### 2014 -- H 7534

LC004636

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### STATE OF RHODE ISLAND

#### IN GENERAL ASSEMBLY

#### **JANUARY SESSION, A.D. 2014**

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#### AN ACT

### RELATING TO INSURANCE - COVERAGE FOR PRESCRIPTION DRUGS

Introduced By: Representatives Cimini, Naughton, Ackerman, Martin, and Bennett

Date Introduced: February 26, 2014

Referred To: House Corporations

It is enacted by the General Assembly as follows:

1 SECTION 1. Chapter 27-19 of the General Laws entitled "Nonprofit Hospital Service 2 Corporations" is hereby amended by adding thereto the following section: 3 27-19-71. Coverage for prescription drugs. -- (a) Every individual or group health 4 insurance contract, or every individual or group hospital or medical expense insurance policy, 5 plan, or group policy issued for delivery, or renewed in this state on or after the enactment of this section that provides coverage for prescription drugs shall not require an insured to use, prior to 6 7 using a brand name prescription drug prescribed by a licensed prescriber, any alternative brand 8 name prescription drugs or over-the-counter drugs. 9 (b) Health insurance contracts, plans or policies to which this section applies may require 10 an insured to use, prior to using a brand name prescription drug prescribed by a licensed 11 prescriber, a therapeutically equivalent generic drug, unless, pursuant to §§ 5-19.1-19, 5-37-18.1 12 and 21-31-15(b), the prescriber indicates "brand name necessary" on the prescription form, or if 13 the prescriber gives oral direction to that effect to the dispensing pharmacist. 14 SECTION 2. Chapter 27-20 of the General Laws entitled "Nonprofit Medical Service 15 Corporations" is hereby amended by adding thereto the following section: 16 27-20-69. Coverage for prescription drugs. -- (a) Every individual or group health 17 insurance contract, or every individual or group hospital or medical expense insurance policy, 18 plan, or group policy issued for delivery, or renewed in this state on or after the enactment of this

section that provides coverage for prescription drugs shall not require an insured to use, prior to

1	using a brand name prescription drug prescribed by a licensed prescriber, any alternative brand
2	name prescription drugs or over-the-counter drugs.
3	(b) Health insurance contracts, plans or policies to which this section applies may require
4	an insured to use, prior to using a brand name prescription drug prescribed by a licensed
5	prescriber, a therapeutically equivalent generic drug, unless, pursuant to §§ 5-19.1-19, 5-37-18.1
6	and 21-31-15(b), the prescriber indicates "brand name necessary" on the prescription form, or if
7	the prescriber gives oral direction to that effect to the dispensing pharmacist.
8	SECTION 3. Chapter 27-41 of the General Laws entitled "Health Maintenance
9	Organizations" is hereby amended by adding thereto the following section:
10	27-41-86. Coverage for prescription drugs (a) Every individual or group health
11	insurance contract, or every individual or group hospital or medical expense insurance policy,
12	plan, or group policy issued for delivery, or renewed in this state on or after the enactment of this
13	section that provides coverage for prescription drugs shall not require an insured to use, prior to
14	using a brand name prescription drug prescribed by a licensed prescriber, any alternative brand
15	name prescription drugs or over-the-counter drugs.
16	(b) Health insurance contracts, plans or policies to which this section applies may require
17	an insured to use, prior to using a brand name prescription drug prescribed by a licensed
18	prescriber, a therapeutically equivalent generic drug, unless, pursuant to §§ 5-19.1-19, 5-37-18.1
19	and 21-31-15(b), the prescriber indicates "brand name necessary" on the prescription form, or if
20	the prescriber gives oral direction to that effect to the dispensing pharmacist.
21	SECTION 4. This act shall take effect upon passage.

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# **EXPLANATION**

### BY THE LEGISLATIVE COUNCIL

OF

# AN ACT

# RELATING TO INSURANCE - COVERAGE FOR PRESCRIPTION DRUGS

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This act would prevent health insurance policies, plans or contracts that provide coverage
for prescription drugs from requiring a beneficiary to use an alternative brand name prescription
drug or over-the-counter drug prior to using a brand name prescription drug prescribed by a
licensed physician.

This act would take effect upon passage.

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