

1 **SENATE FLOOR VERSION**

2 April 9, 2024

3 COMMITTEE SUBSTITUTE
4 FOR ENGROSSED
5 HOUSE BILL NO. 3376

By: McEntire of the House

and

McCortney of the Senate

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9 An Act relating to pharmacy benefits management;
10 amending 36 O.S. 2021, Sections 6960, as amended by
11 Section 1, Chapter 38, O.S.L. 2022, 6962, as last
12 amended by Section 1, Chapter 293, O.S.L. 2023, 6965,
13 as amended by Section 2, Chapter 293, O.S.L. 2023,
14 Section 3, Chapter 38, O.S.L. 2022, as amended by
15 Section 3, Chapter 293, O.S.L. 2023, and 6967 (36
16 O.S. Supp. 2023, Sections 6960, 6962, 6965, and
17 6966.1), which relate to the Patient's Right to
18 Pharmacy Choice Act; defining terms; modifying
19 definitions; prohibiting certain contract terms from
20 restricting document disclosure to certain entities;
21 modifying certain compliance provisions; conforming
22 language; construing provisions; providing for rule
23 promulgation; establishing requirements for
24 disclosure of protected health information; modifying
certain fine amount; providing for certain fines and
fees; creating the Attorney General's Pharmacy
Benefits Manager Enforcement Revolving Fund;
establishing fund source; stating purpose;
establishing provisions relating to public disclosure
of certain report and certain information obtained by
the Attorney General; repealing 36 O.S. 2021, Section
6966, which relates to the Patient's Right to
Pharmacy Choice Commission; updating statutory
reference; updating statutory language; providing for
codification; and declaring an emergency.

1 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

2 SECTION 1. AMENDATORY 36 O.S. 2021, Section 6960, as
3 amended by Section 1, Chapter 38, O.S.L. 2022 (36 O.S. Supp. 2023,
4 Section 6960), is amended to read as follows:

5 Section 6960. A. For purposes of the Patient's Right to
6 Pharmacy Choice Act:

7 1. "Covered entity" means a nonprofit hospital or medical
8 service organization, for-profit hospital or medical service
9 organization, insurer, health benefit plan, health maintenance
10 organization, health program administered by the state in the
11 capacity of providing health coverage, or an employer, labor union,
12 or other group of persons that provides health coverage to persons
13 in this state. This term does not include a health plan that
14 provides coverage only for accidental injury, specified disease,
15 hospital indemnity, disability income, or other limited benefit
16 health insurance policies and contracts that do not include
17 prescription drug coverage;

18 2. "Health insurer" means any corporation, association, benefit
19 society, exchange, partnership or individual licensed by the
20 Oklahoma Insurance Code;

21 ~~2.~~ 3. "Health insurer payor" means a health insurance company,
22 health maintenance organization, union, hospital and medical
23 services organization or any entity providing or administering a
24 self-funded health benefit plan;

1 ~~3.~~ 4. "Mail-order pharmacy" means a pharmacy licensed by this
2 state that primarily dispenses and delivers covered drugs via common
3 carrier;

4 ~~4.~~ 5. "Pharmacy benefits manager" or "PBM" means a person,
5 business, or other entity that performs pharmacy benefits management
6 and any other person acting for such person under. The term shall
7 include a person or entity acting on behalf of a PBM in a
8 contractual or employment relationship in the performance of
9 pharmacy benefits management for a ~~managed-care~~ managed care
10 company, nonprofit hospital, medical service organization, insurance
11 company, third-party payor or a health program administered by a
12 department of this state;

13 6. "Pharmacy benefits management" means a service provided to
14 covered entities to facilitate the provisions of prescription drug
15 benefits to covered individuals within the state, including, but not
16 limited to, negotiating pricing and other terms with drug
17 manufacturers and providers. Pharmacy benefits management may
18 include any or all of the following services:

- 19 a. claims processing, retail network management, and
20 payment of claims to pharmacies for prescription drugs
21 dispensed to covered individuals,
22 b. administration or management of pharmacy discount
23 cards or programs,

1 c. clinical formulary development and management
2 services, or

3 d. rebate contracting and administration;

4 ~~5.~~ 7. "Provider" means a pharmacy, as defined in Section 353.1
5 of Title 59 of the Oklahoma Statutes or an agent or representative
6 of a pharmacy;

7 ~~6.~~ 8. "Retail pharmacy network" means retail pharmacy providers
8 contracted with a PBM in which the pharmacy primarily fills and
9 sells prescriptions via a retail, storefront location;

