LEGISLATIVE FISCAL OFFICE Louisiana egislative 🛉 **Fiscal Note** Fiscal Fiscal Note On: SB **191** SLS 21RS Office 434 Fiscal Bill Text Version: ENGROSSED Notes Opp. Chamb. Action: Proposed Amd.: Sub. Bill For.: Date: April 26, 2021 12:51 PM Author: CLOUD Dept./Agy.: Insurance and Office of Group Benefits

Subject: Protecting Patient Access to Physician-Administered Drugs

INSURANCE POLICIES

EG NO IMPACT See Note

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Provides relative to coverage of certain physician-administered drugs and related services. (gov sig)

Proposed law prohibits a health insurance issuer, pharmacy benefit manager, or their agent from refusing to authorize, approve, or pay a participating provider (clinic, hospital outpatient department or pharmacy) for providing covered physician administered drugs and related services to covered persons. Further prohibits a health insurance issuer, pharmacy benefit manager, or their agent from conditioning, denying, restricting, refusing to authorize or approve, or reducing payment to a participating provider for a physician-administered drug when all criteria for medical necessity are met. Proposed law prohibits a health insurance issuer, pharmacy benefit manager from requiring a covered person to pay an additional fee, or any other increased cost-sharing other than the amount to obtain the physician-administered drug when provided by a participating provider. Proposed law prohibits a pharmacy benefit manager from requiring an enrollee to pay an additional fee, higher copay, higher coinsurance, second copay, second coinsurance, or any other increased cost-sharing amount for a physician-administered drug when provided by a pharmacy, pharmacist, clinic, hospital, or hospital outpatient department.

EXPENDITURES	<u>2021-22</u>	<u>2022-23</u>	<u>2023-24</u>	<u>2024-25</u>	<u>2025-26</u>	<u>5 -YEAR TOTAL</u>
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$0	\$0	\$0	\$0	\$0	\$0
Local Funds	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Annual Total	\$0	\$0	\$0	\$0	\$0	\$0
REVENUES	2021-22	<u>2022-23</u>	2023-24	2024-25	2025-26	<u>5 -YEAR TOTAL</u>
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$0	\$0	\$0	\$0	\$0	\$0
Local Funds	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
Annual Total	\$0	\$0	\$0	\$0	\$0	\$0

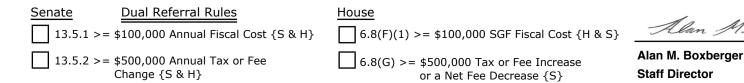
EXPENDITURE EXPLANATION

There is no anticipated direct material effect on governmental expenditures as a result of this measure. The proposed law prohibits a health insurance insurer, a pharmacy benefit manager (PBM), or their agents from refusing to authorize, approve or pay a participating healthcare provider in their provider network for providing physician-administered drugs and related services to a covered person. Since the proposed law provides prohibitions on existing benefits and is not a new mandate, the LA Department of Insurance (LDI) reports no direct material effect as a result of this measure.

The Office of Group Benefits (OGB) reports no direct material effect on pharmacy and medical claims expenditures under this measure. OGB has five self-funded health plans. None of OGB's plans have provisions that would prevent healthcare providers in their third-party administrator (Blue Cross and Blue Shield of LA) provider network and their pharmacy benefit manager (MedImpact) provider contracts from being reimbursed for physician-administered drugs. The majority of member claims in OGB's health plans for physician-administered drugs are processed as medical claims that are subject to medical necessity requirements.

REVENUE EXPLANATION

There is no anticipated direct material effect on governmental revenues as a result of this measure.



Alan M. Boderger