

# STATE OF NEW YORK

8533

2019-2020 Regular Sessions

## IN ASSEMBLY

August 14, 2019

Introduced by M. of A. JOYNER -- read once and referred to the Committee on Health

AN ACT to amend the public health law, in relation to drug assistance demonstration and emergency prescriptions; and to amend the insurance law, in relation to capping cost sharing for insulin

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. The public health law is amended by adding two new sections  
2 279-a and 279-b to read as follows:

3 § 279-a. Drug assistance demonstration program. The commissioner shall  
4 develop a demonstration program to ensure access to insulin and other  
5 life sustaining, maintenance prescription medications identified by the  
6 commissioner for residents of the state who are uninsured, are ineligi-  
7 ble for Medicaid or other publicly funded health coverage, or are other-  
8 wise determined to be eligible by the commissioner and depend upon such  
9 medication for their survival. In developing such program the commis-  
10 sioner shall:

11 1. consider modeling the drug assistance demonstration program on the  
12 state's HIV/AIDS drug assistance program providing access to eligible  
13 individuals at certain income thresholds above the federal poverty  
14 level;

15 2. engage with pharmaceutical manufacturers to explore a public  
16 private partnership designed to bring affordable medications through the  
17 demonstration program to eligible individuals; and

18 3. report to the governor, the temporary president of the senate, the  
19 speaker of the assembly, and the chairs of the senate and assembly  
20 health committees on the available options to establish a drug assist-  
21 ance demonstration program, various cost sharing models for eligible  
22 participants and the related costs to the state associated with imple-  
23 menting such a program no later than January thirty-first, two thousand  
24 twenty.

EXPLANATION--Matter in italics (underscored) is new; matter in brackets  
[-] is old law to be omitted.

LBD13323-03-9

1     § 279-b. Emergency prescriptions. 1. A health care practitioner who is  
2 authorized to prescribe drugs may issue a non-patient-specific  
3 prescription for pharmacists to dispense an emergency prescription to  
4 refill an expired prescription pursuant to subdivision two of this  
5 section.

6     2. A pharmacist may dispense insulin and related supplies, or other  
7 life sustaining, maintenance prescription medications identified by the  
8 commissioner, through a non-patient specific prescription, to an indi-  
9 vidual who has had a valid prescription for any type of insulin, or  
10 other medications identified by the commissioner, during the prior  
11 twelve month period which has since expired, on an emergency basis  
12 provided the pharmacist:

13     (a) first attempts to obtain an authorization from the authorized  
14 prescriber and cannot obtain the authorization;

15     (b) believes, that in the pharmacist's professional judgment, the  
16 interruption of the therapy reasonably might produce an undesirable  
17 health consequence detrimental to the patient's welfare or cause phys-  
18 ical or mental discomfort;

19     (c) provides only one refill of the prescription and the quantity of  
20 that refill is in conformity with the prescribed directions for use, but  
21 limited to an amount not to exceed a thirty-day emergency supply; and

22     (d) notifies, within seventy-two hours of dispensing the refill, the  
23 prescriber that an emergency prescription has been dispensed.

24     § 2. Subparagraph (B) of paragraph 15-a of subsection (i) of section  
25 3216 of the insurance law, as added by chapter 378 of the laws of 1993  
26 and such paragraph as renumbered by chapter 338 of the laws of 2003, is  
27 amended to read as follows:

28     (B) Such coverage may be subject to annual deductibles and coinsurance  
29 as may be deemed appropriate by the superintendent and as are consistent  
30 with those established for other benefits within a given policy;  
31 provided however, the total amount that a covered person is required to  
32 pay out of pocket for a covered prescription insulin drug shall be  
33 capped at an amount not to exceed one hundred dollars per thirty-day  
34 supply, regardless of the amount or type of insulin needed to fill such  
35 covered person's prescription and regardless of the insured's deduct-  
36 ible, copayment, coinsurance, out of pocket maximum or any other cost  
37 sharing requirement.

38     § 3. Subparagraph (B) of paragraph 7 of subsection k of section 3221  
39 of the insurance law, as amended by chapter 338 of the laws of 2003, is  
40 amended to read as follows:

41     (B) Such coverage may be subject to annual deductibles and coinsurance  
42 as may be deemed appropriate by the superintendent and as are consistent  
43 with those established for other benefits within a given policy;  
44 provided however, the total amount that a covered person is required to  
45 pay out of pocket for a covered prescription insulin drug shall be  
46 capped at an amount not to exceed one hundred dollars per thirty-day  
47 supply, regardless of the amount or type of insulin needed to fill such  
48 covered person's prescription and regardless of the insured's deduct-  
49 ible, copayment, coinsurance, out of pocket maximum or any other cost  
50 sharing requirement.

51     § 4. Paragraph 2 of subsection (u) of section 4303 of the insurance  
52 law, as amended by chapter 338 of the laws of 2003, is amended to read  
53 as follows:

54     (2) Such coverage may be subject to annual deductibles and coinsurance  
55 as may be deemed appropriate by the superintendent and as are consistent  
56 with those established for other benefits within a given policy;

1 provided however, the total amount that a covered person is required to  
2 pay out of pocket for a covered prescription insulin drug shall be  
3 capped at an amount not to exceed one hundred dollars per thirty-day  
4 supply, regardless of the amount or type of insulin needed to fill such  
5 covered person's prescription and regardless of the insured's deduct-  
6 ible, copayment, coinsurance, out of pocket maximum or any other cost  
7 sharing requirement.

8 § 5. This act shall take effect immediately; provided however that  
9 sections two, three and four of this act shall take effect January 1,  
10 2020.