

## **UTAH PHARMACY BENEFIT MANAGER SURVEY FORM INSTRUCTIONS**

### **For Reporting Year 2025**

In accordance with Utah Code § 31A-46-301 and Administrative Code R590-282, all licensed pharmacy benefit managers (PBMs) operating in the State of Utah are required to complete and submit this annual survey form. Submit the completed survey to the Utah Insurance Department **HEALTH RESEARCH\*Notify All** using the secure file upload website at <https://forms.uid.utah.gov/fileUploads/> by **April 1st of the following year**. No other submission method is accepted. Failure to submit the survey file by the deadline may result in enforcement penalties under Utah Code § 31A-2-308 to your company. If you need assistance with completing this survey, contact the Research Analyst via email at [healthresearch@utah.gov](mailto:healthresearch@utah.gov).

If you need to create a Utah user ID, please click this link. <https://dts.utah.gov/idhelp/>

### **Survey Form Contents**

The survey form is divided into 2 sections:

Part 1. Rebates and Administrative Fees. Detailed information on all rebates and administrative fees that they collected from drug manufacturers and insurers for the previous calendar year. Include a breakdown of these amounts by each individual insurer with whom the PBM had a contract with in the previous calendar year.

Part 2: Pharmacy and Pharmacist Contracts. A list of all individual pharmacists and pharmacies that the PBM had a contract with during the previous calendar year.

### **SIGNATURE FORM**

This survey includes a business confidentiality signature form. The Utah Insurance Department collects this survey data with the intent and understanding that these records are classified as protected records under § 63G-2-305(2). The signature form is being made available from the website along with the instructions and reporting form.

The signature form should be filed along with the survey. This signature form ensures that the data is properly classified as a protected record under § 63G-2-305(2). A version of this signature form will be a standard part of the annual survey. Any representative of your company can sign the form. Please sign and date the signature form and submit an electronic copy (e.g., Adobe PDF format), along with the survey to the Utah Insurance Department. A copy will be kept on file along with your survey.

## **TERMINOLOGY USED IN THE SURVEY**

### **Administrative Fee**

Payment, other than a rebate, made directly or indirectly by a pharmaceutical manufacturer to a pharmacy benefit manager.

### **Contracting Insurer**

Insurer as defined in § 31A-22-636 with whom a PBM contracts to provide a pharmacy benefit management service.

Contracting insurers include:

- an insurer governed under accident & health insurance contracts;
- a health maintenance organization;
- a third party administrator; and
- policies offered under the Public Employees' Benefit and Insurance Program Act.

### **Pharmacist**

The same as that term is defined in § 58-17b-102.

### **Pharmacy**

The same as that term is defined in § 58-17b-102.

### **Pharmacy Benefits to Management Service**

Include any of the following services provided to a health benefit plan, or to a participant:

- (a) Negotiating the payment amount for a prescription drug; or
- (b) Administering or managing a prescription drug benefit for the plan or its participants including services such as:

- mail service pharmacy;
- specialty pharmacy;
- claims processing;
- payment of a claim;
- retail network management;
- clinical formulary development;
- clinical formulary management services;
- rebate contracting;
- rebate administration;
- participant compliance program;
- therapeutic intervention program;
- disease management program; or
- a service that is similar to, or related to, a service described in §31A-46-102, (21)(a) or (21)(b)(i) through (xii).

**Pharmacy Benefit Manager (PBM)**

Person licensed to provide a pharmacy benefits management service.

**Pharmacy Service**

Products, goods, or services provided to an individual by a pharmacy or pharmacist.

**Rebate**

A refund, discount, or other price concession paid by a pharmaceutical manufacturer to a PBM based on a prescription drug's utilization or effectiveness. "Rebate" does not include an administrative fee.

**Part 1****TOTAL AGGREGATE VALUE OF ALL REBATES AND ADMINISTRATIVE FEES  
FOR EACH CONTRACTING INSURER**

*All Data in Part 1 Should Represent the Total Utah Business for Each Pharmacy Benefit Manager Operating in Utah.*

**Total Rebates**

Enter the total dollar value of the portion of rebates retained by the PBM during the previous calendar year, as permitted under the PBM's agreement to provide pharmacy benefits management services to the contracting insurer.

**Total Rebates Retained**

Total dollar value for the rebate portion that the PBM retained during the previous calendar year under the PBM's agreement to provide pharmacy benefits management service to a contracting insurer.

**Percent Retained**

Percentage of Total Rebates that the PBM retained. Divide the value of Total Rebates Retained by the value of Total Rebates. This is calculated for you.

**Administrative Fees**

Enter the total dollar value of all administrative fees the PBM collected during the previous calendar year that are attributable to the enrollees of each contracted insurer.

**Part 2****LIST OF CONTRACTING PHARMACISTS AND PHARMACIES**

Provide a list of the business names of the individual pharmacists and pharmacies that the PBM had a contract with during the previous calendar year.



## UTAH INSURANCE DEPARTMENT

Health Research  
4315 S. 2700 West, Suite 2300  
Taylorsville, UT 84129  
[healthresearch@utah.gov](mailto:healthresearch@utah.gov)  
(801) 957-9281