10 ~~7.~~ 9. "Rural service area" means a five-digit ZIP code in which
11 the population density is less than one thousand (1,000) individuals
12 per square mile;

13 ~~8.~~ 10. "Spread pricing" means a prescription drug pricing model
14 utilized by a pharmacy benefits manager in which the PBM charges a
15 health benefit plan a contracted price for prescription drugs that
16 differs from the amount the PBM directly or indirectly pays the
17 pharmacy or pharmacist for providing pharmacy services;

18 ~~9.~~ 11. "Suburban service area" means a five-digit ZIP code in
19 which the population density is between one thousand (1,000) and
20 three thousand (3,000) individuals per square mile; and

21 ~~10.~~ 12. "Urban service area" means a five-digit ZIP code in
22 which the population density is greater than three thousand (3,000)
23 individuals per square mile.
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1 B. Nothing in the definitions of pharmacy benefits manager or
2 pharmacy benefits management as such terms are defined in the
3 Patient's Right to Pharmacy Choice Act, the Pharmacy Audit Integrity
4 Act, or Sections 357 through 360 of Title 59 of the Oklahoma
5 Statutes shall be construed to deem the following entities to be a
6 pharmacy benefits manager:

7 1. An employer of its own self-funded health benefit plan,
8 except, to the extent permitted by applicable law, where the
9 employer without the utilization of a third party and unrelated to
10 the employer's own pharmacy:

- 11 a. negotiates directly with drug manufacturers,
12 b. processes claims on behalf of its members, or
13 c. manages its own retail network of pharmacies; or

14 2. A pharmacy that provides a patient with a discount card or
15 program that is for exclusive use at the pharmacy offering the
16 discount.

17 SECTION 2. AMENDATORY 36 O.S. 2021, Section 6962, as
18 last amended by Section 1, Chapter 293, O.S.L. 2023 (36 O.S. Supp.
19 2023, Section 6962), is amended to read as follows:

20 Section 6962. A. The Attorney General shall review and approve
21 retail pharmacy network access for all pharmacy benefits managers
22 (PBMs) to ensure compliance with Section 6961 of this title.

23 B. A PBM, or an agent of a PBM, shall not:
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1 1. Cause or knowingly permit the use of advertisement,
2 promotion, solicitation, representation, proposal or offer that is
3 untrue, deceptive or misleading;

4 2. Charge a pharmacist or pharmacy a fee related to the
5 adjudication of a claim including without limitation a fee for:

6 a. the submission of a claim,

7 b. enrollment or participation in a retail pharmacy
8 network, or

9 c. the development or management of claims processing
10 services or claims payment services related to
11 participation in a retail pharmacy network;

12 3. Reimburse a pharmacy or pharmacist in the state an amount
13 less than the amount that the PBM reimburses a pharmacy owned by or
14 under common ownership with a PBM for providing the same covered
15 services. The reimbursement amount paid to the pharmacy shall be
16 equal to the reimbursement amount calculated on a per-unit basis
17 using the same generic product identifier or generic code number
18 paid to the PBM-owned or PBM-affiliated pharmacy;

19 4. Deny a provider the opportunity to participate in any
20 pharmacy network at preferred participation status if the provider
21 is willing to accept the terms and conditions that the PBM has
22 established for other providers as a condition of preferred network
23 participation status;

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1 5. Deny, limit or terminate a provider's contract based on
2 employment status of any employee who has an active license to
3 dispense, despite probation status, with the State Board of
4 Pharmacy;

5 6. Retroactively deny or reduce reimbursement for a covered
6 service claim after returning a paid claim response as part of the
7 adjudication of the claim, unless:

8 a. the original claim was submitted fraudulently, or

9 b. to correct errors identified in an audit, so long as
10 the audit was conducted in compliance with Sections
11 356.2 and 356.3 of Title 59 of the Oklahoma Statutes;

12 7. Fail to make any payment due to a pharmacy or pharmacist for
13 covered services properly rendered in the event a PBM terminates a
14 provider from a pharmacy benefits manager network;

15 8. Conduct or practice spread pricing, as defined in ~~Section 1~~
16 ~~of this act~~ Section 6960 of this title, in this state; or

17 9. Charge a pharmacist or pharmacy a fee related to
18 participation in a retail pharmacy network including but not limited
19 to the following:

20 a. an application fee,

21 b. an enrollment or participation fee,

22 c. a credentialing or re-credentialing fee,

23 d. a change of ownership fee, or
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1 e. a fee for the development or management of claims
2 processing services or claims payment services.

