

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 643 Session of 2009

INTRODUCED BY DeLUCA, ARGALL, BAKER, BARBIN, BOYD, CALTAGIRONE, CARROLL, COHEN, CRUZ, DePASQUALE, DONATUCCI, FRANKEL, GALLOWAY, GEORGE, GOODMAN, HALUSKA, HENNESSEY, JOSEPHS, KORTZ, KULA, MANDERINO, McILVAINE SMITH, MELIO, MILLARD, MUNDY, MURT, M. O'BRIEN, PALLONE, PARKER, PYLE, READSHAW, SIPTROTH, K. SMITH, STURLA, WALKO, YUDICHAK, GIBBONS AND HANNA, FEBRUARY 27, 2009

REFERRED TO COMMITTEE ON INSURANCE, FEBRUARY 27, 2009

AN ACT

1 Establishing One Pennsylvania, a program to consolidate and  
2 unify procedures and requirements for the administration of  
3 all Commonwealth-funded, Commonwealth-administered and  
4 Commonwealth-supported prescription drug programs; and  
5 providing for reimbursement for pharmaceutical services.

6 The General Assembly of the Commonwealth of Pennsylvania  
7 hereby enacts as follows:

8 Section 1. Short title.

9 This act shall be known and may be cited as the One  
10 Pennsylvania Act.

11 Section 2. Definitions.

12 The following words and phrases when used in this act shall  
13 have the meanings given to them in this section unless the  
14 context clearly indicates otherwise:

15 "Adjudication."

16 (1) Except as provided in paragraph (2), an action taken  
17 by the Office of Administration, the Secretary of

Administration or a prescription drug plan pursuant to this act that constitutes an adjudication as defined by 2 Pa.C.S. § 101 (relating to definitions), including any of the following:

(i) A decision to allow a provider to participate in a prescription drug plan or to suspend, restrict or revoke participation by a provider in a prescription drug plan.

(ii) A decision by the Office of Administration to include or exclude a medication from the formulary or preferred drug list.

(iii) The establishment of provider reimbursement rates and formulas.

(iv) A decision to grant or deny prior authorization for the dispensing of prescription drugs or to approve or disapprove the dispensing of drugs not included on the formulary or preferred drug list.

(v) An action taken by the program based upon audits of claims submitted for reimbursement by providers.

(2) An action taken by the program with respect to determining recipient eligibility shall not be deemed an adjudication by the Office of Administration pursuant to its authority under this act. Eligibility shall be determined by the agency or entity under whose authority the prescription drug plan is authorized.

"Alerts." Electronic communications between the Office of Administration or the pharmacy benefits consolidation program and pharmacies providing information pertaining to the implementation of this act, including any of the following:

(1) Information regarding the preferred drug lists.

- 1 (2) Preferred drug lists.
- 2 (3) Drug utilization review.
- 3 (4) Prior authorization.
- 4 (5) Disease management programs.
- 5 (6) Claims submission and adjudication procedures.
- 6 (7) Audits.
- 7 (8) Pharmacy and patient education.

8 "Best price." As defined under section 1927(c) of the Social  
9 Security Act (49 Stat. 620, 42 U.S.C. § 1396r-8(c)).

10 "Medical assistance program." The program established  
11 pursuant to Subarticle (f) of Article IV of the act of June 13,  
12 1967 (P.L.31, No.21), known as the Public Welfare Code.

13 "Medicare recipient." An individual residing in this  
14 Commonwealth who receives benefits under Part A of Subchapter  
15 XVIII of Chapter 7 of the Social Security Act (49 Stat. 620, 42  
16 U.S.C. § 301 et seq.) or who is enrolled under Part B, C or D of  
17 Subchapter XVIII.

18 "Office of Administration." The Office of Administration of  
19 the Commonwealth.

20 "Pharmaceutical manufacturer." A manufacturer as defined by  
21 section 1927(k)(5) of the Social Security Act (49 Stat. 620, 42  
22 U.S.C. § 1396r-8(k)(5)).

23 "Pharmacy." A pharmacy licensed pursuant to the act of  
24 September 27, 1961 (P.L.1700, No.699), known as the Pharmacy  
25 Act.

26 "Pharmacy Act." The act of September 27, 1961 (P.L.1700, No.  
27 699), known as the Pharmacy Act.

