

BEFORE THE ALABAMA COMMISSIONER OF INSURANCE

ALABAMA DEPARTMENT OF INSURANCE,
Complainant,
v.
EXPRESS SCRIPTS, INC.,
Alabama License No. 474143
NPN 1950572
Respondent.

Case No. P-2026-29VRL
Enforcement No. 174850

COMPLAINT

The Alabama Department of Insurance (the "Department") makes the following allegations in its complaint against the respondent, Express Scripts, Inc. ("ESI").

Disclosures Required by Rule 482-1-065.07

- 1. Pursuant to Rule 482-1-065-.07 of the Alabama Rules of Administrative procedure, a copy of Chapter 482-1-065 is attached to this complaint.
2. ESI is hereby informed of the existence of Rules 482-1-065.01 through .08 of the Alabama Rules of Administrative Procedure.

Answer Required

- 3. Please take notice that, pursuant to Rule 482-1-065.04, Rule 4(a), ESI is required to mail or hand deliver a written answer either specifically admitting or denying each allegation in the complaint. Any allegations not denied is admitted.

Parties and Nature of Action

- 4. The Department is an agency of the state of Alabama. The Alabama Commissioner of Insurance (the "Commissioner") is the chief executive of the Department. The Commissioner, utilizing the assets and personnel of the Department, is charged with the responsibility of enforcing the provisions of Title 27 of the Alabama Code.

ELECTRONICALLY FILED
Date: 3/3/2026 12:12 pm
Alabama Dept of Insurance
Legal Division
Received by: Colvin Taylor

5. ESI is a corporation organized and existing under the laws of the state of Delaware. ESI holds an Alabama license to conduct business within this state as a “pharmacy benefits manager” (“PBM”) and does, in fact, engage in such business in this state.

6. This administrative action is brought to address ESI’s violations of Title 27, Chapter 45A of the Alabama Code. Among other things, this administrative action seeks the revocation of ESI’s Alabama PBM license, seeks entry of an order directing ESI to remedy its violations of Title 27, Chapter 45A, the imposition of fines and penalties against ESI for its violations of Title 27, Chapter 45A, and other remedies specified in this complaint.

Count One

7. According to information provided to the Department by ESI, on at least eighty-six occasions since April 1, 2025, ESI has charged pharmacies or pharmacists in the state of Alabama fees for network enrollment, network participation, credentialing or recredentialing, change of ownership, submission of claims, transmission of claims, adjudication of claims, and/or claims processed through discount card programs. The charging of such fees did not occur in connection with an audit conducted pursuant to Title 34, Chapter 23, Article 8 of the Alabama Code.

8. The conduct of ESI set forth in the preceding paragraph violates §27-45A-10(4) of the Alabama Code.

9. Because of its violations of the Alabama Code set forth in Count One, pursuant to §27-45A-4(i) of the Alabama Code, ESI is subject to the suspension or revocation of its license to conduct business in the state of Alabama and to the imposition of civil penalties against it.

Count Two

10. On at least twenty-three occasions since October 1, 2025, ESI has reimbursed independent pharmacies in the state of Alabama less than the Medicaid reimbursement rate for dispensing a prescription drug.

11. The conduct of ESI set forth in the preceding paragraph violates §27-45A-13(a)(1) of the Alabama Code.

12. Because of its violations of the Alabama Code as set forth in Count Two, pursuant to §27-45A-4(i) of the Alabama Code, ESI is subject to the suspension or revocation of its license to conduct business in the state of Alabama and to the imposition of civil penalties against it.

Count Three

13. Section 27-45A-5(f)(1) of the Alabama Code provides the Commissioner may examine any books and records of a PBM providing prescription drug services in this state. Subsection (f)(2) of that provision establishes that examinations conducted by the Commissioner shall be pursuant to the same examination authority he has under Title 27, Chapter 2 of the Alabama Code.

14. Alabama Code §27-2-23(b) states:

Every person being examined, its officers, attorneys, employees, agents, and representatives, shall make freely available to the [C]ommissioner or his examiners the accounts, records, documents, files, information . . . and matters in his possession or control relating to the subject of the examination.

ALA. CODE §27-2-23(b).

15. On numerous occasions, representatives of the Department have communicated with representatives of ESI regarding complaints the Department has received from pharmacies and pharmacists located in the state of Alabama. The substance of these communications has been that the Department has received a complaint alleging ESI has violated a particular provision in Title 27, Chapter 45A of the Alabama Code and asking ESI to respond to that complaint.

16. On every occasion the Department has communicated with ESI about a complaint it has received, ESI has failed and refused to provide accounts, records, documents, files, information, and matters relevant to the substance of the complaint; instead, ESI has asserted Title 27, Chapter 45A of the Alabama Code is preempted by federal law and/or that the health

insurance plan involved in the complaint is “situated out of state”, thus depriving the Department of jurisdiction to either conduct its examination or enforce Alabama’s PBM regulatory regimen.