3 C. The prohibitions under this section shall apply to contracts
4 between pharmacy benefits managers and providers for participation
5 in retail pharmacy networks.

6 1. A PBM contract shall:

7 a. not restrict, directly or indirectly, any pharmacy
8 that dispenses a prescription drug from informing, or
9 penalize such pharmacy for informing, an individual of
10 any differential between the individual's out-of-
11 pocket cost or coverage with respect to acquisition of
12 the drug and the amount an individual would pay to
13 purchase the drug directly, and

14 b. ensure that any entity that provides pharmacy benefits
15 management services under a contract with any such
16 health plan or health insurance coverage does not,
17 with respect to such plan or coverage, restrict,
18 directly or indirectly, a pharmacy that dispenses a
19 prescription drug from informing, or penalize such
20 pharmacy for informing, a covered individual of any
21 differential between the individual's out-of-pocket
22 cost under the plan or coverage with respect to
23 acquisition of the drug and the amount an individual

1 would pay for acquisition of the drug without using
2 any health plan or health insurance coverage.

3 2. A pharmacy benefits manager's contract with a provider shall
4 not prohibit, restrict, or limit disclosure of information or
5 documents to the Attorney General, law enforcement or state and
6 federal governmental officials investigating or examining a
7 complaint or conducting a review of a pharmacy benefits manager's
8 compliance with the requirements under the Patient's Right to
9 Pharmacy Choice Act, the Pharmacy Audit Integrity Act, and Sections
10 357 through 360 of Title 59 of the Oklahoma Statutes.

11 D. A pharmacy benefits manager shall:

12 1. Establish and maintain an electronic claim inquiry
13 processing system using the National Council for Prescription Drug
14 ~~Programs'~~ Programs current standards to communicate information to
15 pharmacies submitting claim inquiries;

16 2. Fully disclose to insurers, self-funded employers, unions or
17 other PBM clients the existence of the respective aggregate
18 prescription drug discounts, rebates received from drug
19 manufacturers and pharmacy audit recoupments;

20 3. Provide the Attorney General, insurers, self-funded employer
21 plans and unions unrestricted audit rights of and access to the
22 respective PBM pharmaceutical manufacturer and provider contracts,
23 plan utilization data, plan pricing data, pharmacy utilization data
24 and pharmacy pricing data;

1 4. Maintain, for no less than three (3) years, documentation of
2 all network development activities including but not limited to
3 contract negotiations and any denials to providers to join networks.
4 This documentation shall be made available to the Attorney General
5 upon request; and

6 5. Report to the Attorney General, on a quarterly basis for
7 each health insurer payor, on the following information:

- 8 a. the aggregate amount of rebates received by the PBM,
- 9 b. the aggregate amount of rebates distributed to the
10 appropriate health insurer payor,
- 11 c. the aggregate amount of rebates passed on to the
12 enrollees of each health insurer payor at the point of
13 sale that reduced the applicable deductible,
14 copayment, coinsure or other cost sharing amount of
15 the enrollee,
- 16 d. the individual and aggregate amount paid by the health
17 insurer payor to the PBM for pharmacy services
18 itemized by pharmacy, drug product and service
19 provided, and
- 20 e. the individual and aggregate amount a PBM paid a
21 provider for pharmacy services itemized by pharmacy,
22 drug product and service provided.

23 E. Nothing in the Patient's Right to Pharmacy Choice Act shall
24 prohibit the Attorney General from requesting and obtaining detailed

1 data, including raw data, in response to the information provided by
2 a PBM in the quarterly reports required by this section. The
3 Attorney General may alter the frequency of the reports required by
4 this section at his or her sole discretion.

5 F. The Attorney General may promulgate rules to implement the
6 provisions of the Patient's Right to Pharmacy Choice Act, the
7 Pharmacy Audit Integrity Act, and Sections 357 through 360 of Title
8 59 of the Oklahoma Statutes.

9 SECTION 3. AMENDATORY 36 O.S. 2021, Section 6965, as
10 amended by Section 2, Chapter 293, O.S.L. 2023 (36 O.S. Supp. 2023,
11 Section 6965), is amended to read as follows:

12 Section 6965. A. The Attorney General shall have power and
13 authority to examine and investigate the affairs of every pharmacy
14 benefits manager (PBM) engaged in pharmacy benefits management in
15 this state in order to determine whether such entity is in
16 compliance with the Patient's Right to Pharmacy Choice Act, the
17 Pharmacy Audit Integrity Act, and Sections 357 through 360 of Title
18 59 of the Oklahoma Statutes.

