SLS 20RS-502 **ORIGINAL**

2020 Regular Session

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SENATE BILL NO. 289

BY SENATOR BARROW

HEALTH/ACC INSURANCE. Provides relative to prohibitions on certain health insurance cost-sharing practices. (gov sig)

AN ACT

2	To amend and reenact R.S. 22:1641(8) and to enact R.S. 22:976.1, relative to prohibitions
3	on certain health insurance cost-sharing practices; to provide for definitions; to
4	provide for fairness in enrollee cost-sharing; and to provide for related matters.
5	Be it enacted by the Legislature of Louisiana:
6	Section 1. R.S. 22:1641(8) is hereby amended and reenacted and R.S. 22:976.1 is
7	enacted to read as follows:
8	§1641. Definitions
9	As used in this Part, unless the context requires otherwise, the following
10	definitions shall be applicable:
11	* * *
12	(8) "Pharmacy benefit manager" means a person, business, or other entity and
13	any wholly or partially owned or controlled subsidiary of such entity that either
14	directly or through an intermediary manages or administers the prescription drug
15	or <u>and</u> device portion of one or more health benefit plans on behalf of a third party,
16	including insurers, plan sponsors, insurance companies, unions, and health
17	maintenance organizations, in accordance with a pharmacy benefit management

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1 plan. The management or administration of a plan may include but is not 2 limited to review, processing of drug prior authorization requests, adjudication 3 of appeals and grievances related to the prescription drug benefit, contracting with network pharmacies, and controlling the cost of covered prescription 4 5 drugs. 6 7 §976.1. Fairness in enrollee cost-sharing 8 A. As used in this Section the following definitions shall be applicable: 9 (1) "Cost-sharing requirement" means any copayment, coinsurance, 10 deductible, or annual limitation on cost-sharing including but not limited to a 11 limitation subject to 42 U.S.C. §18022(c) and 300gg-6(b), required by or on behalf of an enrollee in order to receive a specific healthcare service, including 12 13 a prescription drug, covered by a health benefit plan. 14 (2) "Enrollee" means an individual who is enrolled or insured by a 15 health insurance issuer for healthcare services. 16 (3) "Health benefit plan" means healthcare services provided directly through insurance, reimbursement, or other means, and including items and 17 services paid for as healthcare services under any hospital or medical service 18 19 policy or certificate, hospital or medical service plan contract, preferred 20 provider organization contract, or health maintenance organization contract 21 offered by a health insurance issuer. 22 (4) "Healthcare services" means items or services furnished to any individual for the purpose of preventing, alleviating, curing, or healing human 23 24 illness, injury, mental, or physical disability. (5) "Health insurance issuer" means any entity that offers health 25 insurance coverage through a health benefit plan, policy, or certificate of 26 27 insurance subject to state law that regulates the business of insurance. "Health 28 insurance issuer" includes a health maintenance organization as defined and

licensed pursuant to Subpart I of Part I of Chapter 2 of this Title and the Office

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1	of Group Benefits as created pursuant to Chapter 12 of Title 42 of the Louisiana
2	Revised Statutes of 1950.
3	(6) "Person" means a natural person, corporation, mutual company,
4	unincorporated association, partnership, joint venture, limited liability
5	company, trust, estate, foundation, not-for-profit corporation, unincorporated
6	organization, government or governmental subdivision, or agency.
7	B. When calculating an enrollee's contribution to any applicable
8	cost-sharing requirement, a health insurance issuer shall include any
9	cost-sharing amounts paid by the enrollee or on behalf of the enrollee by
10	another person.
11	C. In implementing the requirements of this Section, the state shall
12	regulate a health insurance issuer only to the extent permissible under
13	applicable law.
14	D. The commissioner of insurance may promulgate rules and regulations
15	necessary to implement this Section.
16	Section 3. This Act shall become effective upon signature by the governor or, if not
17	signed by the governor, upon expiration of the time for bills to become law without signature
18	by the governor, as provided by Article III, Section 18 of the Constitution of Louisiana. If
19	vetoed by the governor and subsequently approved by the legislature, this Act shall become
20	effective on the day following such approval.
	The original instrument and the following digest, which constitutes no part of the legislative instrument, were prepared by Cheryl B. Cooper.
	DIGEST

Present law provides for regulations and definitions for third-party administrators, defining "pharmacy benefit manager" as a person, business, or other entity and any wholly or partially owned or controlled subsidiary of such entity that administers a pharmacy benefit management plan.

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<u>Proposed law</u> retains <u>present law</u> and specifies that for the definitions of "pharmacy benefit manager", the management or administration of a benefit plan may include review, processing of drug prior authorization requests, adjudication of appeals and grievances related to the prescription drug benefit, contracting with network pharmacies, and controlling the cost of covered prescription drugs.

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<u>Proposed law</u> provides for fairness in enrollee cost-sharing. Defines terms for purposes of <u>proposed law</u>, including "cost-sharing requirement", "enrollee", "health benefit plan", "healthcare services", "health insurance issuer", and "person".

<u>Proposed law</u> provides that when calculating an enrollee's contribution to any applicable cost-sharing requirement, a health insurance issuer shall include any cost sharing amounts paid by the enrollee or on behalf of the enrollee by another person.

<u>Proposed law</u> provides that in implementing the requirements of <u>proposed law</u>, the state shall regulate a health insurance issuer only to the extent permissible under applicable law. Allows the commissioner of insurance to promulgate rules and regulations necessary to implement <u>proposed law</u>.

Effective upon signature of the governor or lapse of time for gubernatorial action.

(Amends R.S. 22:1641(8); adds R.S. 22:976.1)