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State-Level Laws to Protect CHCs' 340B Savings

Last updated 3/11/25

Yellow Highlighted laws have contract pharmacy-specific provisions

Summary

Number of States that have passed Laws to protect CHC 340B Savings	33
States that have specifically passed bills with contract pharmacy-specific provisions	Arkansas, Kansas**, Louisiana, Maryland, Minnesota, Mississippi, Missouri, West Virginia

1. Alabama, [SB 227](#) (2021)

Highlights from the Law:

- Prohibit a pharmacy benefits manager from limiting or incentivizing a patient's choice in pharmacies; from denying a pharmacy from participating as a contract provider of pharmacy services for a health benefit plan if the pharmacy meets the terms and conditions of the pharmacy benefits manager's contract; from steering an insured to use a mail-order pharmacy or a pharmacy benefits manager affiliate, with certain exceptions; and from limiting certain powers of a pharmacy or pharmacist.

2. Arizona, [SB 1176](#) (2022)

Highlights from the Law:

- A third party shall not do any of the following:
 - Discriminate in reimbursement on the basis that the pharmacy dispenses a 340B drug
 - Assess any fee, chargeback, clawback or adjustment on the basis that a pharmacy dispenses a 340B drug
 - Exclude a pharmacy from a third-party pharmacy network on the basis that the pharmacy dispenses a 340B drug
 - Restrict the methods or pharmacies within a third-party network by which a 340B covered entity may dispense or deliver 340B drugs

3. Arkansas, [HB 1881](#) (2021)

Highlights from the Law:

- Prohibit “discriminatory contracting”, defined as including numerous practices (e.g., differences in reimbursement, refusal to allow 340B pharmacies into networks, requirement to identify 340B drugs using a modifier.)

- Prohibits practices “transferring the benefit of 340B savings” away from 340B providers.
- Seeks to prohibit drug manufacturers from refusing to offer 340B-priced drugs to certain contract pharmacies.
- Addresses issues around patients being forced into mail-order pharmacy, and patients’ right to use the pharmacy of their choice.

4. California, [SB 786](#) (2023)

Highlights from the Law:

- Prohibits a pharmacy benefit manager (PBM) from discriminating against a covered entity or its pharmacy in connection with dispensing a drug subject to federal pricing requirements or preventing a covered entity from retaining the benefit of discounted pricing for those drugs.
- Prohibits PBMs from refusing to contract with, terminate a contract with, or exclude a covered entity or specified pharmacy from a network simply because it is a covered entity or specified pharmacy.
- Prohibits retaliating against a covered entity or specified pharmacy for exercising its rights under the law.
- Prohibits interference with an individual's choice to receive a covered drug from a covered entity or specified pharmacy.
- PBMs cannot restrict or prohibit a covered entity from raising a grievance or speaking publicly about a PBM that violates the law.

5. Colorado, [HB 1122](#) (2022)

Highlights from the Law:

- Prohibits health insurers, PBMs, and other third-party payers from discriminating against entities including pharmacies, participating in the federal 340B drug pricing program (340B covered entity), including a pharmacy that contracts with a 340B covered entity to provide dispensing services to the 340B entity (contract pharmacy).

6. Connecticut, [HB 6669](#) (2023)

Highlights from the Law:

- After Jan. 1, 2024, a contract between a Connecticut 340B covered entity and a PBM may not contain:
 - A reimbursement rate for a prescription drug that is less than the reimbursement rate paid to pharmacies that are not 340B covered entities
 - A fee or adjustment that is not imposed on providers or pharmacies that are not 340B covered entities
 - A fee or adjustment amount that exceeds the fee or adjustment amount imposed on providers or pharmacies that are not 340B covered entities
 - Any provision that prevents or interferes with a patient’s choice to receive a prescription drug from a 340B covered entity, including the administration of the drug
- Any provision that excludes a 340B covered entity from pharmacy benefit manager networks based on the 340B covered entity’s participation in the 340B program.

7. Georgia, [SB 313](#) (2020)

Highlights from the Law:

- A pharmacy benefits manager shall not:
 - Discriminate in reimbursement, assess any fees or adjustments, or exclude a pharmacy from the pharmacy benefit manager's network on the basis that the pharmacy dispenses drugs
 - Engage in any practice that:
 - In any way bases pharmacy reimbursement for a drug on patient outcomes, scores, or metrics; provided, however, that nothing shall prohibit pharmacy reimbursement for pharmacy care, including dispensing fees from being based on patient outcomes, scores, or metrics so long as the patient outcomes, scores, or metrics are disclosed to and agreed to by the pharmacy in advance;
 - Includes imposing a point-of-sale fee or retroactive fee; or
 - Derives any revenue from a pharmacy or insured in connection with performing pharmacy benefits management services; provided, however, that this shall not be construed to prohibit pharmacy benefits managers from receiving deductibles or copayments.
 - Also applies to pharmacy benefits managers' reimbursements to dispensers

8. Illinois, [HB 4595](#) (2022)

Highlights from the Law:

- Provides that a contract between a pharmacy benefit manager or third-party payer and a covered entity under Section 340B of the federal Public Health Service Act shall not contain specified provisions. Provides that a violation by a pharmacy benefit manager constitutes an unfair or deceptive act or practice in the business of insurance, and that a provision that violates the prohibition on certain provisions in a contract between a pharmacy benefit manager or a third-party payer and a 340B covered entity that is entered into, amended, or renewed after July 1, 2022 shall be void and unenforceable.

