

AN ACT

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IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

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To amend the Specialty Drug Copayment Limitation Act of 2016 to impose a limit on the amount that a person must pay in copayment or coinsurance through a health benefit plan for a prescription for insulin.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Insulin and Diabetes Device Affordability Amendment Act of 2020”.

Sec. 2. The Specialty Drug Copayment Limitation Act of 2016, effective April 7, 2017 (D.C. Law 21-248; D.C. Official Code § 48-855.01 *et seq.*), is amended as follows:

(a) Section 2 (D.C. Official Code § 48-855.01) is amended as follows:

(1) New paragraphs (3A) and (3B) are added to read as follows:

“(3A) “Diabetes device” means a legend device or non-legend device used to cure, diagnose, mitigate, prevent or treat diabetes or low blood sugar. The term includes a blood glucose test strip, glucometer, continuous glucometer, lancet, lancing device, or insulin syringe.

“(3B) “Diabetic ketoacidosis device” means a device that is a legend or non-legend device and used to screen for or prevent diabetic ketoacidosis. The term includes diabetic ketoacidosis devices prescribed and dispensed once during a policy year.”.

(2) A new paragraph (9A) is added to read as follows:

“(9A) “Prescription insulin drug” means a prescription drug that contains insulin and is used to control blood glucose levels to treat diabetes.”.

(b) Section 3 (D.C. Official Code § 48-855.02) is amended by striking the phrase “Washington-Baltimore metropolitan area” and “inserting the phrase “Washington-Arlington-Alexandria, DC-VA-MD-WV metropolitan area” in its place.

(c) Section 4 (D.C. Official Code § 48-855.03) is amended by striking the phrase “January 1, 2018” and inserting the phrase “January 1, 2018; except, that section 3a shall apply on January 1, 2022.” in its place.

(d) A new section 3a is added to read as follows:

“Sec. 3a. Insulin copayment or coinsurance limitation.

“(a) A health insurer that provides coverage for prescription insulin drugs pursuant to the terms of a health benefits plan the insurer offers shall limit the total amount that an insured is

required to pay for a 30-day supply of covered prescription insulin drugs at an amount not to exceed \$30, regardless of the quantity or type of covered prescription insulin drug used to fill the insured's prescription.

“(b) A health insurer that provides coverage for diabetes devices and diabetic ketoacidosis devices pursuant to the terms of a health benefits plan offered by the insurer, shall limit the total amount that an insured is required to pay for a 30-day supply of all medically necessary covered diabetes devices and diabetic ketoacidosis devices that are in accordance with the insured's diabetes treatment plan at an amount not to exceed \$100.

“(c) Pursuant to subsections (a) and (b) of this section, prescription insulin drugs, diabetes devices, and diabetic ketoacidosis devices shall be covered without being subject to a deductible and any cost sharing paid by an insured shall be applied toward the insured's deductible obligation.

“(d) Nothing in this section prevents an insurer from reducing an insured's copayment or coinsurance by an amount greater than the amount specified in subsections (a) and (b) of this section.

“(e) On July 1 of each year, the limit on a required copayment or coinsurance an insured is required to pay under subsections (a) and (b) of this section shall increase by a percentage equal to the percentage change from the preceding year in the medical care component of the Consumer Price Index for All Urban Consumers, Washington-Arlington-Alexandria, DC-VA-MD-WV metropolitan area, as published by the Bureau of Labor Statistics of the United States Department of Labor.

“(f) This section shall apply as of January 1, 2022.”.

### Sec. 3. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 4a of the General Legislative Procedures Act of 1975, approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

### Sec. 4. Effective date.

This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December

**ENROLLED ORIGINAL**

24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.

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Chairman  
Council of the District of Columbia

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Mayor  
District of Columbia