

2024 -- H 7043

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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2024

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A N A C T

RELATING TO INSURANCE -- BENEFIT DETERMINATION AND UTILIZATION
REVIEW ACT

Introduced By: Representatives Edwards, Diaz, Bennett, and Potter

Date Introduced: January 05, 2024

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-18.9 of the General Laws entitled "Benefit Determination and
2 Utilization Review Act" is hereby amended by adding thereto the following section:

3 **27-18.9-16. Utilization review decisions.**

4 (a) A utilization review decision shall not retrospectively deny coverage for health care
5 services provided to a covered person when prior approval has been obtained from the insurer or
6 its designee for those services, unless the approval was based upon fraudulent, materially
7 inaccurate, or misrepresented information submitted by the covered person, authorized person, or
8 the provider.

9 (b) For health benefit plans issued or renewed on or after the effective date of this section,
10 an insurer shall not require or conduct a prospective or concurrent review for a prescription
11 medicine:

12 (1) That is used in the treatment of alcohol or opioid use disorder;

13 (2) That contains Methadone, Buprenorphine or Naltrexone; or

14 (3) That was approved before the effective date of this section by the United States Food
15 and Drug Administration for the mitigation of opioid withdrawal symptoms.

16 (c) In conducting utilization reviews for Medicaid benefits, each Medicaid managed care
17 organization shall use the medical necessity criteria selected by the Rhode Island division of
18 insurance for making determinations of medical necessity and clinical appropriateness pursuant to

1 [the utilization review plan.](#)

2 SECTION 2. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

A N A C T
RELATING TO INSURANCE -- BENEFIT DETERMINATION AND UTILIZATION
REVIEW ACT

1 This act would establish a prohibition on health care insurers from requiring or conducting
2 a review for prescription medicine that is used in the treatment of alcohol or opioid use disorder,
3 that contains Methadone, Burenorphine, or Naltrexone or that was approved for the mitigation of
4 opioid withdrawal symptoms.

5 This act would take effect upon passage.

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