HLS 22RS-1078 ENGROSSED

2022 Regular Session

HOUSE BILL NO. 677

1

BY REPRESENTATIVES JORDAN AND WILLARD

INSURANCE/HEALTH: Provides relative to cost sharing for insulin prescriptions

AN ACT

2	To enact R.S. 22:1034.1, relative to health insurance coverage; to require a health coverage
3	plan to limit the cost-sharing amount for enrollees prescribed insulin; to require
4	certain inclusion of insulin relative to drug formularies; to provide for definitions;
5	to provide for effectiveness; and to provide for related matters.
6	Be it enacted by the Legislature of Louisiana:
7	Section 1. R.S. 22:1034.1 is hereby enacted to read as follows:
8	§1034.1. Health insurance coverage for insulin; limit on cost-sharing requirement
9	A. As used in this Section, the following terms apply:
10	(1) "Formulary" has the same meaning as the term is defined in R.S.
11	<u>22:1060.1.</u>
12	(2) "Health coverage plan" means any hospital, health, or medical expense
13	insurance policy, hospital or medical service contract, employee welfare benefit plan.
14	contract, or other agreement with a health maintenance organization or a preferred
15	provider organization, health and accident insurance policy, or any other insurance
16	contract of this type in this state, including a group insurance plan, a self-insurance
17	plan, and the Office of Group Benefits programs. "Health coverage plan" does not
18	include a plan providing coverage for excepted benefits as defined in R.S. 22:1061,
19	limited benefit health insurance plans, short-term policies that have a term of less
20	than twelve months, and plans that do not provide prescription drug coverage.

CODING: Words in struck through type are deletions from existing law; words <u>underscored</u> are additions.

1	(3) "Insulin" means a prescription drug that contains insulin and is used to
2	treat diabetes. The term does not include an insulin drug that is administered to a
3	patient intravenously.
4	B.(1) A health coverage plan shall not impose a cost-sharing provision for
5	insulin in the health coverage plan's formulary as prescribed in Subsection C of this
6	Section if the total amount the enrollee is required to pay exceeds seventy-five
7	dollars per prescription for a thirty-day supply, regardless of the amount or type of
8	insulin needed to fill the enrollee's prescription.
9	(2) On January first of each year, the limit on the amount that an insured is
10	required to pay for a thirty-day supply of a covered prescription of insulin as
11	provided for in this Subsection shall increase by a percentage equal to the percentage
12	change from the preceding year in the prescription drug component of the Consumer
13	Price Index of the United States Department of Labor, Bureau of Labor Statistics.
14	C. A health coverage plan shall include at least one insulin from each
15	therapeutic class in the plan's formulary that complies with the provisions of this
16	Section.
17	Section 2. This Act shall apply to any new health coverage plan issued on and after
18	January 1, 2023. Any health coverage plan in effect prior to January 1, 2023, shall convert
19	to conform to the provisions of this Act on or before the renewal date, but no later than
20	January 1, 2024.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 677 Engrossed

2022 Regular Session

Jordan

Abstract: Requires a health coverage plan to limit an enrollee's cost-sharing amount to \$75.00 for a 30-day prescription of insulin.

Proposed law defines "health coverage plan", "formulary", and "insulin".

Proposed law prohibits a health coverage plan from imposing a cost-sharing provision for insulin in the plan's formulary that requires the enrollee to pay more than \$75.00 per prescription for a 30-day supply, regardless of the amount or type of insulin needed to fill the enrollee's prescription.

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<u>Proposed law</u> provides that on January 1st of each year, the limit on the amount that an insured is required to pay for a 30-day supply of a covered prescription of insulin shall increase by a percentage equal to the percentage change from the preceding year in the prescription drug component of the Consumer Price Index of the U.S. Department of Labor, Bureau of Labor Statistics.

<u>Proposed law</u> requires a health coverage plan to include at least one insulin from each therapeutic class in the plan's formulary that complies with the provisions of proposed law.

<u>Proposed law</u> requires a current health coverage plan to conform to the provisions of <u>proposed law</u> by Jan. 1, 2024.

Effective Jan. 1, 2023.

(Adds R.S. 22:1034.1)

Summary of Amendments Adopted by House

The Committee Amendments Proposed by <u>House Committee on Insurance</u> to the original bill:

- 1. Modify the definition of "health coverage plan" to exclude plans that do not provide prescription drug coverage.
- 2. Increase an insured's cost-sharing requirement <u>from</u> \$25.00 <u>to</u> \$75.00 for a 30-day supply of insulin.
- 3. Add that on January 1st of each year, the limit on the amount that an insured is required to pay for a 30-day supply of a covered prescription of insulin shall increase by a percentage equal to the percentage change from the preceding year in the prescription drug component of the Consumer Price Index of the U.S. Department of Labor, Bureau of Labor Statistics.
- 4. Specify for the health plan's drug formulary to comply with the provisions of proposed law.
- 5. Require any health coverage plan in effect prior to Jan. 1, 2023, to conform to the provisions of <u>proposed law</u> on or before the renewal date, but no later than Jan. 1, 2024.
- 6. Make technical changes.