17. ESI’s failure to provide accounts, records, documents, files, information, and matters relevant to the substance of complaints about which the Department has sent it communications constitutes a violation of §27-2-23(b) of the Alabama Code.

18. Because of its violations of the Alabama Code as set forth in Count Three, pursuant to §27-45A-4(i) of the Alabama Code, ESI is subject to the suspension or revocation of its license to conduct business in the state of Alabama and to the imposition of civil penalties against it.

WHEREFORE, the Department asks that the Commissioner:

a) set this matter for hearing at the earliest possible date;

b) at the conclusion of that hearing, enter an order finding ESI to be in violation of the provisions of the Alabama Code as set forth in this complaint;

c) enter an order revoking ESI’s license to conduct business in the state of Alabama or, in the alternative, suspending ESI’s license to conduct business in the state of Alabama until such time as it demonstrates a willingness to comply with this state’s PBM regulatory regimen; and,

d) enter an order imposing civil penalties against ESI for its violations of the Alabama Code.

The Department asks for any additional or different relief to which it may be entitled.

/s/ Vincent R. Ledlow
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ALABAMA DEPARTMENT OF INSURANCE
ADMINISTRATIVE CODE

CHAPTER 482-1-065
PROCEDURAL RULES GOVERNING ADMINISTRATIVE HEARINGS

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482-1-065-.01 Purpose.

(1) This Chapter is to reduce to writing the procedural rules governing hearings that have, many times, been in effect for years. It is hoped that the party subjected to a hearing will, if in possession of these rules, have a better idea of what the procedure is and what to expect at a hearing. It is also hoped that these rules will promote uniformity for future hearings.

(2) A hearing under the Insurance Code is not necessarily conducted in the same manner as in a court of law, even though the Commissioner, or his or her delegated authority, both of which are hereinafter sometimes referred to as "hearing officer," acts in a quasi-judicial capacity, and is not subject to the Alabama Rules of Civil Procedure or Rules of Evidence, except as herein indicated otherwise. Therefore, the latitude allowed a hearing officer is not meant to be unduly restricted by these rules.

Author: Commissioner of Insurance

Statutory Authority: Code of Ala. 1975, §27-2-17.

History: New Rule: June 11, 1979, Effective July 31, 1979.

Revised: July 19, 1985, Effective August 1, 1985. **Revised:** June 5, 1992, Effective July 1, 1992. **Revised:** April 21, 2003, Effective May 1, 2003. Filed with LRS April 21, 2003. Rule is not subject to the Alabama Administrative Procedure Act.

482-1-065-.02 Authority.

The authority for the promulgation of this chapter is under the provisions of Sections 27-2-7 and 27-2-17, Code of Alabama 1975.

Author: Commissioner of Insurance

Statutory Authority: Code of Ala. 1975, §§27-2-7, 27-2-17.
History: New Rule: June 11, 1979, Effective July 31, 1979.
Revised: July 19, 1985, Effective August 1, 1985. **Revised:** June 5, 1992, Effective July 1, 1992. **Revised:** April 21, 2003, Effective May 1, 2003. Filed with LRS April 21, 2003. Rule is not subject to the Alabama Administrative Procedure Act.

482-1-065-.03 Definitions.

The following definitions shall apply for purposes of this chapter:

(a) Commissioner. The Alabama Commissioner of Insurance. Said term may also refer to the person to whom authority has been delegated pursuant to Section 27-2-8, Code of Ala. 1975.

(b) Department. The Alabama Department of Insurance.

(c) Hearing Officer. The Commissioner or any deputy, assistant, examiner or employee of the Department to whom authority has been delegated to conduct a hearing and other proceedings pertaining thereto.

(d) Hearing Reporter. The Court Reporter engaged by the Department to transcribe the proceedings of the hearing.

(d) Insurance Code. Title 27, Code of Ala. 1975, commencing with Section 27-1-1.

Author: Commissioner of Insurance

Statutory Authority: Code of Ala. 1975, §§27-2-7, 27-2-17.

History: New Rule: April 21, 2003, Effective May 1, 2003. Filed with LRS April 21, 2003. Rule is not subject to the Alabama Administrative Procedure Act.

482-1-065-.04 Rules Of Procedure.

Rule 1. Scope of Rules.

(a) These rules shall be applicable for all hearings conducted by a hearing officer under the provisions of any section in the Alabama Code requiring a hearing and also for any hearing held by the Commissioner under his or her discretionary or implied powers to hold hearings.

(b) No rule or portion of these rules may be waived without express written permission of the hearing officer under the provisions of Section 27-2-28. Waiver may also be given orally in open hearing.

(c) If the hearing officer is required to decide a matter during a hearing not covered by these rules or by any provision of the Insurance Code or related statutes, he or she shall decide the matter, as much as practical, under the provisions of the Alabama Rules of Civil Procedure for Circuit Court non-jury actions.

(d) This rule is not to be interpreted as requiring the formal application of rules under the Alabama Rules of Civil Procedure, or restricting the authority of the hearing officer in deciding any matter in the manner which, in his or her opinion, the ends of justice would be met or restricting any evidence, which in his or her opinion, needed to be brought out. The opinion of the hearing officer shall be paramount so long as it does not conflict with these rules, statutes, court decisions or regulations.