9. Indiana, [HB 1405](#) (2021)

Highlights from the Law:

- Prohibits PBMs, including those serving Medicaid managed care plans, from reimbursing for 340B drugs at a level that “diminishes the 340B benefit to a 340B covered entity”, imposing different/additional fees, excluding 340B pharmacies from preferred networks, or “discriminating against a 340B covered entity.”

10. Iowa, [HF423](#) (2023)

Highlights from this Law:

1. Prohibits plans, carriers, TPAs and PBMs from providing discriminatory reimbursement amounts for prescription drugs or dispensing fees on the basis of a covered entity or a contract pharmacy's status as a covered entity or contract pharmacy.
2. Prohibits discrimination on the basis of participation in a 340B drug program, in addition to the status as a covered entity or a contract pharmacy,
3. Permits the state Commissioner of Insurance to take enforcement action under the commissioner's authority to enforce compliance. After notice and hearing, the commissioner may issue any order or impose any penalty pursuant to state law upon finding a violation of the bill.

11. Kansas, [SB28](#) (2024)

*** The 340B legislation was a part of a larger appropriations budget bill for fiscal years 2024 and 2025 and appropriations for fiscal years 2025, 2026, 2027 and 2028 for various state agencies.*

Highlights from this Law: (Language pertaining to the 340B program)

- Drug manufacturers can no longer restrict access to discounted drugs (under the 340B program) for certain pharmacies in the state. This applies to all types of covered entities, expanding access to these discounted medications. The new law takes effect on July 1, 2024 and will be in place for two fiscal years, ending on June 30, 2026.

**[HB2551](#), an omnibus appropriations law submitted by the Kansas House of Representatives and Senate includes language to prevent SB28 340B provisions from taking effect until the U.S Supreme Court weighs in on the issue. House Motion to override line item veto prevailed; Line item veto 112a, 116a overridden

*A lawsuit was filed, and later dismissed, by PhRMA, AbbVie, AstraZeneca and Novartis regarding this law. The Kansas Attorney General in the filing said “No language in SB28 or KCPA prohibits manufacturers and distributors from interfering with a pharmacy that has a contract with a 340B covered entity nor does any text prohibit manufacturers and distributors from denying, restricting, prohibiting or otherwise interfering the with acquisition of a 340B drug”

12. Kentucky, [SB 50](#) (2020)

Highlights from the Law:

- Requires all Medicaid MCOs to contract with a single PBM and prohibits that PBM from discriminating against 340B providers.

13. Louisiana, [HB 548](#) (2023)

Highlights from the Law:

- Prohibits drug manufacturer limits on 340B contract relationships and PBM encroachment on health care providers’ 340B program revenues.
- Prevents a health insurance issuer, pharmacy benefit manager (PBM), other third-party payor or its agent from reimbursing a 340B entity for 340B drugs at a rate lower than that paid for the same drug to entities that are not 340B entities
- Imposes terms/conditions on any 340B entity with respect to fees, dispensing fees, charges, clawbacks, restrictions, requirements, or other adjustments or assessments that differ from such terms or conditions applied to non-340B entities;
- Requires a 340B entity to reverse, resubmit or clarify a claim after the initial adjudication unless in the normal course of business.
- Prohibits discrimination against a 340B entity in a manner that interferes with patient choice; and
- Requires or compels the submission of ingredient costs or pricing data pertaining to 340B drugs to any health insurance issuer, PBM, or third-party payor.
- Prevents a manufacturer or distributor from denying, restricting, prohibiting, or interfering with the acquisition or delivery of a 340B drug by a pharmacy that is under contract with a 340B entity and is authorized under the contract to receive and dispense 340B drugs on behalf of the covered entity.
- A manufacturer or distributor shall not interfere with a pharmacy contracted with a 340B entity.

14. Maryland, [HB 1274](#) (2022)

Highlights from this Law:

- Establishes requirements and prohibitions on pharmacy benefits managers related to the federal 340B Program, including requirements related to coverage and reimbursement for drugs purchased under the Program.

Maryland, [HB1056](#) (2024)

Highlights from this Law:

- Prohibits 340B manufacturers, distributors, logistics providers, and their affiliates from limiting or restricting the acquisition or delivery of 340B drugs to covered entities. Exceptions for limitations required by federal law (anti-drug diversion).
- Makes violations unfair trade practices subject to investigation by the Board or Consumer Protection Division.
 - Establishes civil fines of \$5,000 per violation.
- Requires the Maryland Prescription Drug Affordability Board to conduct a study on the current implementation and scope of the 340B Program in Maryland, the implementation and impact of House Bill 1056, and the finances of the Program in the State, including how covered entities reinvest savings realized from the Program.
 - Requires the Board to report findings and recommendations to the legislature by July 1, 2026.
- Effective July 1, 2024.

