

Committee on Banking and Insurance

HB 459 — Step-therapy Protocols

by Rep. Willhite and others (SB 730 by Senators Harrell, Polsky, and Ausley)

The bill requires a health insurer or health maintenance organization (HMO) to prescribe the manner, form, and timeframe in which an insured or subscriber may request a protocol exception or exemption and publish such information on its website. A step-therapy protocol is a written protocol used by an insurer or an HMO that specifies the order in which certain medical procedures, treatments, or prescription drugs are used to treat a condition. A protocol exemption is a determination by an insurer or HMO to authorize the use of an alternate procedure, treatment, or prescription drug to treat a condition of an insured or subscriber rather than the procedure, treatment, or drug indicated by the step-therapy protocol.

The bill requires the insurer or HMO to authorize or deny a protocol exemption in a reasonable amount of time. If the insurer or HMO denies the protocol exemption, the insurer or HMO must provide the insured or subscriber with a written response that explains the reason and clinical rationale for the denial and the procedure for appealing a denial.

If approved by the Governor, these provisions take effect July 1, 2022.

Vote: Senate 39-0; House 107-0