(e) These rules shall apply to rate hearings and orders under the provisions of Chapter 13 of Title 27 of the Insurance Code.

(f) Where a conflict exists between this chapter and any Alabama statute, the statute shall prevail.

Rule 2. Notice of Hearing.

(a) Hearings on Complaints.

(1) Any hearing to be held, whereby any person, insurance producer, service representative, insurer, company, or any other entity could be subjected to a penalty of suspension or revocation of license or certificate of authority or a monetary penalty or any other penalty or supervision, shall commence with a complaint.

(2) The complaint shall conform to the provisions of Section 27-2-18, and every allegation shall be simple, concise, and direct. No technical forms of pleading or motions are required.

(3) Any person, other than the Department, demanding a hearing before the Commissioner shall make such demand by filing an affidavit with the Commissioner. Said affidavit shall contain sufficient factual information to show a reasonable cause to believe that violations of the Insurance Code have occurred or that the subject matter otherwise comes under the jurisdiction of the Commissioner and that a hearing is appropriate. The Department may investigate the allegations and initiate a complaint in the name of the Department. Otherwise, the affidavit shall constitute the complaint which the Commissioner shall serve upon the defendant with an

appropriate summons or notice. No affidavit is necessary when the Department institutes the action.

(b) Hearings on Matters other than Complaints. Notice of hearing scheduling a hearing on a matter other than a complaint or matter under Paragraph (a), if requested by a person, insurer, company, or other entity, other than the Department, shall set out in the notice the identity of the party requesting the hearing and otherwise conform to the requirements of Section 27-2-18.

(c) Amendment of Complaints and Notices. Any complaint or notice of hearing may be amended at any time prior to the hearing, but the time required by law to run prior to the hearing shall start again from the date of receiving the amended complaint or notice.

Rule 3. Service of Complaints and Notices.

(a) Complaints and notices of hearings shall be sent by registered or certified mail in the manner prescribed under the Insurance Code. Evidence that the complaint or notice was placed in the United States mail shall be prima facie that proper notice was given.

(b) As the Insurance Code requires every insurance producer and service representative to promptly notify the Department of a change of address, a complaint or notice of hearing sent to such a licensee's last address of record at the Department shall be prima facie evidence that proper service and notice was given.

(c) Any insurance producer or service representative refusing to accept registered or certified mail sent by the Department shall be deemed to have received said mail and be familiar with its contents.

(d) The willful refusal or failure to accept registered or certified mail, identified as being sent by the Department, on the part of any licensed producer, service representative, adjuster, or insurer, shall be deemed a willful violation of a regulation.

(e) Where the individual or entity to be served with a notice of hearing or complaint is not a producer or service representative subject to the provisions of §27-7-17(b), service of the notice of hearing or complaint shall be made using the same methods as are available in Circuit Court in accordance with the Alabama Rules of Civil Procedure.

Rule 4. Answer Required After Complaint Issued.

(a) With the exception of hearings called under the provisions of Sections 27-2-33 through 27-2-38, all complaints shall state that the accused is required to mail or hand deliver a written answer either specifically admitting or denying each allegation in the complaint, and that any allegations not denied are admitted. The Department shall not be required to prove any allegation so admitted.

(b) The answer shall be mailed or delivered to the Department within thirty (30) days from the date the accused received the complaint, or every allegation of the complaint shall be deemed admitted by default.

Rule 5. Hearings to be scheduled after Receipt of Answer.

(a) Upon receiving the answer as required under Rule 4, the hearing officer shall schedule a hearing to determine those issues still in controversy after receipt of the answer.

(b) If the accused admits in writing every allegation of the complaint, the hearing officer may, without a hearing, take any necessary or appropriate action allowed under the law the same as if he or she had found the violations upon an evidentiary hearing.

(c) The hearing shall be scheduled at least twenty (20) days after the answer is filed with the Department. The notice of hearing shall set out those issues still to be determined.

(d) This rule only applies to those complaints falling under the provisions of Rule 4.

Rule 6. Discovery.

(a) Any party to any hearing conducted under these rules shall be allowed discovery to include depositions, use of subpoenas and subpoenas duces tecum to compel attendance of witnesses and production of documents.

(b) Generally, the different methods of discovery allowed by the Alabama Rules of Civil Procedure shall be allowed, but it is incumbent upon the parties to complete discovery prior to the hearing.

(c) Depositions and requests for admissions of the Commissioner or any employee of the Department shall only be had at the discretion of the hearing officer. Any party requesting depositions or admissions from any departmental employees must demonstrate that the ends of justice shall not be met unless this discovery is allowed.

Rule 7. Hearings.

(a) The Parties Conducting the Hearing. The Commissioner, or his or her delegated authority, shall preside over the hearing as hearing officer. So far as practical, the Assistant Attorneys General or Deputy Attorney General assigned to the Department shall present the case on behalf of the Department, but questions from certain experts representing either party may be allowed if in the opinion of the hearing officer the hearing may be expedited by such questioning.

