

SB0773/633223/1

BY: Finance Committee

AMENDMENTS TO SENATE BILL 773
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, strike beginning with “requiring” in line 7 down through “for” in line 9 and substitute “providing that the calculation requirement does not apply to enrollees in”; strike beginning with “after” in line 9 down through “requirement” in line 10; and in line 12, after “information;” insert “requiring third parties that pay certain financial assistance to provide certain notification to an enrollee and prohibiting the third parties from conditioning the assistance on the enrollee taking certain actions;”.

AMENDMENT NO. 2

On page 3, in line 1, strike “(I)”; strike beginning with “AN” in line 1 down through “STATE” in line 4 and substitute “:

(I) AN INSURER;

(II) A NONPROFIT HEALTH SERVICE PLAN;

(III) A HEALTH MAINTENANCE ORGANIZATION; AND

(IV) ANY OTHER PERSON THAT PROVIDES HEALTH BENEFIT PLANS SUBJECT TO REGULATION BY THE STATE”;

strike in their entirety lines 5 through 9, inclusive; and in line 30, strike “PARAGRAPHS (2) AND (3)” and substitute “PARAGRAPH (2)”.

On page 4, in line 3, strike “IF THE APPLICATION OF THE” and substitute “THE”; strike beginning with “WOULD” in line 4 down through “CODE” in line 9 and

substitute “DOES NOT APPLY WITH RESPECT TO THE DEDUCTIBLE REQUIREMENT OF A HIGH-DEDUCTIBLE HEALTH PLAN IF AN ENROLLEE IS COVERED UNDER A HIGH-DEDUCTIBLE HEALTH PLAN UNDER 26 U.S.C. § 223”;

strike in their entirety lines 10 through 14, inclusive; after line 19, insert:

“(E) A THIRD PARTY THAT PAYS FINANCIAL ASSISTANCE IN ANY AMOUNT, OR PORTION OF THE AMOUNT, OF ANY APPLICABLE COST-SHARING OR OTHER OUT-OF-POCKET EXPENSE ON BEHALF OF AN ENROLLEE FOR A COVERED PRESCRIPTION DRUG:

(1) SHALL NOTIFY THE ENROLLEE WITHIN 7 DAYS OF THE ACCEPTANCE OF THE FINANCIAL ASSISTANCE OF THE TOTAL AMOUNT OF ASSISTANCE AVAILABLE AND THE DURATION FOR WHICH IT IS AVAILABLE; AND

(2) MAY NOT CONDITION THE ASSISTANCE ON ENROLLMENT IN A SPECIFIC HEALTH PLAN OR TYPE OF HEALTH PLAN, EXCEPT AS AUTHORIZED UNDER FEDERAL LAW.”;

in line 20, strike “(E)” and substitute “(F)”; in line 26, strike “PARAGRAPHS (2) AND (3)” and substitute “PARAGRAPH (2)”; and in line 31, strike “IF THE APPLICATION OF THE” and substitute “THE”.

On pages 4 and 5, strike beginning with “WOULD” in line 32 on page 4 down through “CODE” in line 2 on page 5 and substitute “DOES NOT APPLY WITH RESPECT TO THE DEDUCTIBLE REQUIREMENT OF A HIGH-DEDUCTIBLE HEALTH PLAN IF AN ENROLLEE IS COVERED UNDER A HIGH-DEDUCTIBLE HEALTH PLAN UNDER 26 U.S.C. § 223”.

On page 5, strike in their entirety lines 3 through 7, inclusive; and after line 12, insert:

“(D) A THIRD PARTY THAT PAYS FINANCIAL ASSISTANCE IN ANY AMOUNT, OR PORTION OF THE AMOUNT, OF ANY APPLICABLE COST-SHARING OR OTHER OUT-OF-POCKET EXPENSE ON BEHALF OF AN ENROLLEE FOR A COVERED PRESCRIPTION DRUG:

(1) SHALL NOTIFY THE ENROLLEE WITHIN 7 DAYS OF THE ACCEPTANCE OF THE FINANCIAL ASSISTANCE OF THE TOTAL AMOUNT OF ASSISTANCE AVAILABLE AND THE DURATION FOR WHICH IT IS AVAILABLE; AND

(2) MAY NOT CONDITION THE ASSISTANCE ON ENROLLMENT IN A SPECIFIC HEALTH PLAN OR TYPE OF HEALTH PLAN, EXCEPT AS AUTHORIZED UNDER FEDERAL LAW.”.