From: Damoth, Debbie@DCA
To: Damoth, Debbie@DCA

Subject: FW: Comments on proposed Section 1736 Sterile Compounding, Enforcement and Compounding Committee,

California Board of Pharmacy

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Attachments: image001.png

AB 913 Comments CA BOP.pdf

From: Patel, Vipul Pharm.D. < <u>Vipul.Patel@cshs.org</u>>

Sent: Friday, April 14, 2023 4:26 PM

To: PharmacyRulemaking@DCA < PharmacyRulemaking@dca.ca.gov>

Cc: Alajajian, Rita, Pharm.D. < Rita.Alajajian@cshs.org>

Subject: Comments on proposed Section 1736 Sterile Compounding, Enforcement and

Compounding Committee, California Board of Pharmacy

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To Members of the California State Board of Pharmacy

In anticipation of the next Board Meeting where AB-913 will be presented, on behalf Cedars-Sinai Medical Center, we would like to provide comments and support for AB9013 which will help protect consumers, provide transparency on prescription drug prices, and improve our healthcare system. Attached is a summary for the committees review and consideration.

Should you have any questions or concerns related to our comments/recommendations, please do not hesitate to contact me.

Thank you,



Vipul Patel, PharmD

Executive Director, Pharmacy & Oncology Services

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Assembly Bill (AB) 913 – Pharmacy Benefit Managers: Comments

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<u>AB 913</u> will help protect consumers, provide transparency on prescription drug prices, and improve our healthcare system. We support this bill, but with the following clarifications and recommendations:

AB 913 Language	Recommendations/Comments
(a) A pharmacy benefit manager shall not impose any requirements, conditions, or exclusions that discriminate against a nonaffiliated pharmacy in connection with dispensing drugs.	The language in the bill is unclear whether a pharmacy or pharmacist engaged in the federal 340B program; or beneficiaries involved in, or receiving a prescription drug from a pharmacy involved in the 340B program is covered in this section as a nonaffiliated pharmacy. Recommend including a pharmacy or pharmacist engaged in the federal 340B program in this section for added clarity with respect to pricing and reimbursement.
4445.7. (d) (3) Establishing a tiered network	The language in the bill is unclear whether a health care plan or health insurer "establishing a tiered network" would have authority to create additional tiers. Recommend to define what is meant by "tiered network" in the bill as this could be used by PBMs as a tactic or "out" clause to circumvent 4445.7 (a) by manipulating reimbursement rates by making them prohibitively low for certain pharmacies to participate.
4445.8. A pharmacy benefit manager shall not do any of the following:(f) Retain more than 20 percent of the aggregate amount of rebates from all manufacturers.	The language in the bill is unclear as to what PBMs will do with the retained 20 percent or why specifically the language states 20 percent. The purpose is to ensure PBMs demonstrate that 100 percent of rebates are used to reduce costs for the individual or the employer, which other states have adopted ¹ . Recommend clarifying what the 20 percent will be used for or change figure to 100 percent.
	Reference: 1. Colorado HB 22-1370, Section 10-16-156