(b) Representation. The accused may represent himself or herself or be represented by legal counsel.

(c) Dismissing the Hearing. If, at any time prior to or during the hearing, the hearing officer or the Assistant Attorney General or Deputy Attorney General representing the Department is of the opinion that the evidence is insufficient to prove the allegations in the complaint, or any portion thereof, or that the complaint was brought in bad faith or for any other reason requiring that the ends of justice be met to stop or not convene the hearing, then the complaint or any portion of the complaint meeting the above criteria shall be dismissed.

(d) Burden of Proof -- General Rule. As in civil cases at law, as a general rule, the party asserting an affirmative issue alleged in the pleadings has the burden of proving said issue by a preponderance of the evidence.

(e) Burden of Proof -- Negative Allegation. The party asserting a negative allegation has the burden of proving said negation by only slight evidence, which then shifts to the other party the burden of proving said issue by a preponderance of the evidence.

Rule 8. Transcription of Hearing.

(a) The hearing reporter shall make a full stenographic record of every hearing.

(b) The transcript shall be a part of the record of the hearing. A copy of the transcript shall be furnished to any party to such hearing at the request and expense of such party.

(c) The Commissioner shall be the custodian of all exhibits introduced at a hearing, but he or she shall furnish copies, so far as practical, to any party to the hearing, requesting same.

Rule 9. Evidence.

(a) The only evidence that the hearing officer shall consider in making a finding of fact shall be sworn testimony, exhibits accepted in the hearing, and admitted pleadings.

(b) Hearsay Evidence. Hearsay testimony shall be allowed in any hearing so long as it has probative value, but hearsay evidence alone shall not be sufficient to prove any material fact, unless such hearsay evidence would be admissible in a non-jury Civil Action in the Circuit Courts of the State.

(c) Affidavits. Affidavits shall be admissible in any hearing so long as they have probative value and the affiant, for reasons of impossibility or impracticality, cannot be present for testimony at the hearing. The burden of impossibility or impracticality shall be upon the offeror of the affidavit. No material fact shall be proven by affidavit alone.

(d) Depositions. The right of introducing evidence by deposition at a hearing shall be the same as is available in the Circuit Courts in accordance with the Alabama Rules of Civil Procedure.

(e) Official Notice. All statutes of the State of Alabama and all published rules, regulations and informational bulletins issued by the Department shall be deemed admissible by mere identification of the State statute, published rules, regulations and informational bulletins.

(f) Admissibility. All evidence, whether documentary or ore tenus, to be admissible, shall be germane, material and relevant to the issues brought out by the complaint, answer or notice of hearing. Evidence that might otherwise be germane, material or relevant, if found to be repetitious, may, at the discretion of the hearing officer be disallowed.

(g) Documentary Evidence. Any document or a copy of said document shall be admissible if the document or copy shall be proven to be a part of the business record of any party, person, or company kept in the ordinary course of the business of said party, person or company. The document shall also be required to meet requirements of Rule 9(f).

(h) Witnesses.

(1) The hearing officer may compel any person to testify under oath at any hearing.

(2) Any party to a hearing may compel any witness to testify under oath at the hearing, except that the Commissioner, or his or her delegated representative, and the Assistant Attorney General or Deputy Attorney General representing the Department shall be required to testify only if it is demonstrated that the ends of justice would not be met without their sworn testimony.

(3) The Commissioner may compel the testimony of any witness refusing to obey his or her subpoena pursuant to Section 27-2-26(c).

Rule 10. Continuance of Hearing.

Any continuance of a hearing granted shall only be by express written consent of the hearing officer for good cause shown.

Rule 11. Withdrawing of Complaint.

(a) When any person, company, insurer or other entity has complained to the Commissioner of an alleged violation of any matter under the Commissioner's jurisdiction, by affidavit and requested a hearing, then the complaining person shall not be allowed to withdraw the complaint and affidavit without the express written consent of the hearing officer.

(b) If the complaining party is a person or insurer currently holding a license or certificate of authority from the Department, and the request to withdraw the complaint and affidavit is refused, then the party shall, at the request of the Commissioner, render any and all aid necessary to include offering sworn testimony and making available documents to prove the facts alleged in the affidavit. Failure of the complaining party to act in good faith to assist in proving the allegations in the affidavit may subject the above to a hearing for the willful violation of a regulation, under the provisions of Section 27-2-17(e).

Rule 12. Orders.

(a) All orders issued either pursuant to a hearing, or from any other cause, shall conform to the provisions of Sections 27-2-18 and 27-2-31. In addition to the above requirements, if the person presiding over the hearing is other than the Commissioner, he or she shall be so identified in the order.

(b) All orders issued pursuant to hearings shall contain specific findings of fact tending to prove or disprove each and every issue required under law to be proven or disproven. No penalty shall be imposed by the order unless the findings of fact prove the material issues required under law to be proven to sustain the alleged violations.