19 B. The Attorney General shall have the power and authority to
20 subpoena witnesses and records, whether prior to or during an
21 investigation or prosecution of a complaint, from any relevant
22 entity or persons to ensure compliance with the Patient's Right to
23 Pharmacy Choice Act, the Pharmacy Audit Integrity Act, and Sections
24 357 through 360 of Title 59 of the Oklahoma Statutes.

1 C. All PBM files and records shall be subject to examination by
2 the Attorney General or by duly appointed designees. The Attorney
3 General, authorized employees and examiners shall have access to any
4 of a PBM's files and records that may relate to a particular
5 complaint under investigation or to an inquiry or examination by the
6 Attorney General.

7 ~~E.~~ D. Every officer, director, employee or agent of the PBM,
8 upon receipt of any inquiry from the Attorney General, shall, within
9 twenty (20) days from the date the inquiry is sent, furnish the
10 Attorney General with an adequate response to the inquiry.

11 ~~D.~~ E. When making an examination under this section, the
12 Attorney General may retain subject matter experts, attorneys,
13 appraisers, independent actuaries, independent certified public
14 accountants or an accounting firm or individual holding a permit to
15 practice public accounting, certified financial examiners or other
16 professionals and specialists as examiners, the cost of which shall
17 be borne by the PBM that is the subject of the examination.

18 F. 1. Protected health information (PHI) held by a PBM shall
19 be provided at the request of the Attorney General for the purpose
20 of conducting investigations into potential violations of state laws
21 and regulations related to the PBM. Disclosure of protected health
22 information shall be limited to the extent necessary for the
23 investigation and enforcement of state law.
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1 2. All disclosures of protected health information shall be
2 made in compliance with all applicable federal and state privacy
3 laws, including the Health Insurance Portability and Accountability
4 Act of 1996 (HIPAA), and other relevant laws protecting the privacy
5 and confidentiality of health information.

6 3. Any protected health information obtained for an
7 investigation shall be handled and maintained per applicable federal
8 and state privacy laws and regulations, including HIPAA.

9 4. Unauthorized disclosure of protected health information
10 obtained during an investigation is strictly prohibited and subject
11 to legal penalties.

12 G. 1. If the Attorney General, after notice and opportunity
13 for hearing, finds that any PBM operating within this state has not
14 fully cooperated with an investigation or inquiry conducted by the
15 Attorney General related to compliance with the Patient's Right to
16 Pharmacy Choice Act, the Pharmacy Audit Integrity Act, and Sections
17 357 through 360 of Title 59 of the Oklahoma Statutes, the Attorney
18 General may instruct the Insurance Commissioner that the PBM be
19 censured or his or her license be suspended or revoked. If the
20 Attorney General makes such instruction, the Commissioner shall
21 enforce the instructed action within thirty (30) days.

22 2. In addition to or in lieu of any censure, suspension, or
23 revocation by the Commissioner, the Attorney General may levy a
24 civil or administrative fine not less than One Hundred Dollars

1 (\$100.00) and not greater than Ten Thousand Dollars (\$10,000.00) for
2 each violation of this subsection and assess any other penalty or
3 remedy authorized by this act. For purposes of this section, each
4 day a PBM fails to comply with an investigation or inquiry may be
5 considered a separate violation.

6 SECTION 4. AMENDATORY Section 3, Chapter 38, O.S.L.
7 2022, as amended by Section 3, Chapter 293, O.S.L. 2023 (36 O.S.
8 Supp. 2023, Section 6966.1), is amended to read as follows:

9 Section 6966.1. A. The Insurance Commissioner may censure,
10 suspend, revoke, or refuse to issue or renew a license of or levy a
11 civil penalty against any person licensed under the insurance laws
12 of this state for any violation of the Patient's Right to Pharmacy
13 Choice Act, Section 6958 et seq. of this title.

14 B. 1. If the Attorney General finds, after notice and
15 opportunity for hearing, that a pharmacy benefits manager (PBM)
16 violated one or more provisions of the Patient's Right to Pharmacy
17 Choice Act, the Pharmacy Audit Integrity Act or the provisions of
18 Sections 357 through 360 of Title 59 of the Oklahoma ~~Statutes~~
19 Statutes, the Attorney General may ~~recommend~~ instruct the Insurance
20 Commissioner that the PBM be censured, or his or her license ~~may~~ be
21 suspended or revoked ~~and a penalty or remedy authorized by this act~~
22 ~~may be imposed~~. If the Attorney General makes such ~~recommendation~~
23 instruction, the Commissioner shall ~~take the recommended action~~
24 enforce such action within thirty (30) days.