15. Michigan, [HB 4348](#) (2022)

Highlights from this Law:

- A pharmacy benefit manager or carrier shall not prohibit a 340B Program entity or a pharmacy that has a license in good standing in this state under contract with a 340B Program entity from participating in the pharmacy benefit manager's or carrier's provider network solely because it is a 340B Program entity or a pharmacy under contract with a 340B Program entity.
- A pharmacy benefit manager or carrier shall not reimburse a 340B Program entity or a pharmacy under contract with a 340B Program entity differently than other similarly situated pharmacies.
- As used in this subsection, "340B Program entity" means an entity authorized to participate in the federal 340B Program under section 340B of the public health service act, 42 USC 256b.

16. Minnesota, [SF 278](#) (2019)

Highlights from this Law:

- Prohibits PBM from reimbursing an entity or pharmacy under contract with such entity differently than other similarly situated pharmacies.
- Does not apply to PBMs under contract with state for Medicaid MCO.

Minnesota, [HF4757](#) (2024)

Highlights from the Law:

- Comprehensive law that covers various provisions related to cannabis, including appropriations for the Office of Cannabis Management and the Department of Health, modifications to existing cannabis provisions, assessment of fees by the Department of Commerce, consumer protection

- provisions, establishment of the Minnesota Consumer Data Privacy Act, rulemaking authorization, data classification, technical changes, and reporting.
- Provisions pertaining to the 340B Drug Pricing Program and contract pharmacy reflect similar language from [HF4991](#).
 - Manufacturer must not prohibit the delivery of a covered outpatient drug to a pharmacy that is under **contract** with a 340B covered entity to receive and dispense covered outpatient drugs unless the delivery of the drug to the pharmacy is prohibited under the 340B drug pricing program.
 - Section goes into effect August 1, 2024, and expires July 1, 2027.

17. Mississippi, [HB728](#) (2024)

Highlights from the Law:

- Prohibits health insurance issuers, pharmacy benefit managers, drug manufacturers, and distributors from:
 - Reimbursing 340B entities at a lower rate than non-340B entities for the same drug.
 - Imposing different terms or conditions on 340B entities compared to non-340B entities based on their participation in the program.
 - Requiring 340B entities to reverse, resubmit, or clarify claims after the initial adjudication unless it's standard practice.
 - Discriminating against 340B entities in a way that interferes with patients' choice to receive drugs from them.
 - Requiring 340B entities to submit ingredient costs or pricing data.
 - Excluding 340B entities from networks or refusing to contract with them solely due to their participation in the program.
- Prohibits manufacturers and distributors from:
 - Denying, restricting, or interfering with the acquisition or delivery of 340B drugs to contracted pharmacies.
 - Interfering with pharmacies contracted with 340B entities.
- Violations are considered violations of the Consumer Protection Act, subject to penalties.

18. Missouri, [SB751](#) (2024)

Sponsor: Senator Justin Brown (R)

Highlights from the Law:

- The bill defines key terms related to the 340B program, like "340B drug" and "covered entity".
- It prohibits certain actions by drug manufacturers and others that could prevent covered entities from getting the discounts they are entitled to under the 340B program at contract pharmacies.
- The bill also gives the state board of pharmacy the authority to investigate and punish violations.
- Finally, the law clarifies that it does not override any federal laws or compatible state laws. **This law will go into effect August 28, 2024, signed by the governor.**

19. Montana, [SB 395](#) (2021)

Highlights from the Law:

- A pharmacy benefit manager or health carrier may not:(1) prohibit a federally certified health entity or a pharmacy under contract with an entity to provide pharmacy services from participating in the pharmacy benefit manager's or health carrier's provider network;(2) reimburse a federally certified health entity or a pharmacy under contract with an entity differently than it reimburses other similarly situated pharmacies;(3) require a claim for a drug to include a modifier to indicate that the drug is a 340B drug unless the claim is for payment, directly or indirectly, by the Medicaid program provided for in Title 53, chapter 6, part 1; or(4) create a restriction or an additional charge on a patient who chooses to receive drugs from a federally certified health entity or a pharmacy under contract with an entity, including but not limited to a patient's inability to fully pay a copayment.

Montana, [SB335](#) (2019)

Highlights from the Law:

- A PBM cannot pay less than the state-surveyed average drug acquisition cost or WAC for 340B dispenses.

20. Nebraska, [LB 767](#) (2022)

Highlights from the Law:

- A pharmacy benefit manager that reimburses a 340B entity or a 340B contract pharmacy for a drug that is subject to an agreement under 42 U.S.C. 256b shall not reimburse the 340B entity or the 340B contract pharmacy for the pharmacy-dispensed drug at a rate lower than that paid for the same drug to similarly situated pharmacies that are not 340B entities or 340B contract pharmacies, and shall not assess any fee, chargeback, or other adjustment upon the 340B entity or 340B contract pharmacy on the basis that the 340B entity or 340B contract pharmacy participates in the program set forth in 42 U.S.C. 256b.
- Shall not discriminate against a 340B entity or 340B contract pharmacy in a manner that prevents or interferes with a covered individual's choice to receive such drug from the corresponding 340B entity or 340B contract pharmacy.