28 "Pharmacy services." The provision of health care services  
29 defined as the practice of pharmacy by the act of September 27,  
30 1961 (P.L.1700, No.699), known as the Pharmacy Act.

1 "Preferred drug list." A list of prescription medications  
2 covered under a prescription drug plan that may be dispensed by  
3 a prescription drug plan without prior authorization, subject to  
4 applicable limits and conditions.

5 "Prescription drug." A covered outpatient drug as defined by  
6 section 1927(k)(2) of the Social Security Act (49 Stat. 620, 42  
7 U.S.C. § 1396r-8(k)(2)).

8 "Prescription drug plan." A Commonwealth operation or funded  
9 pharmaceutical program that pays or reimburses for prescription  
10 drugs dispensed to individuals enrolled in the program that is  
11 supported directly or indirectly, in whole or in part, by  
12 Commonwealth public funds, including, but not limited to, all of  
13 the following:

14 (1) The medical assistance program, the Special  
15 Pharmaceutical Benefit Program in the Department of Public  
16 Welfare.

17 (2) The Pharmaceutical Assistance Contract for the  
18 Elderly (PACE) and any other pharmacy program administered by  
19 the Commonwealth that is recognized by the Centers for  
20 Medicare and Medicaid of the United States as a State  
21 pharmaceutical assistance program.

22 (3) Programs or plans paying for prescription drugs  
23 dispensed to employees as a retirement or employee benefit,  
24 including programs established by the Public School  
25 Employees' Retirement System, the State Employees' Retirement  
26 System and the State Employees' Benefit Trust Fund.

27 (4) A pharmaceutical program that utilizes funds of this  
28 Commonwealth, including the State Lottery Fund, to provide  
29 assistance in obtaining prescription drugs to Medicare  
30 recipients.

1           (5) Programs where the Commonwealth purchases or  
2       reimburses affiliates or designees for a pharmaceutical drug  
3       benefit. The programs shall include the Children's Health  
4       Insurance Program, Workers' Compensation Program and any  
5       program involving the purchase or reimbursement of  
6       pharmaceutical drugs for inmates under the Department of  
7       Corrections.

8           (6) The End Stage Renal Program in the Department of  
9       Health.

10          (7) All prescription drug plans that prescribe benefits  
11       to members and employees of the General Assembly and the  
12       unified judicial system and its retirees.

13       "Program." The One Pennsylvania pharmacy benefits  
14       consolidation program established pursuant to section 3.

15       "Provider." A pharmacy, a dispensing physician or a  
16       certified registered nurse practitioner enrolled as a provider  
17       in the One Pennsylvania program.

18       "Public School Employees' Retirement System." The retirement  
19       system established by 24 Pa.C.S. Part IV (relating to retirement  
20       for school employees).

21       "Public Welfare Code." The act of June 13, 1967 (P.L.31, No.  
22       21), known as the Public Welfare Code.

23       "Retail pharmacy." A pharmacy licensed to operate pursuant  
24       to the act of September 27, 1961 (P.L.1700, No.699), known as  
25       the Pharmacy Act, which provides services to the general public,  
26       excluding any institutional pharmacy, specialty pharmacy or  
27       mail-order pharmacy.

28       "Secretary." The Secretary of Administration of the  
29       Commonwealth.

30       "Social Security Act." The Social Security Act (49 Stat.

1 620, 42 U.S.C. § 301 et seq.). A reference to the Social  
2 Security Act shall include regulations implementing the Social  
3 Security Act adopted by the United States Department of Health  
4 and Human Services or the Centers for Medicare and Medicaid  
5 Services.

6 "State agency." Any of the following entities that purchases  
7 or provides coverage for prescription medications:

8 (1) An agency under the jurisdiction of the Governor.

9 (2) An independent agency supported by public funds.

10 "State Employees' Benefit Trust Fund." The trust fund  
11 established to purchase health insurance coverage, including  
12 coverage for prescription medications, for State employees.

13 "State Employees' Retirement System." The retirement system  
14 established under 71 Pa.C.S. Part XXV (relating to retirement  
15 for State employees and officers).

16 Section 3. One Pennsylvania.

17 (a) Establishment.--The Office of Administration shall  
18 establish a pharmacy benefits consolidation program to be known  
19 as One Pennsylvania. The program shall administer all publicly  
20 funded Commonwealth prescription drug plans through an  
21 integrated system of plan administration using uniform standards  
22 and requirements for the reimbursement to providers as provided  
23 by this act.