(c) For orders on issues other than complaints, the findings of fact must show that there is compliance with the statutory provisions required to be found. No approval of matters such as reinsurance, mergers, and acquisitions, shall be made without the appropriate findings of fact being made, as required under the law.

(d) Whoever presides over a hearing, either the Commissioner or his or her delegated representative, shall be entirely responsible for the findings of fact and the appropriate penalties, approvals, findings of innocence or guilt or disapprovals of the matter at hand. He or she shall impose the correct penalty, under the law as is necessary and required after presiding over the entire hearing, or make any other order or ruling required by the appropriate statute under which the hearing was held.

(e) If the person presiding over the hearing is the delegated representative of the Commissioner, he or she shall state in the order the following words and also sign the order: "DONE AND ORDERED, UNDER THE DELEGATED AUTHORITY OF THE COMMISSIONER OF INSURANCE, THIS (DATE).

JOHN DOE
TITLE
HEARING OFFICER"

Rule 13. Penalties.

(a) If the findings of fact prove the material issues required under law to be proven to sustain the alleged violations, the order shall impose the penalty allowed under the statute that, in the opinion of the hearing officer, would be in the best interest of the citizens of this State.

(b) An assessment of penalty, upon a finding of guilt, is not mandatory, but the hearing officer shall instead take into account the seriousness of the violation, willfulness on the part of the actor, attempts to make restitution, and any other factor deemed by him or her germane in deciding the correct penalty.

(c) If there is a finding of guilt of any person, as defined in Section 27-1-2(3), not licensed at the time of the order, the penalty may be suspension or revocation of the eligibility to hold or apply for licenses.

Rule 14. Rehearings.

(a) Requests for rehearings shall conform to the provisions of Section 27-2-30(g). Rehearings shall not be granted unless it is demonstrated that new evidence not otherwise available at the first hearing should be taken and that this evidence would materially affect the findings of the hearing officer, or that it is otherwise required in order to meet the ends of justice. The determination of whether to convene a new hearing shall only be made by the person signing the order at the conclusion of the hearing.

(b) This rule shall not be interpreted as restricting the power or authority of the Commissioner to convene a new hearing on the same issue or matters as have been brought out in previous hearings, if the ends of justice so merit.

Rule 15. Default.

(a) When a complaint is deemed admitted pursuant to Rule 4, the hearing officer may, without a hearing, take any necessary or appropriate action allowed under the law the same as if he or she had found the violations upon an evidentiary hearing.

(b) The hearing officer may set aside an order entered pursuant to Rule 15(a) upon motion of the accused filed not later than thirty (30) days after the date of said order, which motion shall allege and prove, by attached affidavit, a meritorious defense to the allegations of the complaint.

(c) The hearing officer shall enter an order either granting such motion and allowing the accused ten (10) days to file an answer pursuant to Rule 4, or denying the motion, setting forth the reasons therefor.

(d) An order denying a timely filed motion pursuant to this rule may be appealed as provided in Rule 482-1-065-.06.

Rule 16. Emergency Action.

(a) Whenever it may appear to the Commissioner, either upon investigation or otherwise, that any person, as defined in Section 27-1-2(3), Code of Ala. 1975, has engaged in, is engaged in, or is about to engage in any act, practice or transaction which is prohibited by Title 27, Code of Ala. 1975, or by any rule, regulation or order of the Commissioner promulgated or issued pursuant to said title or which is declared to be unlawful under said title, the Commissioner may, at his or her discretion, issue an order, if he or she deems it to be appropriate in the public interest or for the protection of policyholders or the citizens of this State, prohibiting such person from conducting such act, practice or transaction.

(b) Notwithstanding any other provision of this chapter, in situations where persons, as defined in Section 27-1-2(3) of the Code of Ala. 1975, otherwise would be entitled to a hearing prior to an order, the Commissioner may:

(1) Issue a proposed order to be effective upon a later date without hearing, unless persons subject to the order request a hearing within ten (10) days after receipt of the proposed order.

(2) Issue an order to be effective immediately, if the Commissioner has reasonable cause to believe that an act, practice or transaction is occurring or is about to occur and that the situation constitutes a situation therefore imperatively requiring emergency action. The emergency order shall contain findings to this effect and reasons for the determination.

(c) Any order issued pursuant to this rule shall contain or be accompanied by a notice of opportunity for hearing which clearly explains that a hearing will be held if and only if a person subject to the order requests a hearing within ten (10) days of receipt of the order and notice.

(d) Any order or notice issued pursuant to this rule shall conform to the provisions of Section 27-2-18, Code of Ala. 1975, and shall be served in the same manner as complaints and according to Rule 3.

(e) The failure to request a hearing shall constitute a waiver of any provisions of law for a hearing. However, any person against whom an emergency order has been entered pursuant to this rule shall be entitled to apply for a hearing for relief from such order in the manner provided in Section 27-2-28, Code of Ala. 1975, and these rules.

