or deductibles, as applicable;</p> <p>(10) Either name of the primary hospital and of laboratory and radiology services to be used or toll-free or local number for contacting the health plan and obtaining such information. Such a toll-free or local telephone number shall be available to health care providers and consumers to obtain eligibility and coverage information from at least 7:00 A.M. until 9:00 P.M. daily on Monday through Friday, whether staffed by a live person or via an automated phone-line basis;</p> <p>(11) BIN</p> <p>(12) PCN</p> <p>(13) Pharmacy help desk number & name</p>	No.		<p>Issued upon enrollment;</p> <p>reissued when any information required to be on the card changes;</p> <p>Annual renewal stickers may be issued.</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>IA S 452 (514L.1; 514L.2; 514L.3)</p> <p>Enacted – 3/26/01</p> <p>Effective – 7/1/03</p>	<p>Yes – Requires Commissioner of Insurance to consider standard when adopting rules.</p>	<p>(1) The international identification number (2) The covered individual's identification number (3) The telephone number of the pharmacy benefits administrator, if different from the provider (4) The processor control number, if required for adjudication (5) The group number, if required for adjudication (6) The person code, if required for adjudication</p>	<p>Yes – Empowers the Commissioner of Insurance to adopt rules to implement.</p>	<p>Note that elements required include “person code” if necessary for adjudication.</p>	<p>Issued upon enrollment; reissued when any information required to be on the card changes.</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>IL H 4176 (IL ST CH 215 § 138/15)</p> <p>Enacted – 4/15/00</p> <p>Effective – 1/1/01</p>	No.	<p>Front of card:</p> <p>(1) BIN number; (2) Processor control number if required for claims adjudication; (3) Group number; (4) Card issuer identifier; (5) Cardholder ID number; and (6) Cardholder name.</p> <p>Back of card:</p> <p>(1) Claims submission names and addresses; and (2) Help desk telephone numbers and names.</p>	<p>Yes – Empowers Insurance Director to promulgate any regulations necessary to implement the state's responsibilities with respect to the card; to enforce ,the Director , may issue a cease and desist order or require a health benefit plan to submit a plan of correction for violations & may impose upon a health benefit plan an administrative fine not to exceed \$250,000 for failure to submit a requested plan of correction, failure to comply with its plan or correction, or repeated violations of this Act</p>		<p>Issued upon enrollment; reissued when any information required to be on the card changes.</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>IN H 1958 (IC §§ 27-8-5.8-4; 27-1-9-5)</p> <p>Enacted – 5/10/01</p> <p>Effective – 7/1/02 (for compliance)</p>	Yes.	<p>(A) The health benefit plan's name.</p> <p>(B) The insured's name, group number, and identification number.</p> <p>(C) A telephone number to inquire about pharmacy related issues.</p> <p>(D) The issuer's international identification number or ANSI BIN number, labeled as RxBIN.</p> <p>(E) The processor control number, labeled as RxPCN.</p> <p>(F) The insured's pharmacy benefits group number if different than medical group number, labeled as RxGRP.</p>	Yes.	Card must be in format approved by NCPDP or contain certain elements which are required to properly adjudicate a claim (listed to the left); insurer may issue card or other technology;	Cards must be issued upon enrollment; insurers not required to issue more than one card within 12 month period.
<p>MD S 686 (Insurance Section 15-130; Health - General Section 19-706(rr))</p> <p>Enacted – 4/15/01</p> <p>Effective – 10/1/01; 7/1/02 (for compliance)</p>	Yes.	<p>(i) the name or identifying trademark of the entity subject to this section or, if another entity administers the prescription benefit, the name or identifying trademark of the benefit administrator;</p> <p>(ii) the name and identification number of the insured, subscriber, or enrollee;</p> <p>(iii) the telephone number that providers may call for pharmacy benefit assistance; and</p> <p>(iv) all electronic transaction routing information and other numbers required by the entity subject to this section or benefit administrator to process a prescription claim electronically.</p>	No – but empowers the Department of Health to adopt regulations to enable managed care providers to comply with law.	Elements required on card include “electronic transaction routing information and other numbers” required by plan to process claim (does not specify); does not require card to have claims billing address on back; allows insurers to provide enrollees with card or “other technology”.	Issued upon enrollment; reissued when any information required to be on the card changes or give enrollee any corrective information required to process claim; HMOs that own and maintains pharmacies that dispense 95% of rx's not required to comply.

