LC004500

### 2024 -- H 7518

# STATE OF RHODE ISLAND

#### IN GENERAL ASSEMBLY

#### JANUARY SESSION, A.D. 2024

### AN ACT

#### **RELATING TO INSURANCE -- PRESCRIPTION DRUG BENEFITS**

Introduced By: Representatives Morales, Batista, Donovan, Giraldo, Casimiro, Henries, McEntee, Fogarty, Kislak, and Azzinaro Date Introduced: February 07, 2024

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

- 1 SECTION 1. Chapter 27-20.8 of the General Laws entitled "Prescription Drug Benefits" is
- 2 hereby amended by adding thereto the following section:
- 3 <u>27-20.8-5. Co-pay cap for prescription inhaler, devices, and equipment.</u>
- 4 (a) As used in this section, unless the context otherwise requires, "prescription inhaler"
- 5 means an inhaled medication for the treatment or prevention of an FDA approved respiratory
- 6 condition, and includes pressured metered dose inhalers (pMDI), dry powdered inhalers (DPI), soft
- 7 mist inhalers (SMI), and devices or equipment used to administer medications, such as nebulizers
- 8 and holding chambers. "Prescription inhaler" does not include inhalers available over-the-counter
- 9 <u>without a prescription to provide temporary relief.</u>

10 (b) A health plan that provides coverage for prescription inhalers and devices or equipment

11 used to administer such medications, pursuant to the terms of a health coverage plan the health plan

- 12 offers, shall cap the total amount that a covered person is required to pay for a covered prescription
- 13 inhaler, device or equipment used to administer such medications, at an amount not to exceed
- 14 twenty-five dollars (\$25.00), per thirty (30) day supply. Coverage for prescription inhalers, device
- 15 or equipment used to administer such medications, shall not be subject to any deductible.
- 16 (c) Nothing in this section prevents a health plan from reducing a covered person's cost
- 17 <u>sharing to an amount less than the amount specified in subsection (b) of this section.</u>
- 18 (d) Prior authorization policies may only be used to confirm the presence of diagnoses or
- 19 other medical criteria and/or ensure that an item or service is medically necessary.

- 1 (e) The office of the health insurance commissioner may use any of its enforcement powers
- 2 <u>to obtain a health plan's compliance with this section.</u>
- 3 (f) The office of the health insurance commissioner may promulgate rules and regulations
- 4 <u>as necessary to implement and administer this section and to align with federal requirements.</u>
- 5 SECTION 2. This act shall take effect on January 1, 2025.

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### EXPLANATION

## BY THE LEGISLATIVE COUNCIL

### OF

## AN ACT

## RELATING TO INSURANCE -- PRESCRIPTION DRUG BENEFITS

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This act would cap the total amount that a covered person is required to pay for a covered
prescription inhaler, device, or equipment to twenty-five dollars (\$25.00) per thirty (30) day supply.
This act would take effect on January 1, 2025.

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