21. Nevada [AB434](#) (2023)

Highlights from the Law:

- A pharmacy benefit manager or health insurer shall not:
 - Discriminate against a covered entity, a contract pharmacy or a 340B drug in the amount of reimbursement for any item or service or the procedures for obtaining such reimbursement;
 - Assess any fee, chargeback, clawback or adjustment against a covered entity or contract pharmacy on the basis that the covered entity or contract pharmacy dispenses a 340B drug or otherwise limit the ability of a covered entity or contract pharmacy to receive the full benefit of purchasing the 340B drug at or below the ceiling price
 - Exclude a covered entity or contract pharmacy from any network because the covered entity or contract pharmacy dispenses a 340B drug;
 - Restrict the ability of a person to receive a 340B drug;
 - Restrict the methods by which a covered entity or contract pharmacy may dispense or deliver a 340B drug or the entity through which a covered entity may dispense or deliver such a drug in a manner that does not apply to drugs that are not 340B drugs; or
 - Prohibit a covered entity or contract pharmacy from purchasing a 340B drug or interfere with the ability of a covered entity or contract pharmacy to purchase a 340B drug.

22. New Hampshire, [SB557](#) (2024)

Highlights from the Law:

- Prohibits PBMs and health insurer from limiting payment to or placing added terms and conditions on providers or their contract pharmacies based on their 340B status

23. New Mexico, [SB 540](#) (2023)

Highlights from the Law:

- PBMs may not:
 - Reimburse a covered entity less for a 340B drug for the same drug sold to non-covered entities
 - Assess a fee, chargeback or other adjustment to the covered entity that is not assessed to noncovered entities
 - Impose a provision that prevents/interferes with a person's choice to receive 340B drugs from a covered entity
 - Impose terms/conditions that differ from terms/conditions imposed on a non-covered entity, including:
 - restricting or requiring participation in a pharmacy network,
 - requiring more frequent auditing/a broader scope of auditing,
 - requiring a covered entity to reverse, resubmit or clarify a claim after the initial adjudication, unless these actions are in the normal course of pharmacy business and not related to the 340B program, or
 - charging an additional fee or provision that prevents or interferes with an individual's choice to receive a 340B drug from a covered entity.

24. North Carolina, [SB 257](#) (2021)

Highlights from the Law:

- A contract entered into between a pharmacy benefits manager and a 340B covered entity's pharmacy or between a pharmacy benefits manager and a 340B contract pharmacy shall not do any of the following:(1) Restrict access to a pharmacy network or adjust 340B drug reimbursement rates based on whether a pharmacy dispenses drugs under the 340B drug discount program.(2) Assess any additional, or vary the amount of any, fees, chargebacks, or other adjustments on the basis of a drug being dispensed under the 340B drug discount program or a pharmacy's status as a 340B covered entity or a 340B contract pharmacy. This section does not prevent adjustments to correct errors or overpayments resulting from an adjudicated claim. (b) No pharmacy benefits manager making payments pursuant to a health benefit plan shall discriminate against a 340B covered entity or a 340B contract pharmacy in a manner that prevents or interferes with an enrollee's choice to receive a prescription drug from an in-network 340B covered entity or an in-network 340B contract pharmacy.

25. North Dakota, [HB 1492](#) (2021)

Highlights from the Law:

- PBMs may not:
 - Reimburse less for a drug on the basis that it was purchased under 340B;
 - Refuse to contract with a pharmacy because it dispenses 340B drugs;
 - Otherwise “discriminate against or interfere with” 340B providers or their contract pharmacies.

26. Ohio, [SB 263](#) (2021)

Highlights from the Law:

- MCOs must reimburse 340B providers at NADAC and cannot impose different or additional fees or requirements on 340B providers.
- Private payers, PBMs, and contract pharmacies cannot pick-pocket.

27. Oregon, [HB 2185](#) (2019)

Highlights from the Law:

- PBMs registered under ORS 735.532 cannot reimburse a 340B pharmacy differently than another network pharmacy based on its 340B pharmacy status.

Oregon, [HB 4149](#) (2024)

Highlights from the Law:

- Specifically states that insurance policies, certificates or other contracts providing for the reimbursement of the costs for prescription drugs may not:
 - Differentially reimburse a prescription for 340B drugs versus other prescription drugs;
 - Assess a fee, chargeback, clawback or other adjustment for the dispensing of a 340B drug;
 - Exclude a pharmacy from a pharmacy network on the basis that the pharmacy dispenses a 340B drug;
 - Restrict the methods by which a 340B drug may be dispensed or delivered;
 - Restrict the number of pharmacies within a pharmacy network that may dispense or deliver 340B drugs.

28. South Dakota, [HB 1137](#) (2019)

Highlights from the Law:

- Prohibits PBMs from discriminating against a pharmacy participating in a health plan as an entity authorized to participate in 340B program.

South Dakota, [HB 1147](#) (2024)

Highlights from the Law:

- Expands HB1137
- Bars PBMs from limiting payment to or placing added terms and conditions on providers based on their 340B status

29. Tennessee, [HB 1398](#) (2021)

Highlights from the Law:

- Reimburse a 340B entity for pharmacy-dispensed drugs at a rate lower than the rate paid for the same drug by national drug code number to pharmacies that are not 340B entities
- Assess a fee, chargeback, or adjustment upon a 340B entity that is not equally assessed on non-340B entities
- Exclude 340B entities from its network of participating pharmacies based on criteria that is not applied to non-340B entities; or
- Require a claim for a drug by national drug code number to include a modifier to identify that the drug is a 340B drug. With respect to a patient eligible to receive drugs, a pharmacy benefits

manager, or third party that makes payment for those drugs, shall not discriminate against a 340B entity in a manner that violates § 56-7-2359 or otherwise prevents or interferes with the patient's choice to receive those drugs from the 340B entity.

