HOUSE BILL 1397

By: Delegates Pena-Melnyk, Bagnall, B. Barnes, Carey, Charles, Henson, Howell, Landis, Lehman, Reznik, Valderrama, and Valentino-Smith

Introduced and read first time: February 17, 2022 Assigned to: Rules and Executive Nominations

A BILL ENTITLED

1 AN ACT concerning

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Health Insurance – Prescription Insulin Drugs – Limits on Copayment and Coinsurance (Insulin Cost Reduction Act)

5	FOR the purpose of requiring certain insurers, nonprofit health service plans, and health
6	maintenance organizations to limit the amount a covered individual is required to
7	pay in copayments or coinsurance for a covered prescription insulin drug to a certain
8	amount; and generally relating to coverage for prescription insulin drugs under
9	health insurance.

- 10 BY adding to
- 11 Article Insurance
- 12 Section 15–822.1
- 13 Annotated Code of Maryland
- 14 (2017 Replacement Volume and 2021 Supplement)
- 15 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
 16 That the Laws of Maryland read as follows:
- 17 Article Insurance
- 18 **15–822.1.**
- 19 (A) (1) THIS SECTION APPLIES TO:

20(I) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT21PROVIDE COVERAGE FOR PRESCRIPTION DRUGS AND DEVICES TO INDIVIDUALS OR22GROUPS UNDER HEALTH INSURANCE POLICIES OR CONTRACTS THAT ARE23DELIVERED IN THE STATE; AND

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



1 (II) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE 2 COVERAGE FOR PRESCRIPTION DRUGS AND DEVICES TO INDIVIDUALS OR GROUPS 3 UNDER CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.

4 (2) AN INSURER, A NONPROFIT HEALTH SERVICE PLAN, OR A HEALTH 5 MAINTENANCE ORGANIZATION THAT PROVIDES COVERAGE FOR PRESCRIPTION 6 DRUGS AND DEVICES THROUGH A PHARMACY BENEFITS MANAGER IS SUBJECT TO 7 THE REQUIREMENTS OF THIS SECTION.

8 (B) AN ENTITY SUBJECT TO THIS SECTION SHALL LIMIT THE AMOUNT A 9 COVERED INDIVIDUAL IS REQUIRED TO PAY IN COPAYMENTS OR COINSURANCE FOR 10 A COVERED PRESCRIPTION INSULIN DRUG TO NOT MORE THAN \$30 FOR A 30-DAY 11 SUPPLY, REGARDLESS OF THE AMOUNT OR TYPE OF INSULIN NEEDED TO FILL THE 12 COVERED INDIVIDUAL'S PRESCRIPTION.

13 (C) AN ENTITY SUBJECT TO THIS SECTION MAY SET THE AMOUNT A 14 COVERED INDIVIDUAL IS REQUIRED TO PAY TO AN AMOUNT THAT IS LESS THAN THE 15 PAYMENT AMOUNT LIMIT UNDER SUBSECTION (B) OF THIS SECTION.

16 (D) A CONTRACT BETWEEN AN ENTITY SUBJECT TO THIS SECTION, OR A 17 PHARMACY BENEFITS MANAGER THROUGH WHICH THE ENTITY PROVIDES 18 COVERAGE FOR PRESCRIPTION DRUGS AND DEVICES, AND A PHARMACY OR THE 19 PHARMACY'S CONTRACTING AGENT, MAY NOT:

20 (1) AUTHORIZE A PARTY TO THE CONTRACT TO CHARGE A COVERED
21 INDIVIDUAL AN AMOUNT THAT IS MORE THAN THE PAYMENT AMOUNT LIMIT UNDER
22 SUBSECTION (B) OF THIS SECTION;

(2) REQUIRE A PHARMACY TO COLLECT FROM A COVERED
 INDIVIDUAL AN AMOUNT THAT IS MORE THAN THE PAYMENT AMOUNT LIMIT UNDER
 SUBSECTION (B) OF THIS SECTION; OR

26 (3) REQUIRE A COVERED INDIVIDUAL TO PAY AN AMOUNT THAT IS 27 MORE THAN THE PAYMENT AMOUNT LIMIT UNDER SUBSECTION (B) OF THIS 28 SECTION.

29 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all 30 policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or 31 after January 1, 2023.

32 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect 33 January 1, 2023.