## Article - Health - General

15-118.

- (a) [The forms that are used in prescribing and billing for drugs under the Program shall include the following statement, if applicable: This prescription shall be filled with a generic equivalent as authorized by State law, unless the prescriber directs otherwise in writing.] A PRESCRIPTION, FORM, OR AN ELECTRONIC COMMUNICATION THROUGH THE POINT OF SALE SYSTEM THAT IS USED TO PRESCRIBE OR BILL FOR DRUGS SHALL SPECIFY CONSPICUOUSLY ON ITS FACE THAT THE GENERIC EQUIVALENT OF A PRESCRIPTION DRUG IS REQUIRED UNLESS OTHERWISE DIRECTED IN WRITING BY THE PRESCRIBER.
- (b) (1) Unless the prescriber directs otherwise AND INCLUDES A MEDICAL REASON WHY THE GENERIC CANNOT BE USED on the form or on an attached signed certification of need, the generic form of the drug authorized under § 12-508 of the Health Occupations Article shall be used to fill the prescription[, except for drugs generally not available in the State, drugs that have low utilization, or drugs lacking significant cost differential between the interchangeable products].
- (2) IF THE APPROPRIATE GENERIC DRUG IS NOT GENERALLY AVAILABLE, THE DEPARTMENT MAY WAIVE THE REQUIREMENT FOR GENERIC SUBSTITUTION UNDER PARAGRAPH (1) OF THIS SUBSECTION.
- (e) (B) (1) [The Program shall publish a list of drugs with therapeutic equivalence as defined in § 12-508 of the Health Occupations Article that are generally available within the State, have sufficient utilization, are packaged for administration or patient use in a manner that avoids any potential adverse impact on efficacy of treatment, and have sufficient cost differential between products.
- (2) The] EXCEPT AS PROVIDED UNDER PARAGRAPH (2) OF THIS SUBSECTION, THE Program shall establish maximum reimbursement levels for the drug products [listed under paragraph (1) of this subsection based on the cost of the available generic products] FOR WHICH THERE IS A GENERIC EQUIVALENT AUTHORIZED UNDER § 12–508 OF THE HEALTH OCCUPATIONS ARTICLE, BASED ON THE COST OF THE GENERIC PRODUCT.
- (2) IF A PRESCRIBER DIRECTS A SPECIFIC BRAND NAME DRUG, THE REIMBURSEMENT LEVEL SHALL BE BASED ON THE COST OF THE BRAND NAME PRODUCT.
- [(3) Additions to the Program list of interchangeable drugs shall be effective 60 days after the publication of the Program list or supplements to the Program list including the changes.
- (4) Drug products disqualified from being used as a generic substitute in accordance with § 12-508 of the Health Occupations Article shall be deleted from the Program list of interchangeable drugs concurrently and without further action by the Department.]
- (d) (C) (1) [Unless] EXCEPT AS PROVIDED UNDER PARAGRAPH (4) OF THIS SUBSECTION AND UNLESS the change is made by an emergency regulation, the