## **SENATE . . . . . . . . . . . . . . . No. 422**

## The Commonwealth of Massachusetts

PRESENTED BY:

Barry R. Finegold

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to step therapy pain.

PETITION OF:

NAME: DISTRICT/ADDRESS:

Barry R. Finegold

**SENATE . . . . . . . . . . . . . . . No. 422** 

By Mr. Finegold, a petition (accompanied by bill, Senate, No. 422) of Barry R. Finegold for legislation relative to step therapy pain. Financial Services.

## The Commonwealth of Alassachusetts

In the Year Two Thousand Eleven

An Act relative to step therapy pain.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

- SECTION 1. Chapter 175 of the General Laws is hereby amended by inserting after section 108J the following section:-
- 3 Section 108K. (a) For the purposes of this section, "generically equivalent drug"
- 4 means drug products with the same active chemical ingredients of the same strength, quantity,
- 5 and dosage form, and of the same generic drug name, as determined by the United States
- 6 Adopted Names (USAN) and accepted by the federal Food and Drug Administration (FDA), as
- 7 those drug products having the same chemical ingredients.
- 8 (b) A health care service plan contract that covers outpatient prescription drug benefits
- 9 shall provide coverage for a drug that has been prescribed by a participating licensed health care
- professional for the treatment of pain and shall not require the subscriber or enrollee to first use
- an alternative prescription drug or an over-the-counter drug, but may require the subscriber or
- 12 enrollee to first use a generically equivalent drug.

(c) This section does not prohibit a health care service plan from charging a subscriber or enrollee a copayment or a deductible for prescription drug benefits or from setting forth, by contract, limitations on maximum coverage of prescription drug

- benefits, provided that the copayments, deductibles, or limitations are reported to, and held unobjectionable by, the director and set forth to the subscriber or enrollee.
  - (d) Nothing in this section shall be construed to require coverage of prescription drugs not in a plan's drug formulary or to prohibit generically equivalent drugs or generic drug substitutions.
  - (e) A health insurance policy that covers outpatient prescription drug benefits shall provide coverage for a drug that has been prescribed by a participating licensed
  - health care professional for the treatment of pain and shall not require the insured to first use an alternative prescription drug or an over-the-counter drug, but may require the insured to first use a generically equivalent drug.
  - (f) This section does not prohibit a health insurance policy from charging an insured a copayment or a deductible for prescription drug benefits or from setting forth, by contract, limitations on maximum coverage of prescription drug benefits,
  - provided that the copayments, deductibles, or limitations are reported to, and held unobjectionable by, the commissioner and set forth to the insured pursuant to the disclosure provisions.
  - (g) Nothing in this section shall be construed to require coverage of prescription drugs not in an insurer's drug formulary or to prohibit generically equivalent drugs or

34 generic drug substitutions.