Author: Commissioner of Insurance

Statutory Authority: Code of Ala. 1975, §§27-2-17, 27-2-18, 27-2-26, 27-2-28, 27-2-30, 27-2-31.

History: New Rule: June 11, 1979, Effective July 31, 1979.

Revised: July 19, 1985, Effective August 1, 1985. **Revised:** June 5, 1992, Effective July 1, 1992. **Revised:** April 21, 2003, Effective May 1, 2003. Filed with LRS April 21, 2003. Rule is not subject to the Alabama Administrative Procedure Act.

482-1-065-.05

Communications with Hearing Officers.

The attorneys for the parties, including the attorney for the Department prosecuting or defending the case before a hearing officer, are forbidden from discussing such case with the hearing officer outside the presence of the other party's counsel. This prohibition shall not apply in the case of a hearing called for the purpose of adopting, revising, amending, or repealing a regulation.

Author: Commissioner of Insurance

Statutory Authority: Code of Ala. 1975, §27-2-17.

History: New Rule: June 11, 1979, Effective July 31, 1979.

Revised: July 19, 1985, Effective August 1, 1985. **Revised:** June 5, 1992, Effective July 1, 1992. **Revised:** April 21, 2003, Effective May 1, 2003. Filed with LRS April 21, 2003. Rule is not subject to the Alabama Administrative Procedure Act.

482-1-065-.06 Appeal From Hearing Officer's Ruling.

(1) Any party or any person whose pecuniary interests are directly and immediately affected by any order of the Commissioner (or refusal or failure to issue any order) may appeal to the appropriate Circuit Court pursuant to Section 27-2-32.

(2) (a) An appeal from an order of a hearing officer other than the Commissioner must first be made to the Commissioner, who shall either affirm, modify, or rescind the action theretofore taken.

(b) The appeal to the Commissioner shall be on the record, for which notice of appeal must be filed with the Commissioner within thirty (30) days from the date of the order from which appealed. The Commissioner shall give notice to all parties of the date on which the transcript and record are completed and filed.

(c) The Appellant may serve and file a brief within fourteen (14) days after the date of the Commissioner's notice, in which brief oral argument may be requested.

(d) The Appellee may serve and file a brief within fourteen (14) days after service of the brief of the Appellant, in which brief oral argument may be requested.

(e) The Commissioner for good cause shown may, upon motion, enlarge the time prescribed by this rule.

(f) The Commissioner may, upon the agreement of all parties, dispense with the filing of briefs or may provide for a different briefing schedule.

Author: Commissioner of Insurance

Statutory Authority: Code of Ala. 1975, §§27-2-17, 27-2-32.

History: New Rule: June 11, 1979, Effective July 31, 1979.

Revised: July 19, 1985, Effective August 1, 1985. **Revised:** June 5, 1992, Effective July 1, 1992. **Revised:** April 21, 2003, Effective May 1, 2003. Filed with LRS April 21, 2003. Rule is not subject to the Alabama Administrative Procedure Act.

482-1-065-.07 Distribution.

A copy of this chapter shall accompany every complaint or notice of hearing and a notation of the existence of the rules shall be made in the complaint or notice of hearing.

Author: Commissioner of Insurance

Statutory Authority: Code of Ala. 1975, §27-2-17.

History: New Rule: June 11, 1979, Effective July 31, 1979.
Revised: July 19, 1985, Effective August 1, 1985. **Revised:** June 5, 1992, Effective July 1, 1992. **Revised:** April 21, 2003, Effective May 1, 2003. Filed with LRS April 21, 2003. Rule is not subject to the Alabama Administrative Procedure Act.

482-1-065-.08 Effective Date.

This chapter shall become effective upon its approval by the Commissioner of Insurance and upon its having been on file as a public document in the office of the Secretary of State for ten days.

Author: Commissioner of Insurance

Statutory Authority: Code of Ala. 1975, §27-2-17.

History: New Rule: June 11, 1979, Effective July 31, 1979.

Revised: July 19, 1985, Effective August 1, 1985. **Revised:** June 5, 1992, Effective July 1, 1992. **Revised:** April 21, 2003, Effective May 1, 2003. Filed with LRS April 21, 2003. Rule is not subject to the Alabama Administrative Procedure Act.

BEFORE THE ALABAMA COMMISSIONER OF INSURANCE

ALABAMA DEPARTMENT OF INSURANCE,)	
)	
Complainant,)	
)	
v.)	Case No. P-2026-29VRL
)	Enforcement No. 174850
)	
EXPRESS SCRIPTS, INC.,)	REQUEST FOR PRODUCTION AND
Alabama License No. 474143)	INTERROGATORIES
NPN 1950572)	
)	
Respondent.)	
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Pursuant to Rule 482-1-065-.04(6) of the Alabama Administrative Code and Rules 26, 33, and 34 of the Alabama Rules of Civil Procedure, the Alabama Department of Insurance hereby requests that the respondent, Express Scripts, Inc. (“ESI”) produce for inspection and copying the documents described below and that it respond to the interrogatories set forth below. Inspection and copying will take place at **8:30 a.m. on April 22, 2026**, at the offices of the Alabama Department of Insurance (the “Department”), the address of which is set forth in the signature block below. In the alternative, the Respondent may comply with this request for production by delivering copies of the documents in question to counsel for the Department on or before the date and time for compliance. Responses to the Department’s interrogatories are due as set forth in the Alabama Rules of Civil Procedure.

