

1 S.147

2 Introduced by Senator Mullin

3 Referred to Committee on

4 Date:

5 Subject: Health; health insurance; prescription drugs; step therapy; off-label  
6 usage

7 Statement of purpose of bill as introduced: This bill proposes to limit to one  
8 the number of times an insurer can require a drug to be prescribed for a  
9 specific patient before the insurance plan will cover another medication. It  
10 would also prohibit anyone other than a health care professional from  
11 assigning to a patient an off-label pharmaceutical regimen.

12 An act relating to access to medication prescribed by a health care  
13 professional

14 It is hereby enacted by the General Assembly of the State of Vermont:

15 Sec. 1. 8 V.S.A. § 4089i is amended to read:

16 § 4089i. PRESCRIPTION DRUG COVERAGE

17 \* \* \*

18 (e)(1) A health insurance or other health benefit plan offered by a health  
19 insurer or pharmacy benefit manager that provides coverage for prescription  
20 drugs and uses step-therapy protocols shall not:

1           (A) require failure on the same medication on more than one  
2           occasion for continuously enrolled members or subscribers; or

3           (B) collect a co-payment greater than the lowest cost co-payment for  
4           preferred drugs in the same class from a member or subscriber who has  
5           satisfied the step-therapy protocol requirements, as determined by the  
6           prescribing health care professional.

7           (2) Nothing in this subsection shall be construed to prohibit the use of  
8           tiered co-payments for members or subscribers not subject to a step-therapy  
9           protocol.

10          (f)(1) A health insurance or other health benefit plan offered by a health  
11          insurer or pharmacy benefit manager that provides coverage for prescription  
12          drugs shall not require, as a condition of coverage, use of drugs not indicated  
13          by the federal Food and Drug Administration for the condition diagnosed and  
14          being treated under supervision of a health care professional.

15          (2) Nothing in this subsection shall be construed to prevent a health care  
16          professional from prescribing a medication for off-label use.

17          (g) As used in this section:

18                (1) "Health care professional" means an individual licensed to practice  
19                medicine under 26 V.S.A. chapter 23 or 33, an individual certified as a  
20                physician assistant under 26 V.S.A. chapter 31, or an individual licensed as an  
21                advanced practice registered nurse under 26 V.S.A. chapter 28.

1           (2) “Health insurer” shall have the same meaning as in 18 V.S.A.

2           § 9402.

3           ~~(2)~~(3) “Out-of-pocket expenditure” means a co-payment, coinsurance,  
4           deductible, or other cost-sharing mechanism.

5           ~~(3)~~(4) “Pharmacy benefit manager” shall have the same meaning as in  
6           section 4089j of this title.

7           (5) “Step therapy” means protocols that establish the specific sequence  
8           in which prescription drugs for a specific medical condition are to be  
9           prescribed.

10          ~~(f)~~(h) The ~~department of financial regulation~~ Department of Financial  
11          Regulation shall enforce this section and may adopt rules as necessary to carry  
12          out the purposes of this section.

13          Sec. 2. EFFECTIVE DATE

14          This act shall take effect on July 1, 2013.