24 (b) Program requirements.--The Office of Administration  
25 shall do all of the following:

26 (1) Develop, manage and implement preferred drug lists  
27 for all publicly funded Commonwealth prescription drug plans  
28 to the extent allowed by applicable Federal law. A preferred  
29 drug list shall include all prescription drugs for which a  
30 manufacturer has entered into a rebate agreement pursuant to

1 section 6 and the requirements and restrictions, except for  
2 prior authorization, provided by section 1927(d) of the  
3 Social Security Act. A preferred drug list shall comply with  
4 the standards established by Part D, section 1860D-4(b)(3) of  
5 the Social Security Act and any additional regulations as may  
6 be adopted by the Office of Administration pursuant to this  
7 act. A current list of drugs included in the preferred drug  
8 list shall be publicly available, posted electronically on  
9 the Internet website of the Office of Administration and  
10 communicated to pharmacies through alerts. All preferred drug  
11 lists shall be uniform to the extent administratively  
12 feasible under the statutory authority establishing the  
13 individual prescription drug plans. The Office of  
14 Administration may, in its discretion, allow exceptions to  
15 the uniformity requirements in administering the individual  
16 programs due to fiscal and administrative considerations.

17 (2) Adopt regulations relating to the eligibility of  
18 participating providers and the adjudication of items and all  
19 other provisions necessary to carry out the provisions of  
20 this act. Any pharmacy shall be eligible to participate in  
21 the program, provided the pharmacy complies with the  
22 regulations adopted under the paragraph and other provisions  
23 of this act.

24 (3) The Office of Administration shall promulgate  
25 statements of policy, as necessary, to carry out the  
26 provisions of this act. No statement of this policy adopted  
27 by the Office of Administration shall have the force and  
28 effect of law or regulation or may modify the provisions of  
29 any regulations adopted by the Office of Administration. All  
30 statements of policy adopted by the Office of Administration

1 shall, except in emergency circumstances, be published for  
2 notice and comment prior to adoption and shall be published  
3 in the Pennsylvania Bulletin.

4 (4) (i) Except as provided in subparagraph (ii), make  
5 provisions for generic substitutions in accordance with  
6 the act of November 24, 1976 (P.L.1163, No.259), referred  
7 to as the Generic Equivalent Drug Law.

8 (ii) Notwithstanding the provisions of the Generic  
9 Equivalent Drug Law and the act of August 26, 1971 (P.L.  
10 351, No.91), known as the State Lottery Law, generic  
11 substitutions shall only be dispensed when it is less  
12 expensive for the program.

13 (5) Provide for a program of prospective drug  
14 utilization review consistent with section 1927(g)(2) of the  
15 Social Security Act.

16 (6) Provide for prior authorization consistent with the  
17 requirements of section 1927(g)(5) of the Social Security Act  
18 and in accordance with regulations of the Office of  
19 Administration.

20 (7) Provide for a program of retrospective drug  
21 utilization review and education consistent with section  
22 1927(g)(2) of the Social Security Act and in accordance with  
23 regulations of the Office of Administration to ensure that  
24 prescriptions are appropriate, medically necessary and not  
25 likely to result in adverse medical results and to educate  
26 providers and recipients of pharmacy services through the  
27 pharmacy consolidated benefits program and to correct and  
28 report misutilization and abuse by licensed prescribers and  
29 recipients and provide for fraud and abuse audits,  
30 coordinating its activities with the secretary to support



1 compliance with applicable laws and regulations. Pharmacies  
2 shall not be denied payments for medications dispensed based  
3 upon the results of retrospective drug utilization review or  
4 audits, where the medication was dispensed in good faith by  
5 the pharmacy without prior knowledge that the prescription of  
6 a medication was not appropriate or necessary, was likely to  
7 cause adverse medical results or constituted a fraudulent or  
8 abusive practice by the prescriber.

9 (8) Establish a program of medication therapy management  
10 consistent with section 1860D-4(c)(2) of the Social Security  
11 Act.

12 (9) Provide educational materials for program recipients  
13 of pharmacy services on disease and care management.