Documents to be Produced

1. An organizational chart showing all lines of authority from Jen Sparks-Boyce through the Chief Executive Officer of ESI. The organizational chart will set forth, without abbreviations, the names and titles of all individuals who appear on that organizational chart and their contact information.

2. An organizational chart showing all lines of authority from Amira Walker through the Chief Executive Officer of ESI. The organizational chart will set forth, without abbreviations, the names and titles of all individuals who appear on that organizational chart and their contact information.

3. All materials utilized by ESI in educating, training, instructing, guiding, informing, or directing its employees regarding compliance with Alabama’s pharmacy benefit manager regulatory regime, including, but not limited to, the preparation of responses (such as those attached to this document as Exhibits A and B) to regulatory inquiries and whether such statutes are valid and enforceable.

Interrogatories

1. Please set forth all lines of authority from Jen Sparks-Boyce through the Chief Executive Officer of ESI. Your response should include, without abbreviations, the names and titles of all individuals who appear on that organizational chart and their contact information.

2. Please set forth all lines of authority from Amira Walker through the Chief Executive Officer of ESI. The organizational chart will set forth, without abbreviations, the names and titles of all individuals who appear on that organizational chart and their contact information.

/s/ Vincent R. Ledlow

Vincent R. Ledlow
Assistant Attorney General
Alabama Department of Insurance
201 Monroe Street
Suite 502
Montgomery, Alabama 36106
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*Attorney for the Alabama Department of
Insurance*

EXHIBIT A



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August 21, 2025

Submitted via email (Company Responses/a.insurance.alabama.gov)

Stephanie Tompkins
Insurance Consumer Specialist
Alabama Department of Insurance

Re: ALDOI File #166361

Dear Ms. Tompkins,

This letter is in response to your correspondence regarding the Complaint ("Complaint") filed by Mike DeLafosse on behalf of Jones Drugs ("Provider"). The Complaint alleged that Express Scripts, Inc.'s ("ESI") business practices do not comport with Alabama law.

As an initial matter, the issues raised in this Complaint are preempted by federal law. This Complaint involves Medicare Part D and TRICARE networks and are therefore out of scope of Alabama state law.

ESI provides the following information on Medicare Part D preemption:

As previously noted, Medicare Part D plans are governed by federal law and therefore not subject to certain state regulations. The Medicare Part D express preemption provision establishes a broad rule of preemption. Unless a state law relates to plan licensure or solvency, the law is preempted if it attempts to regulate Medicare Part D plans. *See* 42 U.S.C. § 1395w-112(g) (adopting as to Part D Plan sponsors, the provisions of 42 U.S.C. §§ 1395w-24(g) and 1395w-26(b)(3)); 42 C.F.R. § 423.440(a).

CMS has made it clear that federal preemption is broad, meaning state laws are preempted if they go beyond state licensure and solvency requirements. In the Final Rule, CMS also made it clear that a state could not use a state licensing law to impose requirements on a Medicare Part D plan other than basic, ministerial requirements necessary to obtain state licensure. They provided:

"We also recognized that while the Congress specifically stated that State licensure and solvency laws would not be preempted, this did not mean that States could condition licensure on a sponsor meeting requirements unrelated to what we would consider licensure requirements. We also addressed this issue in the Medicare Advantage proposed rule, explaining, 'We believe that the exception for State laws that relate to 'State licensing' must be limited to State requirements for becoming State licensed, and would not extend to any requirement that the State might impose on licensed health plans that-absent Federal preemption-must be met as a condition for keeping a State license. If a State requirement could be considered to relate to State



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licensing simply because the State could revoke a health plan's license for a failure to meet the requirement, this would mean that States could impose virtually any requirement they wished to impose without the requirement being preempted. ... Because we believe that it is clear that the Congress intended to broaden the scope of Federal preemption, not to narrow it, we also believe that the exception for laws relating to State licensing must be limited to requirements for becoming State licensed (such as filing articles of incorporation with the appropriate State agency, or satisfying State governance requirements), and not extended to rules that apply to State licensed health plans.” 70 Fed. Reg. 4194, 4319 (Jan. 28, 2005).