1 2. In addition to or in lieu of any censure, suspension or
2 revocation of a license by the Commissioner, ~~a PBM~~ the Attorney
3 General may ~~be subject to~~ levy a civil or administrative fine ~~of~~ not
4 less than One Hundred Dollars (\$100.00) and not greater than Ten
5 Thousand Dollars (\$10,000.00) for each violation of the provisions
6 of the Patient's Right to Pharmacy Choice Act, the Pharmacy Audit
7 Integrity Act or the provisions of Sections 357 through 360 of Title
8 59 of the Oklahoma ~~Statues~~, ~~following notice and an opportunity for~~
9 ~~a hearing~~ Statutes.

10 3. The Attorney General may order restitution for economic loss
11 suffered by pharmacies or patients for violations of the Patient's
12 Right to Pharmacy Choice Act, the Pharmacy Audit Integrity Act, or
13 the provisions of Sections 357 through 360 of Title 59 of the
14 Oklahoma Statutes.

15 C. Notwithstanding whether the license of a PBM has been
16 issued, suspended, revoked, surrendered or lapsed by operation of
17 law, the Attorney General is hereby authorized to enforce the
18 provisions of the Patient's Right to Pharmacy Choice Act and impose
19 any penalty or remedy authorized under the act against a PBM under
20 investigation for or charged with a violation of the Patient's Right
21 to Pharmacy Choice Act, the Pharmacy Audit Integrity Act, the
22 provisions of Sections 357 through 360 of Title 59 of the Oklahoma
23 ~~Statues~~ Statutes or any provision of the insurance laws of this
24 state.

1 D. Each day that a PBM conducts business in this state without
2 a license from the Insurance Department shall be deemed a violation
3 of the Patient's Right to Pharmacy Choice Act.

4 E. 1. All hearings conducted by the Office of the Attorney
5 General pursuant to this section shall be public and held in
6 accordance with the Administrative Procedures Act.

7 2. Hearings shall be held at the ~~office~~ Office of the Attorney
8 General or any other place the Attorney General may deem convenient.

9 3. The Attorney General, upon written request from a PBM
10 affected by the hearing, shall cause a full stenographic record of
11 the proceedings to be made by a competent court reporter. This
12 record shall be at the expense of the PBM.

13 4. The ordinary fees and costs of the hearing examiner
14 appointed pursuant to Section 319 of this title may be assessed by
15 the hearing examiner against the respondent unless the respondent is
16 the prevailing party.

17 F. Any PBM whose license has been censured, suspended, revoked
18 or denied renewal or who has had a fine levied against him or her
19 shall have the right of appeal from the final order of the Attorney
20 General, pursuant to Section 318 et seq. of Title 75 of the Oklahoma
21 Statutes.

22 G. If the Attorney General determines, based upon an
23 investigation of complaints, that a PBM has engaged in violations of
24 the provisions of the Patient's Right to Pharmacy Choice Act, the

1 Pharmacy Audit Integrity Act, and Sections 357 through 360 of Title
2 59 of the Oklahoma Statutes with such frequency as to indicate a
3 general business practice, and that the PBM should be subjected to
4 closer supervision with respect to those practices, the Attorney
5 General may require the PBM to file a report at any periodic
6 interval the Attorney General deems necessary.

7 H. 1. The Attorney General shall have the authority to collect
8 all fines, penalties, restitution, and interest thereon pursuant to
9 the provisions of the Patient's Right to Pharmacy Choice Act, the
10 Pharmacy Audit Integrity Act, and the provisions of Sections 357
11 through 360 of Title 59 of the Oklahoma Statutes, or any other
12 charge, cause of action, prelitigation settlement, or other
13 settlement that requires the recovery of money as a result of
14 violations of the Patient's Right to Pharmacy Choice Act. Funds
15 collected by the Attorney General pursuant to the Patient's Right to
16 Pharmacy Choice Act, the Pharmacy Audit Integrity Act, and Sections
17 357 through 360 of Title 59 of the Oklahoma Statutes shall be
18 deposited into the Attorney General's Pharmacy Benefits Manager
19 Enforcement Revolving Fund.

20 2. Costs of investigation, litigation, attorney fees, and other
21 expenses incurred shall be retained by the Office of the Attorney
22 General. Remaining funds shall be distributed to pharmacists,
23 patients, or other injured parties as determined by the Attorney
24 General.