30. Utah, [SB 140](#) (2021)

Highlights from the Law:

- Prohibits certain actions by a pharmacy benefit manager or third party with respect to a federally qualified health center that participates in the 340B discount drug program.
 - Certain actions:
 - Assess a fee, charge-back, or other adjustment on a federally qualified health center
 - Restrict access to the insurer's pharmacy network
 - Require the federally qualified health center to enter into a contract with a specific pharmacy to participate in the insurer's pharmacy network
 - Create a restriction or an additional charge on a patient who chooses to receive drugs from a federally qualified health center or
 - Create any add'l requirements or restrictions on the fqhc
 - Require a claim for a drug to include a modifier

Utah, [SB138](#) (2020)

Highlights from the Law:

- Prohibits PBMs from reimbursing 340B entities at rates lower than non-340B entities; also contains broadly worded prohibitions on ways PBMs discriminate against 340B pharmacies or block them from participating in the program.
- This language was **broad enough to block Express Scripts'** efforts in spring 2021.

31. Vermont, [H 439](#) (2021)

Highlights from the Law:

- A pharmacy benefit manager shall not:
 - (1) require a claim for a drug to include a modifier or supplemental transmission, or both, to indicate that the drug is a 340B drug unless the claim is for payment, directly or indirectly, by Medicaid; or
 - (2) restrict access to a pharmacy network or adjust reimbursement rates based on a pharmacy's participation in a 340B contract pharmacy arrangement.

32. Virginia, [HB 1162](#) (2022)

Highlights from the Law:

- Prohibits carriers and pharmacy benefits managers from discriminating in the requirements, exclusions, terms, or other conditions imposed on a covered entity or contract pharmacy on the basis that the entity or pharmacy is operating under the 340B Program of the federal Public Health Service Act.
- Such prohibition does not (i) apply to drugs with an annual estimated per-patient cost exceeding \$250,000 or (ii) prohibit the identification of a 340B reimbursement request.
- The bill also prohibits a carrier or pharmacy benefits manager from interfering in a covered individual's right to choose a contract pharmacy or covered entity.

33. West Virginia, [SB325](#) (2024)

Highlights from the Law:

- Protects against unfair practices:
 - Prohibits manufacturers, distributors, etc. from denying or restricting access to 340B drugs for authorized locations.
- Prohibits requiring unnecessary data sharing as a condition for acquiring 340B drugs.
- Establishes penalties:
 - Violations incur civil penalties and potential license/permit suspension.
 - Each affected package is considered a separate violation.
- Collaboration and implementation:
 - Board of pharmacy can investigate complaints and impose penalties.
 - Attorney General, Board, and Commissioner can make rules to enforce the bill.
 - Preserves federal laws and compatible state laws.
- Exempts limited drug distribution required by federal law.

[HB4112](#) Amends 2019 legislation to prohibit use of modifiers on 340B drugs

West Virginia, [H 2263](#) (2021)

Highlights from the Law:

- Prohibits a broader range of “pick-pocketing” practices (blocking 340B pharmacies from preferred networks, interfering with a patient’s choice to receive a drug from a 340B pharmacy).
- Requires that all pharmacies (not just 340B) be reimbursed a drug’s National Average Drug Acquisition Cost (NADAC) plus a \$10.49 dispensing fee.

West Virginia, [SB489](#) (2019)

Highlights from the Law:

- Prohibits PBMs from imposing lower reimbursement rates or higher fees on 340B drugs.

Other Laws that Could Affect the Program’s Savings

Blue Highlighted laws have mandatory provider reporting of 340B savings

1. **Minnesota, [SF2995](#)** (2023)

Highlights from the Law:

- Enacts extensive reporting requirements for all 340B covered entities

2. **Washington, [SB 5187](#)** (2023)

Highlights from the Law:

- Directs the state health department to create certain 340B provider reporting requirements

State-Level Legislation *Introduced* to Protect CHCs’ 340B Savings

Last updated 3/11/25

Yellow Highlighted bills have contract pharmacy specific-provisions
Blue Highlighted bills have mandatory provider reporting of 340B savings

1. California, [AB1460](#) (Introduced 2/21/2025)

Sponsor: Assembly Member Rogers and Assembly Member Ransom

Summary:

- Prohibits a prescription drug manufacturer from engaging in discriminatory practices that would impose additional conditions, prohibit, restrict, deny, or interfere with a covered entity's purchase or delivery of a drug subject to federal pricing requirements if the covered entity utilizes a specified pharmacy, including a contract pharmacy, that dispenses the drug to an eligible patient of the covered entity.