14 (10) In accordance with section 1927(a) through (d) of  
15 the Social Security Act or Chapter 7 of the act of August 26,  
16 1971 (P.L.351, No.91), known as the State Lottery Law, bill,  
17 recoup and relay to the medical assistance program  
18 manufacturers' drug rebates and excessive consumer price  
19 inflation discounts and resolve disputes. Upon the  
20 establishment of the program, all medical assistance  
21 recipients shall be enrolled in prescription drug programs  
22 for which rebates and discounts are collected pursuant to  
23 section 1927(a) through (d) of the Social Security Act.

24 (11) Adjudicate claims through an electronic claims  
25 management system consistent with section 1927(h) of the  
26 Social Security Act and which allows for an emergency supply  
27 of prescribed medication in the event of equipment failures.

28 (12) The Office of Administration shall develop a manual  
29 setting forth procedures, guidelines and standards to be  
30 utilized by prescription drug plans in audits of providers

1       pertaining to the program.

2           (13)   Create a uniform audit and recoupment system  
3       subject to the requirements of section 7(c) for all of the  
4       following:

5           (i)    Pharmacies, pharmacists, dispensing physicians  
6       and any other providers under this act.

7           (ii)   Pharmaceutical manufacturers, wholesalers and  
8       other suppliers of prescription drugs.

9           (14)   Provide for the reimbursement of all providers  
10      participating in prescription drug programs on a fee-for-  
11      service basis.

12          (15)   Allow providers certified in medication therapy  
13      management by a national accrediting body or by any other  
14      certification process approved by the State Board of Pharmacy  
15      to provide medication therapy management.

16      (c)   Considerations.--In preparing and managing the uniform  
17      drug list, the Office of Administration shall enter into  
18      agreements with drug manufacturers to collect and remit to the  
19      program discounts, rebates or other concessions offered by  
20      manufacturers.

21      (d)   Advisory committee.--

22          (1)    An advisory committee for One Pennsylvania is  
23      established to assist the program in making informed and  
24      fiscally responsive decisions in administering and  
25      consolidating the purchases and reimbursements of  
26      pharmaceutical drugs and benefits for the Commonwealth.

27          (2)    An advisory committee to the Office of  
28      Administration shall consist of the following members:

29              (i)   Three members appointed by the Governor.

30              (ii)  Two members appointed by each of the following:

- 1 (A) The President pro tempore of the Senate.  
2 (B) The Minority Leader of the Senate.  
3 (C) The Speaker of the House of Representatives.  
4 (D) The Minority Leader of the House of  
5 Representatives.

6 (3) Each legislative appointing authority shall appoint  
7 one member pursuant to paragraph (2)(ii) involved in the  
8 ownership or operation of independent pharmacies and one  
9 member involved in the ownership or operation of chain  
10 pharmacies.

11 (4) Members of the committee shall serve without  
12 compensation but shall be reimbursed for their reasonable and  
13 necessary expenses by the Office of Administration.

14 (5) Members of the committee shall serve for indefinite  
15 terms at the will of their respective appointing authorities.

16 (6) Action by the committee shall require a vote by at  
17 least seven members.

18 (7) Members of the committee shall annually elect a  
19 chairperson.

20 (8) The advisory committee shall meet twice yearly to  
21 provide advice and recommendations to the program in regard  
22 to its policies and regulations. The advisory committee shall  
23 review the audit manual and rebate agreement yearly and  
24 develop recommendations to the Office of Administration as  
25 needed.

26 Section 4. Reimbursement.

27 (a) General rule.--Reimbursement to providers shall include  
28 all of the following:

29 (1) Payment sufficient to reimburse retail pharmacies  
30 for the reasonable and necessary costs incurred to purchase

1 drugs.

2 (2) Except to the extent otherwise required by Federal  
3 law or regulations, payments to retail pharmacies pursuant to  
4 paragraph (1) shall be based upon the average retail pharmacy  
5 acquisition cost for a medication without regard to customary  
6 prompt pay discounts in the package size most commonly  
7 purchased by retail pharmacies as determined by the Office of  
8 Administration pursuant to subsection (d), or a provider's  
9 actual acquisition cost for a medication, whichever amount is  
10 greater.

11 (3) Payment for dispensing costs adequate to cover costs  
12 associated with all of the following:

13 (i) Wages and salaries.

14 (ii) Costs to store and secure inventory.

15 (iii) Patient counseling.

