

**Bill Summary**  
2<sup>nd</sup> Session of the 60<sup>th</sup> Legislature

<b>Bill No.:</b>	<b>SB 2074</b>
<b>Version:</b>	<b>INT</b>
<b>Request No.</b>	<b>2584</b>
<b>Author:</b>	<b>Sen. Alvord</b>
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**Bill Analysis**

SB 2074 prohibits pharmacy benefits managers (PBM) from refusing to accept additional documentation from providers after the appeal submission. The measure requires each PBM to make the reimbursement amount for a drug equal to the amount of a drug that is not available below the acquisition cost obtained from the pharmaceutical wholesaler from whom the dispensing pharmacy purchases the majority of the prescription drugs that are dispensed. The measure directs the PBM to notify the provider that an increase has been granted because of a reimbursement appeal. The amount shall be remitted after a 30-day period if a claim subject to an approved appeal is not reversed and reprocessed. The measure requires each adjustment to be accompanied by complete claim-level detail sufficient to reconcile the adjustment. The measure requires PBM's to reimburse a provider for a prescription drug or pharmacy service at an amount equal to or greater than the national average drug acquisition cost for the prescription drug or pharmacy service at the time the drug is administered or dispensed.

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