First Regular Session Seventy-first General Assembly STATE OF COLORADO

REVISED

This Version Includes All Amendments Adopted on Second Reading in the Second House SENATE BILL 17-203

LLS NO. 17-0852.02 Kristen Forrestal x4217

SENATE SPONSORSHIP

Todd, Coram, Aguilar, Crowder, Kefalas

HOUSE SPONSORSHIP

Covarrubias and Kennedy,

Senate Committees Business, Labor, & Technology House Committees Health, Insurance, & Environment

A BILL FOR AN ACT

101	CONCERNING THE PROHIBITION AGAINST A CARRIER REQUIRING A
102	COVERED PERSON TO UNDERGO STEP THERAPY, AND, IN
103	CONNECTION THEREWITH, REQUIRING COVERAGE FOR A
104	PRESCRIBED MEDICATION THAT IS PART OF THE CARRIER'S
105	MEDICATION FORMULARY.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <u>http://leg.colorado.gov</u>.)

The bill prohibits a carrier from requiring a covered person to undergo step therapy:

HOUSE Amended 2nd Reading April 13, 2017



Amended 2nd Reading March 21, 2017

SENATE

- ! When being treated for a terminal condition; or
- ! If the covered person has tried a step-therapy-required drug under a health benefit plan and the drug was discontinued by the manufacturer.

A carrier that requires step therapy must have an override process for health care providers.

"Step therapy" is defined as a protocol that requires a covered person to use a prescription drug or sequence of prescription drugs, other than the drug that the covered person's health care provider recommends for the covered person's treatment, before the carrier provides coverage for the recommended drug.

1 Be it enacted by the General Assembly of the State of Colorado: 2 SECTION 1. In Colorado Revised Statutes, add 10-16-145 as 3 follows: 4 10-16-145. Step therapy - prohibited - definitions. (1) FOR THE 5 PURPOSES OF THIS <u>SECTION</u>, "STEP _____ THERAPY" MEANS A PROTOCOL 6 THAT REQUIRES A COVERED PERSON TO USE A PRESCRIPTION DRUG OR 7 SEQUENCE OF PRESCRIPTION DRUGS, OTHER THAN THE DRUG THAT THE 8 COVERED PERSON'S HEALTH CARE PROVIDER RECOMMENDS FOR THE 9 COVERED PERSON'S TREATMENT, BEFORE THE CARRIER PROVIDES 10 COVERAGE FOR THE RECOMMENDED PRESCRIPTION DRUG. 11 12 (2) A CARRIER SHALL NOT REQUIRE A COVERED PERSON TO 13 UNDERGO STEP THERAPY, AND SHALL PROVIDE COVERAGE FOR THE DRUG 14 PRESCRIBED BY THE COVERED PERSON'S HEALTH CARE PROVIDER AS LONG 15 AS THE PRESCRIBED DRUG IS ON THE CARRIER'S PRESCRIPTION DRUG 16 FORMULARY, WHEN: 17 THE PATIENT HAS TRIED THE STEP THERAPY-REQUIRED (a) 18 PRESCRIPTION DRUGS WHILE UNDER HIS OR HER CURRENT OR PREVIOUS

19 HEALTH INSURANCE OR HEALTH BENEFIT PLAN, AND SUCH PRESCRIPTION

1 DRUGS WERE DISCONTINUED BY THE PRESCRIBING HEALTH CARE PROVIDER 2 DUE TO LACK OF EFFICACY OR EFFECTIVENESS, DIMINISHED EFFECT, OR AN 3 ADVERSE EVENT. PHARMACY DRUG SAMPLES SHALL NOT BE CONSIDERED 4 TRIAL AND FAILURE OF A PREFERRED PRESCRIPTION DRUG IN LIEU OF 5 TRYING THE STEP THERAPY-REQUIRED PRESCRIPTION DRUG. 6 (3) A CARRIER THAT REQUIRES STEP THERAPY SHALL PROVIDE AN 7 OVERRIDE PROCESS FOR A PRESCRIBED PRESCRIPTION DRUG. A CARRIER 8 MUST EXPEDITIOUSLY GRANT AN OVERRIDE WHEN THE TREATING HEALTH 9 CARE PROVIDER CAN SHOW THAT THE CARRIER'S PREFERRED DRUG IS 10 CONTRAINDICATED OR WILL LIKELY CAUSE AN ADVERSE REACTION. THE 11 TREATING HEALTH CARE PROVIDER MAY USE PEER-REVIEWED DATA OR 12 CLINICAL GUIDELINES OR CLINICAL TRIAL RESULTS AS A PART OF THIS 13 PROCESS. (4) THE HEALTH CARRIER, HEALTH BENEFIT PLAN, OR UTILIZATION 14 15 **REVIEW ORGANIZATION MAY REQUEST RELEVANT DOCUMENTATION FROM** 16 THE PATIENT OR PROVIDER TO SUPPORT THE OVERRIDE REQUEST. 17 (5) THIS SECTION IS SUBJECT TO THE INTERNAL AND EXTERNAL 18 APPEALS PROCESSES IN SECTIONS 10-16-113 AND 10-16-113.5. 19 (6) THIS SECTION DOES NOT <u>PRECLUDE A</u> _____ CARRIER FROM 20 REQUIRING PRIOR AUTHORIZATION FOR THE COVERAGE OF A PRESCRIBED 21 DRUG THAT WAS COVERED BY THE COVERED PERSON'S FORMER HEALTH 22 INSURANCE OR HEALTH BENEFIT PLAN; EXCEPT THAT PRIOR 23 AUTHORIZATION MUST NOT INCLUDE A STEP THERAPY REQUIREMENT. 24 25 **SECTION 2.** Act subject to petition - effective date. This act 26 takes effect September 1, 2017; except that, if a referendum petition is 27 filed pursuant to section 1 (3) of article V of the state constitution against

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this act or an item, section, or part of this act within the ninety-day period after final adjournment of the general assembly, then the act, item, section, or part will not take effect unless approved by the people at the general election to be held in November 2018 and, in such case, will take effect on the date of the official declaration of the vote thereon by the governor.