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>MN H 926 (Minnesota Statutes, section 62J.60)</p> <p>Enacted – 5/17/01</p> <p>Effective – 1/1/03; 7/1/03 (for compliance)</p>	<p>Yes.</p>	<p>A. Information window containing the following elements (left justified):</p> <ol style="list-style-type: none"> 1. card issuer name, 2. electronic transaction routing information, 3. card issuer identification number, 4. cardholder (insured) identification number, 5. and cardholder (insured) identification name. <p>B. Card issuer name or logo</p> <p>C. Complete electronic transaction routing information including, at a minimum, the international identification number. The standardized label of this data element is "RxBIN." Processor control numbers and group numbers are required if needed to electronically process a prescription drug claim. The standardized label for the process control numbers data element is "RxPCN" and the standardized label for the group numbers data element is "RxGrp," except that if the group number data element is a universal element to be used by all health care providers, the standardized label may be "Grp." To conserve vertical space on the card, the international identification number and the processor control number may be printed on the same line;</p> <p>D. Card issuer identification number;</p> <p>E. cardholder (insured) identification number;</p> <p>F. cardholder (insured) identification name</p> <p>G. care type</p> <p>H. service type</p> <p>I. provider/clinic name</p> <p>Back:</p> <p>A. Claims submission names and addresses</p> <p>B. Phone numbers and contact names for eligibility, utilization review, precertification, or customer service information.</p>	<p>No.</p> <p>But, group purchaser must certify compliance with standard card law in annual filing made on or after 1/1/03 to Commissioner of Health or Commerce.</p>	<p>Insurer does not have to issue a new card if the MN uniform health care ID card can accommodate all of the elements required to be on the card; Situational or conditional fields must comply with NCPDP standards.</p>	<p>Issued upon enrollment, reissued upon any change in enrollee's health plan that impacts the data on the card; stickers may be used to temporarily update the information on the card.</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>MS S 2412</p> <p>Enacted – 4/11/02</p> <p>Effective – 1/1/03</p>	<p>Yes – Insurance Commissioner to take into consideration NCPDP standard when developing regs.</p>	<p>(a) issuer's name or logo (front of card); (b) Patient name and ID number (front of card); (c) ANSI Issuer Identification Number; (d) Processor's control number; (e) Patient's group number; (f) Name and address for claims submission; (g) help desk telephone number.</p> <p>Insurer not require to issue separate card if the required elements are on the health benefit card.</p>	<p>Yes – Empowers Insurance Commissioner to issue any rules to implement the act.</p>		<p>Insurer to provide patient with new card "within reasonable time after any information required to be on card changes; insurer to issue first card for plans that are delivered, issued for delivery or renewed on or after January 1, 2003</p>
<p>NC S 513 (§58-3-177)</p> <p>Enacted – 7/22/99</p> <p>Effective – 7/22/99; 7/1/00 (for compliance); 1/1/03 (to comply with electronic processing requirement)</p>	<p>No.</p>	<p>Front:</p> <p>(1) The health benefit plan's name and/or logo. (2) The American National Standards Institute assigned Issuer Identification Number. (3) The processor control number. (4) The insured's group number. (5) The health benefit plan's card issuer identifier. (6) The insured's identification number. (7) The insured's name.</p> <p>Back:</p> <p>(1) The health benefit plan's claims submission name and address. (2) The health benefit plan's help desk telephone number and name.</p>	<p>No.</p>		<p>New card must be reissued annually, if there has been a change in the insured's coverage within the past 12 months.</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Re-issued?
<p>ND H 1365 (NDCC 26.1-36 & 54-52.1)</p> <p>Enacted – 3/13/01</p> <p>Effective – 8/1/01</p>	Yes.	No.	Yes – Empowers Insurance Commissioner to accept a “national format” as an alternative to the NCPDP standard.	Card must conform with NCPDP standards OR any “national format” accepted by the Insurance Commissioner.	Issued upon enrollment; reissued when any information required to be on the card changes; card issuer may issue stickers (approved by commissioner) to update card.

