DIGEST

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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.

Proposed law 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.

Proposed law 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.

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


(Adds R.S. 22:1034.1)

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Insurance 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 from $25.00 to $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 proposed law on or before the renewal date, but no later than Jan. 1, 2024.

6. Make technical changes.