16 (iv) Drug utilization review.

17 (v) Licensing fees.

18 (vi) Taxes.

19 (vii) Insurance.

20 (viii) Other direct and indirect costs of operating  
21 a pharmacy.

22 (ix) A reasonable profit to generate a return on the  
23 investment associated with the costs.

24 (4) During the first year this section is in effect,  
25 payments pursuant to paragraph (3) shall be not less than \$10  
26 for the dispensing of a single source drug as defined by  
27 section 1927(k) (7) (A) (iv) of the Social Security Act or \$15  
28 for the dispensing of a multiple-source drug as defined by  
29 section 1927(k) (7) (A) (iv) of the Social Security Act.

30 Beginning on January 1 of each subsequent year, payment

1 pursuant to paragraph (3) shall be not less than the prior  
2 year's minimum payments as adjusted based upon the annual  
3 percentage change in Consumer Price Index for medical care  
4 professional services as published by the Bureau of Labor  
5 Statistics of the United States Department of Labor for the  
6 month of December of the immediately prior year.

7 (5) Additional payment for:

8 (i) Medication therapy management.

9 (ii) Concurrent and retrospective utilization  
10 review.

11 (iii) Managing prior authorization requirements.

12 (iv) To the extent authorized by section 9.1 of the  
13 Pharmacy Act, implementing drug therapy protocols.

14 (v) Compounding prescriptions.

15 (vi) Preparing specialized packaging for the  
16 administration of medications in long-term care  
17 facilities.

18 (vii) Preparing medications for intravenous  
19 administration.

20 (viii) Other reasonable and necessary pharmacy  
21 services.

22 (b) Prompt payment.--Providers shall be paid within 21 days  
23 of the Office of Administration's receipt of appropriate  
24 substantiation of the transaction. Providers shall be entitled  
25 to interest at the rate provided by section 806 of the act of  
26 April 9, 1929 (P.L.343, No.176), known as The Fiscal Code, for  
27 any payment not made within the 21-day period.

28 (c) Average retail pharmacy acquisition costs.--The Office  
29 of Administration shall determine and publicly make available  
30 through its Internet website the average retail pharmacy

1 acquisition cost for covered medications pursuant to regulations  
2 approved by the advisory committee in a manner consistent with  
3 the methodology used by the Congressional Budget Office in its  
4 December 26, 2006, report to the Committee on Energy and  
5 Commerce of the United States House of Representatives based  
6 upon a survey of retail pharmacy wholesale invoices or through  
7 the use of commercially available sources of information.  
8 Average pharmacy acquisition costs shall be updated weekly.

9 (d) Copayments.--Except for services which are excluded  
10 under the Commonwealth's medical assistance program, the Office  
11 of Administration may require providers to collect a copayment  
12 in an amount set by the program. To the extent a provider is  
13 required by Federal or State law to dispense prescriptions to  
14 persons unable to satisfy copayment obligations, the provider  
15 shall be reimbursed for uncollected copayment amounts. The  
16 Office of Administration shall neither require copayments from  
17 beneficiaries nor deduct copayment amounts from provider  
18 reimbursements for any particular classes of drugs or  
19 prescription drug plan recipients to the extent there is good  
20 cause to conclude that copayment requirements will result in  
21 noncompliance with prescription drug treatment protocols and  
22 will increase overall health care costs or result in imminent  
23 and substantial risk of harm or injury to recipients or other  
24 persons. Except to the extent prohibited by Federal law, the  
25 Office of Administration may accept compensation for the purpose  
26 of reducing or eliminating copayments from drug manufacturers,  
27 distributors, health care plans or other persons or  
28 organizations for the purpose of encouraging therapeutically  
29 desirable compliance with prescription drug treatment protocols.

30 Section 5. Deposit of funds.

1 A special fund is established in the State Treasury to be  
2 known as the Special Pharmaceutical Fund. All moneys  
3 appropriated from the State Lottery Fund for PACE operations  
4 shall be deposited in the Special Pharmaceutical Fund. All  
5 Federal moneys received by the Commonwealth per any  
6 pharmaceutical program consolidated into One Pennsylvania under  
7 this act shall be deposited in the Special Pharmaceutical Fund.  
8 Any moneys appropriated from the General Fund for pharmaceutical  
9 purchasing or reimbursement shall be deposited in this fund. All  
10 rebates obtained through prudent pharmaceutical purchasing or  
11 through rebate agreements shall be deposited.

