STATE OF NEW YORK

6764

2025-2026 Regular Sessions

IN ASSEMBLY

March 12, 2025

Introduced by M. of A. WEPRIN -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to reporting requirements for pharmacy benefit managers

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Paragraph 1 of subsection (a) of section 2904 of the insurance law, as amended by chapter 128 of the laws of 2022, is amended to read as follows:

(1) **(i)** On or before July first of each year, every pharmacy benefit manager shall report to the superintendent, in a statement subscribed and affirmed as true under penalties of perjury, the information requested by the superintendent including, without limitation,

[~~(i)~~] **(A)** any pricing discounts, rebates of any kind, inflationary payments, credits, clawbacks, fees, grants, chargebacks, reimbursements, other financial or other reimbursements, incentives, inducements, refunds or other benefits received by the pharmacy benefit manager; [~~and~~]

[~~(ii)~~] **(B)** the terms and conditions of any contract or arrangement, including other financial or other reimbursements incentives, inducements or refunds between the pharmacy benefit manager and any other party relating to pharmacy benefit management services provided to a health plan including but not limited to, dispensing fees paid to pharmacies[~~.~~]**;**

(C) the aggregated dollar amount of rebates, fees, price protection payments and any other payments the pharmacy benefit manager received from drug manufacturers through rebate contracts;

(D) the portions of the amount in clause (C) of this subparagraph which were:

1. passed on to health plans; or

2. retained by the pharmacy benefit manager; and

EXPLANATION--Matter in *italics* (underscored) is new; matter in brackets [-] is old law to be omitted.

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(E) for each rebate contract in effect during the reporting period:

1. the names of the contracting parties;

2. the execution date and the term of the contract, including extensions;

3. the name of the drugs and the associated national drug codes covered by the rebate contract, and for each drug:

(I) a summary of the contract terms regarding formulary placement, formulary exclusion, or prior authorization requirements or step edits, of any drugs considered to compete with each drug;

(II) a summary of all terms requiring or incentivizing volume or market share for each drug, including base rebate amounts, bundled rebates and incremental rebates, stated separately, and price concession, stated separately for each drug; and

(III) the total number of prescriptions filled and units dispensed for which a rebate, discount, price concession or other consideration was received by the pharmacy benefit manager for each drug;

4. the rebate percentage and dollar amount retained by the pharmacy benefit manager for every rebate, discount, price concession or other consideration under each rebate contract; and

5. the dollar amount of any other compensation paid by a drug manufacturer to a pharmacy benefit manager for services including distribution management services, data or data services, marketing or promotional services, research programs, or other ancillary services, under each rebate contract.

(ii) For the purposes of this subsection, the term "rebate contract" means any agreement entered into by a pharmacy benefit manager with any drug manufacturer or agent or affiliate of a drug manufacturer that determines any rebate, discount, administrative or other fee, price concession, or other consideration related to the dispensing of prescription drugs for a health plan.

§ 2. Severability. If any provision of this act, or any application of any provision of this act, is held to be invalid, that shall not affect the validity or effectiveness of any other provision of this act, or of any other application of any provision of this act.

§ 3. This act shall take effect on the one hundred eightieth day after it shall have become a law.