

June 13, 2002

**H 1719. STATE EMPLOYEES HEALTH PLAN/PRESC. DRUGS. TO PROVIDE THAT PRESCRIPTION DRUG BENEFITS UNDER THE TEACHERS' AND STATE EMPLOYEES' COMPREHENSIVE MAJOR MEDICAL PLAN ("PLAN") SHALL BE ADMINISTERED UNDER THE PLAN'S CONTRACT WITH BLUE CROSS BLUE SHIELD IF THERE IS NOT A SATISFACTORY RESOLUTION OF THE PLAN.** As title indicates. Provides that responsibility for processing claims for outpatient prescription drugs shall be returned to Blue Cross/Blue Shield (BC/BS) under the Plan's existing claims processing contract if the contract dispute with Advance PCS is not satisfactorily resolved by Aug. 1, 2002. If the processing of outpatient prescription drug claims is returned to BC/BS, directs the Plan's Executive Administrator and Board of Trustees to resume paying pharmacies on the basis of dispensing fees and ingredient prices for branded and generic drugs that was paid to the pharmacies on the Plan's behalf for three-fourths of the year beginning July 1, 2001.

**Intro. by Wright, Baddour.**

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| Ref. to Health | UNCODIFIED |
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