

By: Gooden

H.B. No. 2262

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plan coverage for accelerated refills of certain prescription eye drops.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subchapter A, Chapter 1369, Insurance Code, is amended by adding Section 1369.0041 to read as follows:

Sec. 1369.0041. ACCELERATED REFILLS OF CERTAIN PRESCRIPTION EYE DROPS. (a) Subject to Subsection (b), a health benefit plan that covers prescription eye drops to treat a chronic eye disease or condition may not deny coverage for a refill of the eye drops because the prescription is being refilled before the date established by the plan's general prescription refill guidelines if:

(1) the original prescription states that additional quantities of the eye drops are needed; and

(2) the refill does not exceed the total quantity of dosage units authorized by the prescribing provider on the original prescription, including refills.

(b) A health benefit plan must provide coverage for the refill of a prescription for eye drops described by Subsection (a) that is dispensed on or before the last day of the prescribed dosage period and:

(1) not earlier than the 21st day after the date a prescription for a 30-day supply of eye drops is dispensed;

1 (2) not earlier than the 42nd day after the date a
2 prescription for a 60-day supply of eye drops is dispensed; or

3 (3) not earlier than the 63rd day after the date a
4 prescription for a 90-day supply of eye drops is dispensed.

5 (c) A health benefit plan may not impose a deductible,
6 copayment, coinsurance, or other cost-sharing provision applicable
7 to benefits for an accelerated refill under this section unless the
8 amount of the required cost-sharing is the same as or less than the
9 amount of the required cost-sharing applicable to benefits for
10 other prescription drugs under the plan.

11 SECTION 2. Section 1369.0041, Insurance Code, as added by
12 this Act, applies only to a health benefit plan delivered, issued
13 for delivery, or renewed on or after January 1, 2018. A health
14 benefit plan delivered, issued for delivery, or renewed before
15 January 1, 2018, is governed by the law as it existed immediately
16 before the effective date of this Act, and that law is continued in
17 effect for that purpose.

18 SECTION 3. This Act takes effect September 1, 2017.