2. Colorado, [SB71](#) (Introduced 1/22/2025)

Sponsor: Sen. Michaelson Jent (D) and Sen. Rich (R), Rep. Martinez (D) and Rep. Taggart (R)

Summary:

- Prohibits drugmaker contract pharmacy restrictions
- Places limited reporting requirements on 340B hospitals

3. Florida, [HB1527](#) (Introduced 2/28/2025)

Sponsor: Rep. Gallop Franklin (D)

Summary:

- Prohibit manufacturers from restricting 340B contract pharmacy access in the state.
- Prohibits insurers and PBS from reimbursing differentially and adding restricting to 340B providers and their pharmacies

4. Hawaii, [SB480/](#)[HB712](#) (Introduced 1/17/2025)

Sponsor: Sen. Buenaventura (D), Sen Fukunaga (D)

Summary: Prohibits drug manufacturers from restricting the use of contract pharmacies by any 340B covered entity in the State

5. Illinois, [SB2385](#) (Introduced 2/7/2025)

Sponsor: Sen. Koehler (D)

Summary:

- Creates the Patient Access to Pharmacy Protection Act.
- Provides that no person, including a pharmaceutical manufacturer, may deny, restrict, prohibit, condition, or otherwise interfere with, either directly or indirectly, the acquisition of a 340B drug by, or delivery of a 340B drug to, a 340B covered entity or a 340B contract pharmacy authorized

to receive 340B drugs on behalf of the 340B covered entity unless such receipt is prohibited by federal law.

- Provides that no person, including a pharmaceutical manufacturer, may impose any restriction on the ability of a 340B covered entity to contract with or designate a 340B contract pharmacy including restrictions relating to the number, location, ownership, or type of 340B contract pharmacy.

Provides that no person, including a pharmaceutical manufacturer, may require or compel a 340B covered entity or 340B contract pharmacy to submit or otherwise provide ingredient cost or pricing data pertinent to 340B drugs unless required by State or federal law; institute requirements in any way relating to how a 340B covered entity manages its inventory of 340B drugs that are not required by a State or federal agency, including requirements relating to the frequency or scope of audits of inventory management systems of a 340B covered entity or a 340B contract pharmacy; or submit data or information that is not required by State or federal law as a condition for a 340B covered entity, its 340B contract pharmacy, or a location otherwise authorized by a 340B covered entity to receive 340B drugs.

6. Iowa, [HF590](#) (Introduced 2/25/2025)

Sponsor: Rep. Brett Barket (R)

Summary: Prohibits a manufacturer or distributor from either directly or indirectly denying, restricting, or otherwise interfering with the acquisition of a 340B drug by a covered entity, or delivery of a 340B drug to a contract pharmacy, unless such purchase or receipt is prohibited by the United States department of health and human services.

7. Kansas, [SB284](#) (Introduced 3/3/2025)

Sponsor: Senate Federal and State Affairs Committee

Summary: Prohibit drugmakers from restricting 340B contract pharmacy access in the state, including any claims data requirements

8. Kentucky, [SB14](#) (Introduced 1/7/2025)

Sponsor: Senator Stephen Meredith (R)

Summary: Prohibits discrimination against 340B covered entities by pharmaceutical manufacturers

9. Missouri, [HB 785](#) (Introduced 1/8/2025)

Sponsor: Representative Tara Peters (R)

Summary:

- Protects covered entities under the 340B program from discrimination by health carriers and pharmacy benefit managers.

- Prohibits health carriers and pharmacy benefit managers from taking various actions against covered entities that could prevent them from getting the discounts they are entitled to under the 340B program at contract pharmacies.
- Requires health carriers and pharmacy benefit managers to provide the same coverage for biosimilar biological products as they do for the original biological product (reference product).
- Biosimilar products are highly similar to the original product but may have slight differences.

10. **Michigan, SB94** (Introduced 2/20/25)

Sponsor: Senator Sing, Bellino, Lindsey, Damoose, Outman, Jink, Chang, McMorrow, Hertel

Summary:

- Prohibits denying, restricting, prohibiting, conditioning, discriminating against, or otherwise limiting the acquisition a 340B drug by a 340B entity
 - And specifically by a contract pharmacy
- Requires 340B entity to submit a report to the department that must information about the 340B program and activities
- Requires manufacturers that raise prescription drug's wholesale acquisition cost by more than 15% to submit annual report

11. **Nebraska, LB168** (Introduced 1/13/2025)

Sponsor: Rep. Hardin (R), Rep. Dekay (R), Rep. Hallstrom (R), Rep. Kauth (R), Rep. Lippincott (R), Rep. McKeon (R), Rep. Murman (R), Rep. Raybould (D), Rep. Spivey (D)

Summary: Prohibits manufacturers and wholesale drug distributors from interfering with the acquisition or delivery of 340B drugs to pharmacies contracted with 340B entities

12. **New Hampshire, SB253** (Introduced 1/26/2025)

Sponsors: Sen. Reardon (D), Sen. Gannon (R)

Summary: Prohibits drug manufacturers from denying or restricting acquisition or delivery of a 340B covered drug by a covered entity unless the receipt of the drug is prohibited by federal law. The bill also prohibits a drug manufacturer from requiring certain claims or utilization data from the 340B covered entity unless required by federal law.