1 3. The Attorney General shall promulgate rules for the
2 distribution of funds pursuant to this subsection.

3 SECTION 5. NEW LAW A new section of law to be codified
4 in the Oklahoma Statutes as Section 6966.2 of Title 36, unless there
5 is created a duplication in numbering, reads as follows:

6 There is hereby created in the State Treasury a revolving fund
7 for the Office of the Attorney General, to be designated the
8 "Attorney General's Pharmacy Benefits Manager Enforcement Revolving
9 Fund". The fund shall be a continuing fund, not subject to fiscal
10 year limitations, and shall consist of any monies collected by the
11 Attorney General and designated to the fund by law, including those
12 levied for activities related to enforcement of the Patient's Right
13 to Pharmacy Choice Act, the Pharmacy Audit Integrity Act, and the
14 provisions of Sections 357 through 360 of Title 59 of the Oklahoma
15 Statutes. All monies accruing to the credit of the fund are hereby
16 appropriated and may be budgeted and expended by the Attorney
17 General for the purposes provided in this section. Expenditures
18 from the fund shall be made upon warrants issued by the State
19 Treasurer against claims filed as prescribed by law with the
20 Director of the Office of Management and Enterprise Services for
21 approval and payment.

22 SECTION 6. AMENDATORY 36 O.S. 2021, Section 6967, is
23 amended to read as follows:

1 Section 6967. A. Documents, evidence, materials, records,
2 reports, complaints or other information in the possession or
3 control of the Office of the Attorney General or Insurance
4 ~~Department or the Right to Pharmacy Choice Commission~~ that ~~are~~ is
5 obtained by, created by or disclosed to the Office of the Attorney
6 General or Insurance Commissioner, ~~Pharmacy Choice Commission~~ or any
7 other person in the course of an evaluation, examination,
8 investigation or review made pursuant to the provisions of the
9 Patient's Right to Pharmacy Choice Act, the Pharmacy ~~Integrity~~ Audit
10 Integrity Act or Sections 357 through 360 of Title 59 of the
11 Oklahoma Statutes, except as provided in subsection C of this
12 section, shall be confidential by law and privileged, shall not be
13 subject to open records request, shall not be subject to subpoena
14 and shall not be subject to discovery or admissible in evidence in
15 any private civil action if obtained from the Attorney General,
16 Insurance Commissioner, ~~the Pharmacy Choice Commission~~ or any
17 employees or representatives of the Attorney General or Insurance
18 Commissioner.

19 B. Nothing in this section shall prevent the disclosure of a
20 final order issued against a pharmacy benefits manager by the Office
21 of the Attorney General or Insurance Commissioner ~~or Pharmacy Choice~~
22 ~~Commission~~. Such orders shall be open records.

23 C. Nothing in this section shall prevent the Attorney General
24 from making public, in the form of an examination report, any

1 findings from an examination pursuant to Section 6965 of this title.
2 It shall be the Attorney General's sole discretion to determine
3 whether it is in the public's interest to publish these findings.
4 Only the final examination report shall be made public. Any
5 documents, evidence, materials, records, reports, complaints, or
6 other information in possession or control of the Attorney General
7 obtained through the examination shall be confidential by law and
8 privileged, shall not be subject to the Oklahoma Open Records Act,
9 shall not be subject to subpoena, and shall not be subject to
10 discovery or admissible evidence in any private civil action if
11 obtained from the Attorney General.

12 D. In the course of any hearing made pursuant to the provisions
13 of the Patient's Right to Pharmacy Choice Act, the Pharmacy
14 ~~Integrity~~ Audit Integrity Act or Sections 357 through 360 of Title
15 59 of the Oklahoma Statutes, nothing in this section shall be
16 construed to prevent the Insurance Commissioner or any employees or
17 representatives of the Insurance Commissioner from presenting
18 admissible documents, evidence, materials, records, reports or
19 complaints to the adjudicating authority.

20 SECTION 7. REPEALER 36 O.S. 2021, Section 6966, is
21 hereby repealed.

22 SECTION 8. It being immediately necessary for the preservation
23 of the public peace, health or safety, an emergency is hereby
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1 declared to exist, by reason whereof this act shall take effect and
2 be in full force from and after its passage and approval.

3 COMMITTEE REPORT BY: COMMITTEE ON RETIREMENT AND INSURANCE
4 April 9, 2024 - DO PASS AS AMENDED BY CS
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