12 Section 6. Rebate agreement.

13 (a) Required agreements.--Except as provided in subsection  
14 (b), the Office of Administration shall not include on the  
15 formulary of preferred drug list established pursuant to section  
16 3(b)(1) any prescription drug unless the Office of  
17 Administration and the pharmaceutical manufacturer have entered  
18 into a rebate agreement covering that prescription drug on terms  
19 comparable to agreements executed pursuant to section 1927(a),  
20 (b), (c) and (d) of the Social Security Act. The rebate  
21 agreement shall provide that, unless prohibited by Federal law,  
22 the rebate shall be based on the best price and that additional  
23 rebates shall be paid if the pharmaceutical manufacturer  
24 increases the price of the drug by an amount greater than the  
25 increase in the Consumer Price Index for All Urban Consumers.  
26 Nothing in this act shall prevent the Office of Administration  
27 from negotiating agreements for the payment of additional  
28 rebates and discounts for the benefit of the medical assistance  
29 program or from entering into rebate and discount agreements for  
30 other plans which have been consolidated into the program for

greater rebates and discounts than are required pursuant to section 1927(c) of the Social Security Act.

(b) Exceptions.--Subsection (a) shall not apply if the availability of the drug is essential to the health of members of the pharmacy consolidated benefits program as determined by the department.

(c) Contracts.--Pharmaceutical manufacturers must enter into a rebate agreement with the department to obtain reimbursement for prescription drugs included under this act. The rebate shall be paid by the manufacturer not later than 30 days after the date of receipt of information necessary to calculate the amount of the rebate. The department shall have the authority to levy a 15% surcharge penalty on any rebate not in dispute that remains unpaid for 90 or more days.

#### Section 7. Adjudications.

Adjudications conducted by the Office of Administration shall be subject to 2 Pa.C.S. Chs. 5 Subch. A (relating to practice and procedure of Commonwealth agencies) and 7 Subch. A (relating to judicial review of Commonwealth agency action). The Office of Administration shall adopt rules of procedure regarding the conduct of adjudications involving pharmacies consistent with the provisions of 67 Pa.C.S. §§ 1102 (relating to hearings before the bureau), 1103 (relating to supersedeas), 1104 (relating to subpoenas) and 1105 (relating to determinations, review, appeal and enforcement).

#### Section 8. Applicability.

This act shall apply to the medical assistance program except to the extent the secretary, in consultation with the Secretary of Public Welfare, determines that the application is a violation of Federal law or an existing contractual agreement.



1 Nothing in this act shall supersede or impede an existing  
2 contractual agreement. Contractual agreements in effect on the  
3 effective date of this section shall not be renewed or extended  
4 to the extent inconsistent with the requirements of this act,  
5 and the Office of Administration shall promptly enter into  
6 negotiations to modify any contractual agreements inconsistent  
7 with this act to conform to the requirements of this act.

8 Section 9. Prohibited activities.

9 It shall be unlawful for any individual, partnership or  
10 corporation to solicit, receive, offer or pay any kickback,  
11 bribe or rebate in cash or in kind from or to any person in  
12 connection with the furnishing of services under this act to the  
13 same extent as prohibited with respect to Federal health  
14 programs by section 1128(b)(1) and (2) of the Social Security  
15 Act, subject to the safe harbors from sanctions provided by  
16 sections 1877(a)(1) and 1860D-4(e)(6) of the Social Security  
17 Act. Violations of this section shall be subject to the  
18 sanctions, penalties and remedies under section 1407 of the  
19 Public Welfare Code.

20 Section 10. Repeals.

21 (a) Intent.--The General Assembly declares that the repeal  
22 under subsection (b) is necessary to effectuate the purposes of  
23 this act.

24 (b) Provision.--Section 509 of the act of August 26, 1971  
25 (P.L.351, No.91), known as the State Lottery Law, is repealed.

26 (c) General.--All other acts and parts of acts are repealed  
27 insofar as they are inconsistent with this act.

28 Section 11. Effective date.

29 This act shall take effect as follows:

30 (1) Sections 3(d), 4(a)(4) and 6 shall take effect

1 immediately.

2 (2) The remainder of this act shall take effect in one  
3 year.