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>NJ S 1330 (NJ Statues Title 17B)</p> <p>Enacted – 8/8/01</p> <p>Effective – 9/1/02</p>	<p>Yes – card must comply with NCPDP standards or contain certain required elements.</p>	<p>(1) the name or identification number of the health benefits plan, when required for proper claims adjudication;</p> <p>(2) the American National Standards Institute International Identification Number assigned to the administrator or pharmacy benefits manager of the health benefits plan, labeled as RxBIN, when required for proper claims adjudication;</p> <p>(3) the processor control number, labeled as RxPCN, when required for proper claims adjudication;</p> <p>(4) the insured's group number, labeled as RxGRP, when required for proper claims adjudication;</p> <p>(5) the insured's identification number;</p> <p>(6) the insured's name; except that, if a separate card is issued for another person included under the primary insured's coverage, the name of the covered person to whom the card is issued may be listed instead of the name of the primary insured;</p> <p>(7) the telephone number that providers may call for pharmacy benefits assistance; and</p> <p>(8) any other information necessary for proper claims adjudication, except for information provided on the prescription as required by law or regulation.</p>	<p>Yes – Commissioner of Banking and Insurance to adopt regulations to implement.</p>	<p>Must issue card or other technology; insurer not required to issue a separate card for the pharmacy benefit if another ID card contains all of the required element; insurers may use other data elements as required by HIPAA (1996) in place of the elements required by NCPDP or the elements (listed here to the left).</p>	<p>Issued upon enrollment, reissued within a “reasonable time” (not to exceed 180 days) of change of enrollee’s plan that effects data on card; insurer not required to reissue a card more than one time per year.</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>NV A 415 (NRS Ch. 679B.133) / regs: NAC 679B (new section)</p> <p>Enacted – 5/28/01</p> <p>Effective – 1/1/03</p>	<p>Yes – must comply to NCPDP standard or have certain elements on the card.</p>	<p>(a) The name or logo of the administrator issuing the card or device.</p> <p>(b) The insured's identification number, which must be displayed on the front side of the card or device.</p> <p>(c) The name and address of the administrator to which prescription claims that are not processed electronically or correspondence should be sent.</p> <p>(d) The telephone number that providers may call for assistance concerning pharmacy benefits.</p> <p>(e) Complete information concerning routing of electronic transactions, including, without limitation, the international identification number and, if required by the administrator to process the claim, the processing control number and group number. The information on the card or device must be arranged in a manner that corresponds both in content and form to the content and form required by the plan to process the claim.</p>	<p>Yes – Commissioner to adopt regulations to ensure compliance</p>	<p>Insurer may issue card or other device; this rules only applies to insurers who issue a single ID card for prescription drug benefits; elements of card must also be consistent with HIPAA; insurer not required to issue a separate ID card for prescription benefits if the general health ID card contains all information required for claims adjudication; regs state that an insurer that issues a health plan shall not delay or deny payment of any claim for pharmacy benefits solely on the basis that the prescriber does not have a DEA number; and shall not use a false registration number to process a claim.</p>	<p>Issue upon enrollment, reissue upon renewal;</p>

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>OK H 2719 (OK Statutes Title 36, Section 3634.4)</p> <p>Enacted – 6/5/02</p> <p>Effective – 1/1/04</p>	No.	<p>Required on front of card:</p> <p>a. card issuer name or logo d. card holder identification, e. card holder name</p> <p>Required on card - placing unspecified:</p> <p>a. IIN/BIN number labeled as IIN or BIN, b. the Processor Control Number (PCN), labeled as PCN c. the group number, labeled as GRP d. card issuer identification, e. claims processor name and address, and f. a help desk phone number</p>	Insurance Commissioner responsible for enforcement of law and must promulgate rules; IC has authority to impose penalties, etc. to bring noncomplying companies into full compliance.	Insurer may issue card or other technology	Card issued upon enrollment and reissued within a reasonable period upon any change in coverage impacting data on card
<p>OR H 2763 (ORS Ch. 743)</p> <p>Enacted – 6/22/01</p> <p>Effective – 7/1/03</p>	No.	No.	Yes – The Director of the Department of Consumer and Business Services shall adopt rules and must consider any national standards developed by a relevant standards development organization approved by ANSI.	Insurer must issue card or other technology that contains all current information required for claims adjudication.	Requires insurer to issue card upon renewal.

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>SD S 87 (SD ST § 58-1-19)</p> <p>Enacted – 3/3/01</p> <p>Effective – 7/1/02</p>	Yes.	No.	Yes – Empowers Director of Commission of Insurance to consider NCPDP standard when prescribing the elements and format of the card and consider NCPDP implementation guide.	Health benefit plan not required to issue a pharmacy identification card separate from another identification card if the identification card contains the elements of information required by the Division of Insurance.	Issued upon enrollment; reissued when any information required to be on the card changes (but not required to issue more than one card a year).

