LC01345

2013 -- H 5591

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2013

AN ACT

RELATING TO INSURANCE - PRESCRIPTION DRUGS - BENEFITS

Introduced By: Representatives Keable, Ajello, Tanzi, and Cimini

Date Introduced: February 27, 2013

Referred To: House Corporations

It is enacted by the General Assembly as follows:

- SECTION 1. Section 27-20.8-2 of the General Laws in Chapter 27-20.8 entitled
 "Prescription Drug Benefits" is hereby amended to read as follows:
- 3 <u>27-20.8-2. Pharmacy benefit, limits and co-payments. --</u> Any health plan that offers
 4 pharmacy benefits shall comply with the following:

(a) When a <u>A</u> health plan's pharmacy benefit has <u>shall not have</u> a dollar limit, the
insured's use of such benefit shall be determined based on the health plan's contracted rate to
purchase the drug minus the enrollee's applicable co-payment for covered drugs. The balance will

- 8 apply towards the enrollee's dollars limit.
- 9 (b) Each health plan shall establish a separate out-of-pocket limit for prescription drugs,
 10 including specialty drugs, equal to the maximum dollar amounts in effect under section 223(b)(2)
 11 of the internal revenue code for self-only and family coverage, respectively. For the purposes of
 12 this section, the use of the term "out-of-pocket limit" must be consistent with the definitions of

13 those terms as prescribed by the secretary of the United States department of health and human

- 14 <u>services pursuant to section 2715 of the federal affordable care act.</u>
- 15 (b)(c) When a health plan charges a co-payment for covered prescription drugs that is 16 based on a percent of the drug cost, the health plan shall disclose within the group policy or 17 individual policy benefits description statement whether the co-payment is based on the plan's 18 contracted rate to purchase the drug or some other cost basis such as retail price.
- 19 (d) Nothing in this section shall apply to title XIX state plan pursuant to title XIX of the

- 1 social security act to provide Medicaid coverage or title XXI state plan pursuant to title XXI of
- 2 the social security act to provide medical assistance coverage. The services provided shall be in
- 3 accord with title XIX [42 U.S.C. et seq.] and title XXI [42 U.S.C. section 1397 et seq.] of the
- 4 <u>social security act.</u>
- 5 SECTION 2. This act shall take effect upon passage.

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EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

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This act would eliminate dollars limits on health plans pharmacy benefits and would
 provide that each health plan establish a separate out-of-pocket limit for prescription drugs equal
 to the maximum amount in effect under section 223(b)(2) of the internal revenue code for self only and family coverage.
 This act would take effect upon passage.

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