

WEST VIRGINIA LEGISLATURE

2020 REGULAR SESSION

Introduced

Senate Bill 43

FISCAL
NOTE

BY SENATORS CLINE AND MAYNARD

[Introduced January 8, 2020; referred
to the Committee on Banking and Insurance; and then to
the Committee on Finance]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,
 2 designated §5-16-8b; to amend said code by adding thereto a new section, designated
 3 §33-15-4u; to amend said code by adding thereto a new section, designated §33-15E-18;
 4 to amend said code by adding thereto a new section, designated §33-16-3ff; to amend
 5 said code by adding thereto a new section, designated §33-24-7u; to amend said code by
 6 adding thereto a new section, designated §33-25-8r; and to amend said code by adding
 7 thereto a new section, designated §33-25A-8u, all relating to imposing a cap under an
 8 insurance policy or a discount prescription drug plan on the total amount that a covered
 9 person is required to pay for a covered prescription insulin drug; and providing the cap
 10 may not exceed \$100 per 30-day supply of the drug, regardless of the amount or type of
 11 insulin needed to fill the covered person’s prescription.

Be it enacted by the Legislature of West Virginia:

**CHAPTER 5. GENERAL POWERS AND AUTHORITY OF THE
 GOVERNOR, SECRETARY OF STATE AND ATTORNEY GENERAL;
 BOARD OF PUBLIC WORKS; MISCELLANEOUS AGENCIES,
 COMMISSIONS, OFFICES, PROGRAMS, ETC.**

ARTICLE 16. WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE ACT.

§5-16-8b. Cost sharing in prescription insulin drugs; limit.

1 (a) As used in this section, unless the context otherwise requires, “prescription insulin
 2 drug” means a prescription drug that contains insulin and is used to treat diabetes.

3 (b) Notwithstanding any other provision of this article, after June 30, 2020, the plan shall
 4 provide coverage for prescription insulin drugs and cap the total amount that an employee or a
 5 dependent of a covered employee covered is required to pay for the drug at an amount not to
 6 exceed \$100 per 30-day supply of the drug, regardless of the amount or type of insulin needed to

7 fill the covered person’s prescription.

CHAPTER 33. INSURANCE.

ARTICLE 15. ACCIDENT AND SICKNESS INSURANCE.

§33-15-4u. Cost sharing in prescription insulin drugs; limit.

1 Notwithstanding any other provision of this code, a policy, plan, or contract that is issued
2 or renewed on or after June 30, 2020, and that is subject to this article that provides coverage for
3 prescription insulin drugs shall cap the total amount that a covered person is required to pay for
4 a covered prescription insulin drug at an amount not to exceed \$100 per 30-day supply of the
5 drug, regardless of the amount or type of insulin needed to fill the covered person’s prescription.

**ARTICLE 15E. DISCOUNT MEDICAL PLAN ORGANIZATIONS AND DISCOUNT
PRESCRIPTION DRUG PLAN ORGANIZATIONS ACT.**

§33-15E-18. Cost sharing in prescription insulin drugs; limit.

1 Notwithstanding any other provision of this code, a policy, plan, or contract that is issued
2 or renewed on or after June 30, 2020, and that is subject to this article that provides coverage for
3 prescription insulin drugs shall cap the total amount that a plan member is required to pay for a
4 covered prescription insulin drug at an amount not to exceed \$100 per 30-day supply of the drug,
5 regardless of the amount or type of insulin needed to fill the covered person’s prescription.

ARTICLE 16. GROUP ACCIDENT AND SICKNESS INSURANCE.

§33-16-3ff. Cost sharing in prescription insulin drugs; limit.

1 Notwithstanding any other provision of this code, a policy, plan, or contract that is issued
2 or renewed on or after June 30, 2020, and that is subject to this article that provides coverage for
3 prescription insulin drugs shall cap the total amount that a covered person is required to pay for
4 a covered prescription insulin drug at an amount not to exceed \$100 per 30-day supply of the
5 drug, regardless of the amount or type of insulin needed to fill the covered person’s prescription.

ARTICLE 24. HOSPITAL SERVICE CORPORATIONS, MEDICAL SERVICE

CORPORATIONS, DENTAL SERVICE CORPORATIONS AND HEALTH SERVICE CORPORATIONS.

§33-24-7u. Cost sharing in prescription insulin drugs; limit.

1 Notwithstanding any other provision of this code, a policy, plan, or contract that is issued
2 or renewed on or after June 30, 2020, and that is subject to this article that provides coverage for
3 prescription insulin drugs shall cap the total amount that a covered person is required to pay for
4 a covered prescription insulin drug at an amount not to exceed \$100 per 30-day supply of the
5 drug, regardless of the amount or type of insulin needed to fill the covered person's prescription.

ARTICLE 25. HEALTH CARE CORPORATIONS.

§33-25-8r. Cost sharing in prescription insulin drugs; limit.

1 Notwithstanding any other provision of this code, a policy, plan, or contract that is issued
2 or renewed on or after June 30, 2020, and that is subject to this article that provides coverage for
3 prescription insulin drugs shall cap the total amount that a covered person is required to pay for
4 a covered prescription insulin drug at an amount not to exceed \$100 per 30-day supply of the
5 drug, regardless of the amount or type of insulin needed to fill the covered person's prescription.

ARTICLE 25A. HEALTH MAINTENANCE ORGANIZATION ACT.

§33-25A-8u. Cost sharing in prescription insulin drugs; limit.

1 Notwithstanding any other provision of this code, a policy, plan, or contract that is issued
2 or renewed on or after June 30, 2020, and that is subject to this article that provides coverage for
3 prescription insulin drugs shall cap the total amount that a covered person is required to pay for
4 a covered prescription insulin drug at an amount not to exceed \$100 per 30-day supply of the
5 drug, regardless of the amount or type of insulin needed to fill the covered person's prescription.

NOTE: The purpose of this bill is to cap, under an insurance policy or a discount prescription drug plan, the total amount that a covered person is required to pay for a covered prescription insulin drug. The cap may not exceed \$100 per 30-day supply of the drug, regardless of the amount or type of insulin needed to fill the covered person's prescription.

Strike-throughs indicate language that would be stricken from a heading or the present law, and underscoring indicates new language that would be added.