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>TN S 2769 (TN ST § 56-7-2361)</p> <p>Enacted – 6/19/00</p> <p>Effective – 6/19/00; 7/1/01 (for compliance)</p>	<p>No.</p>	<p>(1) The health benefit plan's name and issuer identifier;</p> <p>(2) The American National Standards Institute Issuer Identification Number assigned to the administrator or pharmacy benefit manager of the plan, when required for proper claims adjudication [<i>Bin Number</i>];</p> <p>(3) The processor control number, when required for proper claims adjudication;</p> <p>(4) The insured's group number, when required for proper claims adjudication;</p> <p>(5) The insured's identification number;</p> <p>(6) The insured's name; and (A) The names of all other persons included under the subscriber's coverage and individual identification number information if applicable and required for pharmacy claims processing; or (B) If a separate card is issued for each person included under the subscriber's coverage, the name of the covered person for whom such card is issued may be listed in lieu of the information required by item (A) above.</p>	<p>Yes – Commissioner of Commerce and Insurance responsible for enforcement of law; empowers commissioner to promulgate any rules necessary; health benefit plans found to be in noncompliance subject to the imposition of the penalties and other remedies set forth at Tennessee Code Annotated, Sections 56-1-801(Class C misdemeanor), 56-8-109(civil penalty of \$1,000-\$50,000), and 56-32-220 (administrative penalty of \$1,000-\$10,000)</p>	<p>HIPPA adopted identifiers may be used as substitute for any of the listed elements; health benefit plan not required to issue a pharmacy ID card separate from another ID card if the card contains the required elements.</p>	

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
<p>TX S 1237 (Insurance Code Article 21.53L)</p> <p>Enacted – 5/30/99</p> <p>Effective – 1/1/00; does not specify date by which IC must adopt rules</p>	No.	<ol style="list-style-type: none"> 1. Enrolled subscriber's or enrolled dependents' names and identification codes 2. Name or logo of the issuer (if applicable); 3. Name or logo of the administrator or pharmacy benefit manager (if different from the health benefit plan); 4. Group / policy number (if applicable); 5. Effective date of coverage; 6. A telephone number for obtaining information relating to covered pharmacy benefits; 7. Copayment information for generic and brand-name prescription drugs; and 8. International Identification Number / Banking Identification Number, assigned by the American National Standards Institute (if applicable) 	Yes – Empowers commissioner to adopt rules.	Note – Elements required on card include effective date of coverage and copay amount for brand vs. generic drugs.	Issued upon enrollment; reissued when enrollees coverage is modified; if health benefit plans that administers own pharmacy benefits to issue a card separate from any ID card issued under the plan if the card contains the required elements.
<p>VA H 1176 (38.2-3407.4:2)</p> <p>Enacted – 4/5/00</p> <p>Effective – 7/1/02</p>	Yes.	No.	Yes – only states “card shall not be considered part of the evidence of coverage and shall not be required to be filed with or approved by the Commission”.		Issued upon enrollment; reissued upon changes to data required to be on card.

Standard Prescription Benefit Card Legislation

State / Bill Number / Status	Refers to NCPDP Standard?	Lists elements?	Refers to Insurance Commissioner	Misc. Notes	When Issued? When Reissued?
VA H 2654 (38.2-3407.4:2) Enacted – 3/19/01 Effective – 7/1/02	Yes.	1. The name or identifying trademark of the insurer, corporation, or health maintenance organization or, if another entity administers the prescription benefit, the name or identifying trademark of the benefit administrator; 2. The insured's, subscriber's, or enrollee's name and identification number; 3. The telephone number that providers may call for pharmacy benefit assistance; and 4. The electronic transaction routing information and other numbers required by the insurer, corporation, health maintenance organization or benefit administrator to electronically process a prescription claim.	No.		Issued upon enrollment; reissue card with any changes in the required data elements or give enrollee any corrective information required to process claim.
WA S 5566 (New section to 48.43 RCW) Enacted – 4/19/01 Effective – 7/1/03	Yes.	No.	Yes – Empowers Insurance Commissioner to promulgate rules to implement act; requires IC to take into consideration NCPDP elements and HIPPA requirements when setting required elements on card.		Issued upon enrollment; reissued upon renewal... but not if card already contains all required elements.

SITE: OFFNETS

COMMITTEE: House Labor & Commerce

DATE: 5/7/03

SUBJECT OF MEETING: HB32

UPDATE #: 1



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✓ Barry Christensen	AK PHARMACISTS ASSOC.		Y HB32