2024 Regular Session

HOUSE BILL NO. 839

BY REPRESENTATIVE HEBERT

INSURANCE/HEALTH: Provides relative to step therapy or fail first protocols

1	AN ACT
2	To amend and reenact R.S. 22:1053(A)(1) and (L) and to enact R.S. 22:1053(M), relative
3	to step therapy or fail first protocols; to require coverage for treatment when certain
4	exceptions are present; to provide for technical changes; and to provide for related
5	matters.
6	Be it enacted by the Legislature of Louisiana:
7	Section 1. R.S. 22:1053(A)(1) and (L) are hereby amended and reenacted and R.S.
8	22:1053(M) is hereby enacted to read as follows:
9	§1053. Requirement for coverage of step therapy or fail first protocols
10	A.(1) Any health coverage plan specified in Subsection $\pm M$ of this Section
11	which includes prescription benefits as part of its policy or contract, which utilizes
12	step therapy or fail first protocols, and which is issued for delivery, delivered,
13	renewed, or otherwise contracted for in this state shall comply with the provisions
14	of this Section.
15	* * *
16	L. Notwithstanding any provision of this Section to the contrary, a health
17	coverage plan shall provide coverage for treatment following a step therapy or fail
18	first protocol when any of the following exceptions are present:
19	(1) Any treatments otherwise required under the protocol have not been
20	shown to be as effective as other available options in the treatment of the disease or

1	condition of the patient, when prescribed consistent with clinical directions, clinical
2	guidelines, or other peer-reviewed evidence.
3	(2) Delay of proven effective treatment would lead to severe or irreversible
4	consequences, and the treatment initially required under the protocol is reasonably
5	expected to be less effective based on the documented physical or mental
6	characteristics of the patient and the known characteristics of the treatment.
7	(3) Any treatments otherwise required under the protocol are contraindicated
8	for the patient or have caused or are likely to cause, based on clinical, peer-reviewed
9	evidence, an adverse reaction or other physical harm to the patient.
10	(4) Any treatment otherwise required under the protocol has prevented, will
11	prevent, or is likely to prevent a patient from achieving or maintaining reasonable
12	and safe functional ability in performing activities of daily living.
13	(5) The patient is stable for his disease or condition on the prescription drug
14	or drugs selected by the prescribing healthcare provider and has previously received
15	approval for coverage of the relevant drug or drugs for the disease or condition.
16	(6) A physician prescribes the patient a ventilator requiring frequent and
17	substantial servicing as classified by the Centers for Medicare and Medicaid Services
18	and described in R.S. 22:1821(G).
19	\underline{M} . As used in this Section, the following definitions shall apply:
20	(1) "Health coverage plan" means:
21	(a) An individual or group plan or program which is established by contract,
22	certificate, law, plan, policy, subscriber agreement, or by any other method and
23	which is entered into, issued, or offered for the purpose of arranging for, delivering,
24	paying for, providing, or reimbursing any of the costs of health or medical care,
25	including pharmacy services, drugs, or devices.
26	(b) Any hospital, health, or medical expense insurance policy, hospital or
27	medical service contract, employee welfare benefit plan, contract or agreement with
28	a health maintenance organization or a preferred provider organization, health and

1	accident insurance policy, or any other insurance contract of this type, including a
2	group insurance plan and the Office of Group Benefits programs.
3	(c) Any plan that is subject to the provisions of this Section which is
4	administered by a pharmacy benefit manager.
5	(2) "Stage-four advanced, metastatic cancer" means cancer that has spread
6	from the lymph nodes or other areas or parts of the body and "associated conditions"
7	means the symptoms or side effects associated with stage-four advanced, metastatic
8	cancer or its treatment.

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 839 Original 2024 Regular Session

Hebert

Abstract: Provides insurance coverage relative to step therapy or fail first protocols.

<u>Present law</u> generally provides certain requirements for health coverage plans using step therapy or fail first protocols. Provides a process for prescribing physicians to request an override of a health coverage plan's restrictions. <u>Proposed law</u> retains <u>present law</u> and further requires a health coverage plan to cover treatment following a step therapy or fail first protocol under the following exceptions:

- (1) Treatments otherwise required under the protocol have not been as effective as other available options in the treatment of the patient's disease or condition when prescribed consistent with certain clinical guidelines.
- (2) Delay of proven effective treatment would lead to severe or irreversible consequences, and the treatment initially required is reasonably expected to be less effective based on characteristics of the patient and the treatment.
- (3) Treatments otherwise required under the protocol are contraindicated for the patient or have caused or are likely to cause adverse or physical harm to the patient.
- (4) Treatments otherwise required under the protocol have prevented or are likely to prevent a patient from achieving or maintaining reasonable and functional ability in performing activities of daily living, such as bathing, eating, and dressing.
- (5) The patient is stable for his disease or condition on the prescription drug or drugs selected by the prescribing healthcare provider and has previously received approval for coverage of the relevant drug or drugs.
- (6) The physician-prescribed device requires frequent and substantial servicing as described in <u>present law</u> (R.S. 22:1821(G)).

Proposed law makes technical changes to citations in present law.

(Amends R.S. 22:1053(A)(1) and (L); Adds R.S. 22:1053(M))

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