13. **New Mexico, HB78** (Introduced 1/7/2025)

Sponsor: Rep. Elizabeth "Liz" Thomson

Summary:

- A manufacturer, a manufacturer's agent or an affiliate of a manufacturer shall not directly or indirectly:

(1) deny, restrict, prohibit or interfere with the acquisition of a 340B drug by, or delivery of a 340B drug to, a pharmacy that is under contract with a covered entity and is authorized to receive

and dispense 340B drugs on behalf of the covered entity unless receipt of the 340B drugs is prohibited by the United States department of health and human services;

(2) interfere with a pharmacy contracted with a covered entity; or

(3) require a covered entity to submit any claims or utilization data as a condition for allowing the acquisition of a 340B drug by, or delivery of a 340B drug to, a covered entity unless the sharing of claims or utilization data is required by federal law."

14. **New York, S1913** (Introduced 1/14/2025)

Sponsor: Sen. Rivera (D)

Summary:

- a. No pharmaceutical manufacturer, pharmacy benefit manager, outsourcing facility, or third-party logistics provider shall directly or indirectly:
 - i. deny, prohibit, condition, or otherwise limit the dispensing of drugs from a covered entity or contract pharmacy, other than such limitations explicitly identified or explicitly authorized either under section 340B of the federal public health service act, or any regulations promulgated pursuant to such statute;
 - ii. deny access to drugs manufactured by a pharmaceutical manufacturer to a covered entity or contract pharmacy based on such covered entity's or contract pharmacy's participation in the 340B program; or (c) impose requirements, exclusions, reimbursement terms, fees, audits, claim identification, or other conditions on a covered entity or contract pharmacy that differ from the requirements, exclusions, reimbursement terms, fees, audits, claim identification, or other conditions applied to entities that do not participate in the 340B program, other than such limitations explicitly identified or explicitly authorized either under section 340B of the federal public health service act, or any regulations promulgated pursuant to such statute.

15. **North Dakota, HB1473** (Introduced 1/17/2025)

Sponsors: Rep. Nelson, Rep. Mitskog, Rep. Murphy, Rep. O'Brien, Sen. Axtman, Sen. Dever, Sen. Lee

Summary: Prohibits manufacturers and affiliates:

- Denying, restricting, or prohibiting acquisition of a drug by a contract pharmacy
- Prohibiting a contract pharmacy from dispensing a drug by denying access to the drug
- Requiring the covered entity of contract pharmacy to submit any claims, utilization data etc.
- Interfering with dispensing
- Offering or otherwise making available a drug in the form of a rebate, unless in the form of a discount at the time of sale

16. **Oklahoma, SB1030** (Introduced 2/3/2025)

Sponsor: Sen. Howard (R)

Summary:

- Prohibits payors, PBMs, and agents from reimbursing 340B drugs at a lower rate for 340B entities and affiliates
- Prohibits discrimination against a 340B entity that prevents patient's choice

17. **Oregon, [HB2057](#)** (Introduced 1/13/2025)

Sponsor: Rep. Noose (D)

Summary: Prohibits insurers offering policies or certificates of health insurance and pharmacy benefit managers from requiring that a claim for reimbursement of a prescription drug include a modifier or other indicator that the drug is a 340B drug

Oregon, [SB533/HB2385](#) (Introduced 1/13/2025)

Sponsors: Rep. Noose (D)/Sen. Patterson (D)

Summary:

- The Act prohibits drug makers from taking actions that make it hard for a drug store to get certain drugs on behalf of health care providers, deliver the drugs to the providers or dispense the drugs. The Act makes these actions an unlawful practice.
 - Makes it an unlawful practice for drug manufacturers to interfere directly or indirectly with a pharmacy or drug outlet acquiring 340B drugs, delivering 340B drugs to certain health care providers or dispensing 340B drugs.
 - Makes it an unlawful practice for drug manufacturers to require utilization review data from a drug outlet or pharmacy as a condition of the acquisition, delivery or dispensation of a 340B drug.
 - Would take effect on the 91st day following adjournment sine die.

18. **Rhode Island, [SB114](#)** (Introduced 1/31/2025)

Sponsor: Senators Valverde (D), DiMario (D), Ujifusa (D), Pearson (D), Murray (D), Bell (D), Euer (D), and Lauria (D)

Summary: Prohibits certain discriminatory actions related to reimbursement of 340B entities

19. **South Dakota, [SB154](#)** (Introduced 1/30/2025)

Sponsor: Sen. Reed (R)

Summary: Prohibits pharmaceutical manufacturers and wholesale drug distributors from interfering in contracts between 340B entities and pharmacies.

20. **Tennessee, [SB 1414](#)/HB1242** (Introduced 2/6/2025, currently with Governor for Passage)

Sponsors: Sen. Briggs (R), Rep. Helton-Haynes (R)

Summary: Prohibits contract pharmacy discrimination

21. **Texas, [HB 3265](#)** (Introduced 2/25/2025)

Sponsors: Rep. Darby (R)

Summary:

- Prohibits discrimination against a covered entity, a pharmacist, or pharmacy that is under contract with a covered entity, or another entity that is authorized under the contract to receive a 340B drug on behalf of the covered entity
- Requires a covered entity, a pharmacist or pharmacy that is under contract with the covered entity, or another entity that is authorized under the contract to receive a 340B drug on behalf of the covered entity to submit any claim or utilization as a condition of the acquisition of a 340 drug...

22. Utah, SB69 (Introduced 1/21/2025, currently with Governor for Passage)

Sponsor: Sen. Vickers (R)

Summary: Prohibits interfering with a pharmaceutical entity's acquisition of a 340B drug.

