

2024 -- H 7273

LC003663

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2024

A N A C T

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Representatives Casimiro, Noret, Solomon, Kazarian, Alzate, Potter, and Morales

Date Introduced: January 24, 2024

Referred To: House Finance

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-18 of the General Laws entitled "Accident and Sickness Insurance
2 Policies" is hereby amended by adding thereto the following section:

3 **27-18-95. Coverage for pharmacists' services.**

4 (a) Every group health insurance contract, or every group hospital or medical expense
5 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by
6 any health insurance carrier, on or after January 1, 2025, shall provide coverage for the services
7 within the lawful scope of practice of pharmacists pursuant to § 5-19.1-2, and pharmacists' services
8 provided under a collaborative agreement pursuant to § 5-19.2-2, if the plan would have provided
9 coverage if the service had been performed by a physician, advanced practice nurse, or physician
10 assistant . No nonprofit medical service corporation may require supervision, signature, or referral
11 by any other healthcare provider as a condition of reimbursement to a pharmacist; provided that,
12 no nonprofit medical service corporation may be required to pay for duplicative services actually
13 rendered by both a pharmacist and any other healthcare provider.

14 (b) The health plan must include an adequate number of pharmacists in its network of
15 participating medical providers. The participation of pharmacies in the plan network's drug benefit
16 does not satisfy the requirement that plans include pharmacists in their networks of participating
17 medical providers.

18 (c) The healthcare benefits outlined in this chapter apply only to services delivered within
19 the health insurer's provider network; provided that, all health insurers shall be required to provide

1 coverage for those benefits mandated by this chapter outside of the health insurer's provider
2 network where it can be established that the required services are not available from a provider in
3 the health insurer's network.

4 (d) The department of human services shall apply to the United States department of health
5 and human services for any amendment to the state Medicaid plan or for any Medicaid waiver as
6 necessary to implement this section. The department of human services shall submit the Medicaid
7 state plan amendment not later than September 1, 2024.

8 SECTION 2. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service
9 Corporations" is hereby amended by adding thereto the following section:

10 **27-19-87. Coverage for pharmacists' services.**

11 (a) Every group health insurance contract, or every group hospital or medical expense
12 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by
13 any health insurance carrier, on or after January 1, 2025, shall provide coverage for the services
14 within the lawful scope of practice of pharmacists pursuant to § 5-19.1-2, and pharmacists' services
15 provided under a collaborative agreement pursuant to § 5-19.2-2, if the plan would have provided
16 coverage if the service had been performed by a physician, advanced practice nurse, or physician
17 assistant. No nonprofit medical service corporation may require supervision, signature, or referral
18 by any other healthcare provider as a condition of reimbursement to a pharmacist; provided that,
19 no nonprofit medical service corporation may be required to pay for duplicative services actually
20 rendered by both a pharmacist and any other healthcare provider.

21 (b) The health plan must include an adequate number of pharmacists in its network of
22 participating medical providers. The participation of pharmacies in the plan network's drug benefit
23 does not satisfy the requirement that plans include pharmacists in their networks of participating
24 medical providers.

25 (c) The healthcare benefits outlined in this chapter apply only to services delivered within
26 the health insurer's provider network; provided that, all health insurers shall be required to provide
27 coverage for those benefits mandated by this chapter outside of the health insurer's provider
28 network where it can be established that the required services are not available from a provider in
29 the health insurer's network.

30 (d) The department of human services shall apply to the United States department of health
31 and human services for any amendment to the state Medicaid plan or for any Medicaid waiver as
32 necessary to implement this section. The department of human services shall submit the Medicaid
33 state plan amendment not later than September 1, 2024.

34 SECTION 3. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service

1 Corporations" is hereby amended by adding thereto the following section:

2 **27-20-83. Coverage for pharmacists' services.**

3 (a) Every group health insurance contract, or every group hospital or medical expense
4 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by
5 any health insurance carrier, on or after January 1, 2025, shall provide coverage for the services
6 within the lawful scope of practice of pharmacists pursuant to § 5-19.1-2, and pharmacists' services
7 provided under a collaborative agreement pursuant to § 5-19.2-2, if the plan would have provided
8 coverage if the service had been performed by a physician, advanced practice nurse, or physician
9 assistant. No nonprofit medical service corporation may require supervision, signature, or referral
10 by any other healthcare provider as a condition of reimbursement to a pharmacist; provided that,
11 no nonprofit medical service corporation may be required to pay for duplicative services actually
12 rendered by both a pharmacist and any other healthcare provider.

13 (b) The health plan must include an adequate number of pharmacists in its network of
14 participating medical providers. The participation of pharmacies in the plan network's drug benefit
15 does not satisfy the requirement that plans include pharmacists in their networks of participating
16 medical providers.

17 (c) The healthcare benefits outlined in this chapter apply only to services delivered within
18 the health insurer's provider network; provided that, all health insurers shall be required to provide
19 coverage for those benefits mandated by this chapter outside of the health insurer's provider
20 network where it can be established that the required services are not available from a provider in
21 the health insurer's network.

22 (d) The department of human services shall apply to the United States department of health
23 and human services for any amendment to the state Medicaid plan or for any Medicaid waiver as
24 necessary to implement this section. The department of human services shall submit the Medicaid
25 state plan amendment not later than September 1, 2024.

26 SECTION 4. Chapter 27-41 of the General Laws entitled "Health Maintenance
27 Organizations" is hereby amended by adding thereto the following section:

28 **27-41-100. Coverage for pharmacists' services.**

29 (a) Every group health insurance contract, or every group hospital or medical expense
30 insurance policy, plan, or group policy delivered, issued for delivery, or renewed in this state, by
31 any health insurance carrier, on or after January 1, 2025, shall provide coverage for the services
32 within the lawful scope of practice of pharmacists pursuant to § 5-19.1-2, and pharmacists' services
33 provided under a collaborative agreement pursuant to § 5-19.2-2, if the plan would have provided
34 coverage if the service had been performed by a physician, advanced practice nurse, or physician

1 assistant. No nonprofit medical service corporation may require supervision, signature, or referral
2 by any other healthcare provider as a condition of reimbursement to a pharmacist; provided that,
3 no nonprofit medical service corporation may be required to pay for duplicative services actually
4 rendered by both a pharmacist and any other healthcare provider.

5 (b) The health plan must include an adequate number of pharmacists in its network of
6 participating medical providers. The participation of pharmacies in the plan network's drug benefit
7 does not satisfy the requirement that plans include pharmacists in their networks of participating
8 medical providers.

9 (c) The healthcare benefits outlined in this chapter apply only to services delivered within
10 the health insurer's provider network; provided that, all health insurers shall be required to provide
11 coverage for those benefits mandated by this chapter outside of the health insurer's provider
12 network where it can be established that the required services are not available from a provider in
13 the health insurer's network.

14 (d) The department of human services shall apply to the United States department of health
15 and human services for any amendment to the state Medicaid plan or for any Medicaid waiver as
16 necessary to implement this section. The department of human services shall submit the Medicaid
17 state plan amendment not later than September 1, 2024.

18 SECTION 5. This act shall take effect on January 1, 2025.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

1 This act would require insurance coverage for all services provided by a pharmacist
2 provided coverage of such services would have been covered if provided by a physician, advanced
3 practice nurse, or physician assistant. The health plan would be required to provide an adequate
4 number of pharmacists in its network of participating medical providers. This act would further
5 require the department of human services to apply to the United States department of health and
6 human services for any amendment to state Medicaid plan or any Medicaid waiver as necessary to
7 implement this act, no later than September 1, 2024.

8 This act would take effect on January 1, 2025.

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