S.L.C.

Mile Braun

Braun 5.1334 Amendment #4, as modified

AMENDMENT NO Calendar No		
Purpose: To require the Secretary of Labor to conduct a study on the fiduciary duties of pharmacy benefit managers.		
IN THE SENATE OF THE UNITED STATES—118th Cong., 1st Sess.		
S. 1339		
To provide for increased oversight of entities that provide pharmacy benefit management services on behalf of group health plans and health insurance coverage.		
Referred to the Committee on and ordered to be printed		
Ordered to lie on the table and to be printed		
Amendment intended to be proposed by Mr. Braun (for himself and Mr. Marshall)		
Viz:		
1 At the appropriate place, insert the following:		
2 SEC STUDY ON FIDUCIARY DUTIES OF PHARMACY		
3 BENEFIT MANAGERS.		
4 (a) IN GENERAL.—The Secretary of Labor shall con-		
5 duct, and submit to Congress a report describing the re-		
6 sults of, a study on the impacts of a change in policy de-		
7 scribed in subsection (b).		
8 (b) Policy Described.—Under a policy referred to		
9 in subsection (a)—		

1	(1) an entity providing pharmacy benefit man-
2	agement services would be considered a fiduciary
3	within the meaning of section 3(21) of the Employee
4	Retirement Income Security Act of 1974 (29 U.S.C.
5	1002(21)) with respect to a group health or group
6	health insurance coverage; and
7	(2) such an entity would—
8	(A) be subject to the responsibilities, obli-
9	gations, and duties imposed on fiduciaries
10	under part 4 of such Act of subtitle B of title
11	I of such Act (29 U.S.C. 1101 et seq.); and
12	(B) make the required fiduciary disclosure
13	under section 408(b)(2)(B)(iii) of such Act (29
14	U.S.C. 1108(b)(2)(B)(iii)) with respect to the
15	pharmacy benefit management services provided
16	to the plan or coverage.
17	(c) DEFINITION OF PHARMACY BENEFIT MANAGE-
18	MENT SERVICES.—In this section, the term "pharmacy
19	benefit management services" means services related to—
20	(1) negotiating prices with respect to prescrip-
21	tion drugs on behalf of a group health plan or health
22	insurance issuer offering group health insurance cov-
23	erage; and
24	(2) managing the prescription drug benefits
25	provided by such plan or coverage, including design-

1	ing and implementing a drug formulary, the proc-
2	essing and payment of claims for prescription drugs,
3	the performance of drug utilization review, the proc-
4	essing of drug prior authorization requests, the adju-
5	dication of appeals or grievances related to the pre-
6	scription drug benefit, contracting with network
7	pharmacies, controlling the cost of covered prescrip-
8	tion drugs, or the provision of related services.