

SENATE BILL NO. 231

BY SENATORS MURRAY, MILLS AND THOMPSON AND REPRESENTATIVE THIBAUT

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AN ACT

To enact R.S. 22:1006.1, relative to prior authorization forms; to provide with respect to the issuance and use of prior authorization forms; to provide for an effective date; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 22:1006.1 is hereby enacted to read as follows:

§1006.1. Prior authorization forms required; criteria

A. As used in this Section:

(1) "Health insurance issuer" means any entity that offers health insurance coverage through a plan, policy, or certificate of insurance subject to state law that regulates the business of insurance. "Health insurance issuer" shall also include a health maintenance organization, as defined and licensed pursuant to Subpart I of Part I of Chapter 2 of this Title.

(2) "Health benefit plan", "plan", "benefit", or "health insurance coverage" means services consisting of medical care, provided directly, through insurance or reimbursement, or otherwise, and including items and services paid for as medical care under any hospital or medical service policy or certificate, hospital or medical service plan contract, preferred provider organization, or health maintenance organization contract offered by a health insurance issuer. However, excepted benefits are not included as a "health benefit plan".

(3) "Prior authorization" shall mean a utilization management criterion utilized to seek permission or waiver of a drug to be covered under a health benefit plan that provides prescription drug benefits.

1 (4) "Prior authorization form" shall mean a standardized, uniform
2 application developed by a health insurance issuer for the purpose of obtaining
3 prior authorization.

4 B. Notwithstanding any other provision of law to the contrary, in order
5 to establish uniformity in the submission of prior authorization forms, on and
6 after January 1, 2013, a health insurance issuer shall utilize only a single,
7 standardized prior authorization form for obtaining any prior authorization for
8 prescription drug benefits. The form shall not exceed two pages in length,
9 excluding any instructions or guiding documentation. A health insurance issuer
10 may make the form accessible through multiple computer operating systems.
11 Additionally, the health insurance issuer shall submit its prior authorization
12 forms to the Department of Insurance to be kept on file on or after January 1,
13 2013. A copy of any subsequent replacements or modifications of a health
14 insurance issuer's prior authorization form shall be filed with the Department
15 of Insurance within fifteen days prior to use or implementation of such
16 replacements or modifications.

17 Section 2. This Act shall become effective upon signature by the governor or, if not
18 signed by the governor, upon expiration of the time for bills to become law without signature
19 by the governor, as provided by Article III, Section 18 of the Constitution of Louisiana. If
20 vetoed by the governor and subsequently approved by the legislature, this Act shall become
21 effective the day following such approval.

PRESIDENT OF THE SENATE

SPEAKER OF THE HOUSE OF REPRESENTATIVES

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: _____