23. Vermont, H266 (Introduced 2/19/2025)

Sponsor: Representative Black

Summary: Prohibits discrimination or interference by drug manufacturers and health insurers, pbms, and other payors of 340B covered entities and 340B contract pharmacies.

Other Bills that Could Affect the Program's Savings

Blue Highlighted bills have mandatory provider reporting of 340B savings

1. Connecticut, HB6810 (Introduced 1/29/2025)

Sponsor: Rep. Mushinsky (D)

Summary: Would make 340B reporting requirements a condition for Medicaid reimbursement

2. Missouri, HB 781 (Introduced 1/9/2025)

Sponsor: Rep. Ben Keathley

Summary:

- A covered entity shall:
 - Ensure that all 340B drug proceeds realized from the dispensing of 340B drugs are used to offset out-of-pocket costs for, or provide direct patient care to, vulnerable patients; and
 - Before September 1, 2026, and annually thereafter, certify to the department that the covered entity has met the requirements of this section and used all 340B drug proceeds from the dispensing of 340B drugs to offset out-of-pocket costs for, or provide direct patient care to, vulnerable patients and report the following:
 - The total amount of 340B drug proceeds realized by the covered entity for 340B drugs for the fiscal year preceding the report; and

- (b)An itemized summary of how the covered entity used the 340B drug proceeds including, but not limited to:
 - All uses to directly offset out-of-pocket costs for 340B drugs for vulnerable patients;
 - All uses to directly offset out-of-pocket costs for vulnerable patients other than for 340B drugs;
 - All uses to provide direct patient care to vulnerable patients;
 - The assumptions, evaluations, and metrics used to make use determinations about 340B drug proceeds; and
 - Any other information the department may deem relevant by rule.

3. **Idaho, [HB136](#) (Introduced 2/4/2025)**

Sponsor: Health and Welfare Committee

Summary: Places extensive reporting requirements on all covered entity types

4. **Indiana, [SB 118](#) (Introduced 2/4/2025)**

Sponsor: Senator Charbonneau (R)

Summary: Requires an entity authorized to participate in the federal 340B Drug Pricing Program to annually report specific data to the Indiana Department of Health.

5. **Missouri, [HB781](#) (Introduced 1/8/2025)**

Sponsor: Rep. Keathley (R)

Summary:

- a. Requires covered entities to
 - i. direct all of their 340B savings to uninsured patients only
 - ii. Report their total annual 340B savings

6. **New York, [S 1794](#) (Introduced 1/13/2025)**

Sponsor: Sen. Nathalia Fernandez

Summary: Requires federally qualified health centers and rural health centers cover the cost of all ovulation enhancing drugs dispensed and other covered entities pursuant to section 340B of the federal public health service act.

7. **Rhode Island, [H7140](#) (Introduced 1/11/2024)**

Sponsor: Rep John Lombardi (D)

Cosponsors: Raymond Hull (D), Leonela Felix (D), Stewart, Cruz, Tanzi

Summary:

- Grant the state board of pharmacy and the department of health the authority to jointly identify, on an annual basis, up to fifteen prescription drugs deemed to represent a significant financial burden due to cost increases. This list would then be forwarded to the attorney general's office, which would subsequently demand relevant information and documentation from the manufacturers in question to justify said cost increases.
- Mandate the Department of Health to utilize a standardized dispensing fee within its reimbursement formula for 340B prescription drugs, mirroring the fee employed for non-340B drugs under the Medicaid program.
- Require the Department of Health to provide the general assembly and the governor with comprehensive information pertaining to these programs.
- Establish an advisory commission tasked with studying the issue of out-of-pocket prescription drug costs, with the responsibility of submitting reports and recommendations to both the governor and the general assembly.

8. **Virginia, [SB186](#)** (Introduced 1/8/2024)

Sponsor: Del. Suhas Subramanyam (D)

Summary:

- Directs the Secretary of Health and Human Resources to establish a wholesale prescription drug importation program that complies with the requirements of federal law and to report annually by October 1 to the Governor and the Chairmen of the House Committees on Appropriations and Health, Welfare and Institutions and the Senate Committees on Finance and Appropriations and Education and Health on the wholesale prescription drug importation program.
- The bill also requires the Secretary to (i) convene a work group composed of relevant stakeholders to develop a plan for implementation of the wholesale prescription drug importation program and report the plan to the Governor and the Chairmen of the House Committees on Appropriations and Health, Welfare and Institutions and the Senate Committees on Finance and Appropriations and Education and Health by December 1, 2024,
- and seek such federal approvals, waivers, exemptions, or agreements as may be necessary to enable all covered entities enrolled in or eligible for the federal 340B Drug Pricing Program to participate in the wholesale prescription drug importation program to the greatest extent possible without jeopardizing their eligibility for the 340B Drug Pricing Program by July 1, 2025.

9. **Vermont, [H202](#)** (Introduced 2/11/2025)

Sponsor: Rep. Cordes (D)

Summary: Requires all state 340B hospitals to annual report detailed financial information on how they generate and use their 340B savings. Also requires all covered entities to annually notify patients in any of their prescription drugs were purchased through the 340B program