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HOUSE BILL 1713

State of Washington 67th Legislature

2022 Regular Session

By Representatives Thai, Riccelli, and Bateman Prefiled 12/28/21.

AN ACT Relating to requiring cost sharing for prescription drugs to be counted against an enrollee's out-of-pocket costs, deductible, cost sharing, out-of-pocket maximum, or similar enrollee obligation, regardless of the source of the payment; amending RCW 41.05.017; and adding a new section to chapter 48.43 RCW.

- 6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- NEW SECTION. **Sec. 1.** A new section is added to chapter 48.43 RCW to read as follows:
 - (1) When calculating an enrollee's contribution to any applicable cost-sharing requirement, a health carrier offering a health plan with a pharmacy benefit, or a health care benefit manager administering benefits for the health carrier, shall include any cost-sharing amounts paid by the enrollee directly or on behalf of the enrollee by another person for a covered prescription drug. Any cost sharing or reductions made for an enrollee's benefit or towards an enrollee's applicable cost-sharing requirement shall be applied in full at the time it is rendered and wholly towards the enrollee's out-of-pocket costs, deductible, cost sharing, out-of-pocket maximum, or similar enrollee obligation.
- 20 (2) The commissioner may adopt any rules necessary to implement 21 this section.

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- 1 (3) This section applies to health plans issued or renewed on or 2 after January 1, 2023.
 - (4) This section does not apply to a qualifying health plan for a health savings account to the extent necessary to preserve the enrollee's ability to claim tax exempt contributions and withdrawals from the enrollee's health savings account under internal revenue service laws, regulations, and guidance.
 - (5) For purposes of this section:

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- 9 (a) "Health care benefit manager" has the same meaning as in RCW 10 48.200.020.
- 11 (b) "Person" has the same meaning as in RCW 48.01.070.
- 12 **Sec. 2.** RCW 41.05.017 and 2021 c 280 s 2 are each amended to 13 read as follows:
- Each health plan that provides medical insurance offered under this chapter, including plans created by insuring entities, plans not subject to the provisions of Title 48 RCW, and plans created under RCW 41.05.140, are subject to the provisions of RCW 48.43.500, 70.02.045, 48.43.505 through 48.43.535, 48.43.537, 48.43.545, 48.43.550, 70.02.110, 70.02.900, 48.43.190, 48.43.083, 48.43.0128, section 1 of this act, and chapter 48.49 RCW.

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