

**129th MAINE LEGISLATURE**

**First REGULAR SESSION-2019**

# Legislative Document No. XXXX

S.P. XXX In Senate, January \_\_, 2019

# An Act To Amend the Substance Abuse-Related Disorder Insurance Coverage Laws

(AFTER DEADLINE)

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 205.

Reference to the Committee on Labor, Commerce, Research and Economic Development suggested and ordered printed.



HEATHER J.R. PRIEST

Secretary of the Senate

Presented by Senator \_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Be it enacted by the People of the State of Maine as follows:**

Sec. 1. **24**-**A MRSA §2749-D** is enacted to read:

 1. All insurers that execute, deliver, issue for delivery, continue or renew individual policies and contracts that provide prescription drug benefits for the treatment of substance abuse-related disorders shall comply with the following:

A. Each insurer shall not impose any prior authorization requirements on any prescription medication approved by the federal Food and Drug Administration (FDA) for the treatment of substance abuse-related disorders;

B. Each insurer shall not impose any step therapy requirements before the insurer will authorize coverage for a prescription medication approved by the FDA for the treatment of substance abuse-related disorders;

C. Each insurer shall place all prescription medications approved by the FDA for the treatment of substance abuse-related disorders on the lowest tier of the drug formulary developed and maintained by the insurer; and

D. Each insurer shall not exclude coverage for any prescription medication approved by the FDA for the treatment of substance abuse-related disorders and any associated counseling or wraparound services on the grounds that such medications and services were court ordered.

Sec. 2. **24**-**A MRSA §2847-V** is enacted to read:

 1. Every insurer that issues group health care contracts that provide prescription drug benefits for the treatment of substance abuse-related disorders shall comply with the following:

A. Each insurer shall not impose any prior authorization requirements on any prescription medication approved by the federal Food and Drug Administration (FDA) for the treatment of substance abuse-related disorders;

B. Each insurer shall not impose any step therapy requirements before the insurer will authorize coverage for a prescription medication approved by the FDA for the treatment of substance abuse-related disorders;

C. Each insurer shall place all prescription medications approved by the FDA for the treatment of substance abuse-related disorders on the lowest tier of the drug formulary developed and maintained by the insurer; and

D. Each insurer shall not exclude coverage for any prescription medication approved by the FDA for the treatment of substance abuse-related disorders and any associated counseling or wraparound services on the grounds that such medications and services were court ordered.

Sec. 3. **24**-**A MRSA §4234-F** is enacted to read:

 1. Every health maintenance organization that issues individual or group health care contracts that provide prescription drug benefits for the treatment of substance abuse-related disorders shall comply with the following:

A. Each health maintenance organization shall not impose any prior authorization requirements on any prescription medication approved by the federal Food and Drug Administration (FDA) for the treatment of substance abuse-related disorders;

B. Each health maintenance organization shall not impose any step therapy requirements before the health maintenance organization will authorize coverage for a prescription medication approved by the FDA for the treatment of substance abuse-related disorders;

C. Each health maintenance organization shall place all prescription medications approved by the FDA for the treatment of substance abuse-related disorders on the lowest tier of the drug formulary developed and maintained by the health maintenance organization; and

D. Each health maintenance organization shall not exclude coverage for any prescription medication approved by the FDA for the treatment of substance abuse-related disorders and any associated counseling or wraparound services on the grounds that such medications and services were court ordered.

Sec. 4. **24 MRSA §2325-D** is enacted to read:

1. Every nonprofit hospital or medical service organization that issues group health care contracts that provide prescription drug benefits for the treatment of substance abuse-related disorders shall comply with the following:

A. Each nonprofit hospital or medical service organization shall not impose any prior authorization requirements on any prescription medication approved by the federal Food and Drug Administration (FDA) for the treatment of substance abuse-related disorders;

B. Each nonprofit hospital or medical service organization shall not impose any step therapy requirements before the nonprofit hospital or medical service organization will authorize coverage for a prescription medication approved by the FDA for the treatment of substance abuse-related disorders;

C. Each nonprofit hospital or medical service organization shall place all prescription medications approved by the FDA for the treatment of substance abuse-related disorders on the lowest tier of the drug formulary developed and maintained by the nonprofit hospital or medical service organization; and

D. Each nonprofit hospital or medical service organization shall not exclude coverage for any prescription medication approved by the FDA for the treatment of substance abuse-related disorders and any associated counseling or wraparound services on the grounds that such medications and services were court ordered.

 **Sec. 5. Application.** The requirements of this Act apply to all insurers, health maintenance organizations, and nonprofit hospital or medical service organizations that execute, deliver, issue for delivery, continue or renew individual and group policies, contracts and certificates in this State on or after January, 2019.

**Summary**

This bill requires insurers, health maintenance organizations, and nonprofit hospital or medical service organizations to submit mental health and substance abuse-related disorder parity compliance reports. It specifies how the Superintendent of Insurance may enforce parity requirements and stipulates parity reporting requirements for the Superintendent. This bill also prohibits certain types of medical management protocols from being used in conjunction with prescription medications used to treat substance abuse-related disorders.