OAR 836-200-04??

Aggregated Rebate and Payment Reports

- (1) No later than June 1 of each year, a pharmacy benefit manager registered with the Department of Consumer and Business Services must file a report using the form and manner prescribed by the Department. The report must contain the following information for the immediately preceding calendar year:
- (a) The aggregated amount of rebates, fees, price protection payments, and any other payments the pharmacy benefit manager received from manufacturers related to managing the pharmacy benefits for carriers issuing health benefit plans in this state.
- (b) The aggregated amount of any payments, as described in subsection (1)(a) of this rule, that were passed on to carriers issuing health benefit plans in this state.
- (c) The aggregated amount of any payments, as described in subsection (1)(a) of this rule, that were passed on to enrollees in a health benefit plan at the point of sale in this state.
- (d) The aggregated amount of any payments, as described in subsection (1)(a) of this rule, that were retained as revenue by the pharmacy benefit manager.
- (2) The amount described in section (1)(a) of this rule should be equal to the sum of the amounts described in sections (1)(b), (1)(c), and (1)(d) of this rule.
- (3) The amounts described in section (1) of this rule must include all payments that the pharmacy benefit manager received from manufacturers directly and any payments the pharmacy benefit manager received from manufacturers'—by the pharmacy benefit manager's subsidiaries, or otherwise affiliated entities, any other entities that the pharmacy benefit manager holds an ownership in, or any entities which hold an ownership interest in the pharmacy benefit manager.