Several courts have recognized this broad Federal preemption. For example, the Eighth Circuit in *PCMA v. Rutledge*, found that two Arkansas provisions were preempted because they intruded on areas that are regulated by CMS in the Part D space. *PCMA v. Rutledge*, 891 F.3d 1109, 1113, 1114 (8th Circuit 2018)(This finding was left intact by the Supreme Court in its review of *PCMA v. Rutledge* 592 U.S. 80; 141 S. Ct. 474). In addition, in *PCMA v. Mulready*, the Tenth Circuit also upheld Medicare preemption. *PCMA v. Mulready*, 78 F. 4th 1183 (10th Cir. 2023) The court found that the Any Willing Provider (AWP) laws in Oklahoma were preempted because they were not relating to licensing or solvency of the plan. *Id at 1208*. The Tenth Circuit further stated “collectively, the Part D regulations – which govern universal access only to plans’ standard networks and which give plan discretion to select preferred providers within their networks – overlap with Oklahoma’s AWP provision and thus would preempt it.” *Id*. We submit that the Medicare Part D networks at issue are preempted from state regulations based upon the confirmed broad federal preemption governing Medicare Part D.

ESI provides the following information on the TRICARE preemption:

The TRICARE healthcare program is the U.S. Department of Defense’s healthcare program for uniformed service members and their families. Generally speaking, to the extent that TRICARE issues are inconsistent with provisions of Alabama law, those laws are generally inapplicable to the TRICARE program.

By federal law, “the Secretary of Defense shall have responsibility for administering the TRICARE program and making any decision affecting such program.” 10 U.S.C. § 1073(a)(2). The federal statute authorizing the TRICARE program directs the Secretary of Defense to enter into contracts with private companies to deliver healthcare services to TRICARE program beneficiaries. See 10 U.S.C. § 1073a(a). The statute also contains a preemption provision, providing that state laws shall not apply to such contracts to the extent that:

- (1) the State or local law or regulation is inconsistent with a specific provision of the contract, or a regulation promulgated by the Secretary of Defense or the administering Secretaries pursuant to [10 USCS §§ 1071 et seq.]; or
- (2) the preemption of the State or local law or regulation is necessary to implement or administer the provisions of the contract or to achieve any other important Federal interest.



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10 U.S.C. § 1103(a); see also *Cty. Bd. v. Express Scripts Pharm., Inc.*, 996 F.3d 243, 256 (4th Cir. 2021) (finding that Express Scripts had raised a colorable preemption defense under 10 U.S.C. § 1103(a)).

Furthermore, ESI does not contend that TRICARE or Medicare Part D plans require a fee to be paid in order to be included in ESI's network. Credentialing and re-credentialing are required to participate in those networks, consistent with federal law. Credentialing fees are applied to offset the administrative efforts necessary to screen and evaluate the applications to support the maintenance and integrity of Express Scripts' network. If provider would like to forgo participation in the Medicare Part D and TRICARE networks, the fee can be waived.

We hope this information is helpful to the Department's inquiry. Please let us know if you have any further questions.

Sincerely,

Jen Sparks-Boyce
Senior Manager
Express Scripts, Inc.
Email: Jen.Sparks-Boyce@express-scripts.com



December 11, 2025

Submitted via email (pbmcompliance@insurance.alabama.gov)

State of Alabama Department of Insurance
Consumer Services Division
201 Monroe Street, Suite 502
Post Office Box 303351
Montgomery, Alabama 36130-3351

Re: AL DOI File #168029

PBM Compliance Division,

This letter is in response to your correspondence regarding the Complaint (“Complaint”) filed by Loxley Drugs (“Provider”). The Complaint alleged that Express Scripts, Inc.’s (“ESI”) business practices do not comport with Alabama law.

We reviewed the claims identified in the Complaint and confirmed that the member is a beneficiary of a client that is situated out of state and is, therefore, out of scope for this Alabama law.

We hope this information is helpful to the Department’s inquiry. Please let us know if you have any further questions.

Sincerely,

Amira Walker
Advisor – Regulatory Compliance
Express Scripts, Inc.
Amira.Walker@evernorth.com

BEFORE THE ALABAMA COMMISSIONER OF INSURANCE

ALABAMA DEPARTMENT OF)
INSURANCE,)
)
Complainant,)
)
v.)
)
EXPRESS SCRIPTS, INC.,)
Alabama License No. 474143)
NPN 1950572)
)
Respondent.)
)
_____)

Case No. P-2026-29VRL
Enforcement No. 174850

NOTICE OF DEPOSITION

Pursuant to Rule 482-1-065-.04(6) of the Alabama Administrative Code and Rules 26 and 30 of the Alabama Rules of Civil Procedure, the Alabama Department of Insurance hereby gives notice it will take the deposition of **Amira Walker**, Advisor – Regulatory Compliance with Express Scripts, Inc. The deposition will be taken on oral examination and will be recorded by stenographic means. The deposition will begin promptly at **8:30 a.m. on May 12, 2026**, and may be continued from time to time. The deposition will be taken at the following location:

Alabama Department of Insurance
201 Monroe Street
Suite 502
Montgomery, Alabama 36106

/s/ Vincent R. Ledlow
Vincent R. Ledlow
Assistant Attorney General
Alabama Department of Insurance
201 Monroe Street
Suite 502
Montgomery, Alabama 36106
(334) 240-4413
vincent.ledlow@insurance.alabama.gov
Attorney for the Alabama Department of Insurance