



General Assembly

Amendment

February Session, 2022

LCO No. 6357



Offered by:

REP. WOOD K., 29th Dist.
REP. PAVALOCK-D'AMATO, 77th Dist.
REP. COOK, 65th Dist.
REP. CARPINO, 32nd Dist.
REP. NUCCIO, 53rd Dist.

To: House Bill No. 5400

File No. 302

Cal. No. 232

"AN ACT CONCERNING THE REGULATION OF INSURANCE IN THE STATE."

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. Subdivision (1) of subsection (b) of section 38a-510 of the
4 general statutes is repealed and the following is substituted in lieu
5 thereof (*Effective October 1, 2022*):

6 (b) (1) Notwithstanding the sixty-day period set forth in subdivision
7 (2) of subsection (a) of this section, each insurance company, hospital
8 service corporation, medical service corporation, health care center or
9 other entity that uses step therapy for such prescription drugs shall
10 establish and disclose to its health care providers a process by which an
11 insured's treating health care provider may request at any time an

12 override of the use of any step therapy drug regimen. Such disclosure
13 shall be made to health care providers in writing at least once each
14 calendar year, and such health care provider shall display in a
15 conspicuous and prominent location, including the provider's Internet
16 web site and on a bulletin board in the provider's office, information
17 regarding the override process. Any such override process shall be
18 convenient to use by health care providers and an override request shall
19 be expeditiously granted when an insured's treating health care
20 provider demonstrates that the drug regimen required under step
21 therapy (A) has been ineffective in the past for treatment of the insured's
22 medical condition, (B) is expected to be ineffective based on the known
23 relevant physical or mental characteristics of the insured and the known
24 characteristics of the drug regimen, (C) will cause or will likely cause an
25 adverse reaction by or physical harm to the insured, or (D) is not in the
26 best interest of the insured, based on medical necessity. Until October 1,
27 2025, in the case of a prescribed drug for the treatment of schizophrenia,
28 major depressive disorder or bipolar disorder, as defined in the most
29 recent edition of the Diagnostic and Statistical Manual of Mental
30 Disorders, such override request shall be granted not later than twenty-
31 four hours from the time of request.

32 Sec. 2. (*Effective from passage*) (a) There is established a task force to
33 study data collection efforts regarding step therapy. Such study shall
34 include, but need not be limited to, data collection regarding step
35 therapy edits, rejections and appeals of behavioral health drugs and the
36 best methods to collect such data.

37 (b) The task force shall consist of the following members:

38 (1) The chairpersons and ranking members of the joint standing
39 committees of the General Assembly having cognizance of matters
40 relating to public health and insurance, or their designees;

41 (2) The executive director of the Office of Health Strategy, or the
42 executive director's designee;

43 (3) The Insurance Commissioner, or the Insurance Commissioner's

44 designee;

45 (4) The Commissioner of Consumer Protection, or the commissioner's
46 designee;

47 (5) One representative of the insurance industry, to be appointed by
48 the House chairperson of the joint standing committee of the General
49 Assembly having cognizance of matters relating to insurance;

50 (6) One representative of the pharmaceutical industry, to be
51 appointed by the House ranking member of the joint standing
52 committee of the General Assembly having cognizance of matters
53 relating to insurance;

54 (7) One mental health care provider, to be appointed by the House
55 chairperson of the joint standing committee of the General Assembly
56 having cognizance of matters relating to insurance; and

57 (8) One representative of a mental health advocacy group, who shall
58 be an impacted individual, to be appointed by the House ranking
59 member of the joint standing committee of the General Assembly
60 having cognizance of matters relating to public health.

61 (c) The administrative staff of the joint standing committee of the
62 General Assembly having cognizance of matters relating to public
63 health shall serve as administrative staff of the task force.

64 (d) Not later than July 1, 2023, the task force shall submit a report on
65 its findings and recommendations to the joint standing committees of
66 the General Assembly having cognizance of matters relating to
67 insurance and public health, in accordance with the provisions of
68 section 11-4a of the general statutes. The task force shall terminate on
69 the date that it submits such report or on July 1, 2023, whichever is
70 earlier."

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>October 1, 2022</i>	38a-510(b)(1)
Sec. 2	<i>from passage</i>	New section