

State of Arkansas
92nd General Assembly
Regular Session, 2019

A Bill

HOUSE BILL 1864

By: Representative D. Ferguson

For An Act To Be Entitled

AN ACT TO AMEND THE PRIOR AUTHORIZATION TRANSPARENCY ACT; TO PROHIBIT PRIOR AUTHORIZATION FOR MEDICATION-ASSISTED TREATMENT; TO DECLARE AN EMERGENCY; AND FOR OTHER PURPOSES.

Subtitle

TO AMEND THE PRIOR AUTHORIZATION TRANSPARENCY ACT; TO PROHIBIT PRIOR AUTHORIZATION FOR MEDICATION-ASSISTED TREATMENT; AND TO DECLARE AN EMERGENCY.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code § 23-99-1103(8), concerning the definition of "healthcare insurer" under the Prior Authorization Transparency Act, is amended to read as follows:

(8)(A)(i) "Healthcare insurer" means an entity that is subject to state insurance regulation, including an insurance company, a health maintenance organization, self-insured health plan for employees of a governmental entity, and a hospital and medical service corporation, a risk-based provider organization, and a sponsor of a nonfederal self-funded governmental plan.

(ii) "Healthcare insurer" includes Medicaid where specifically referenced in § 23-99-1119.

(B) "Healthcare insurer" does not include:

(i) workers' compensation plans or A workers' compensation plan; or



(ii) Medicaid, except as provided under § 23-99-1119 or when Medicaid services are managed or reimbursed by a healthcare insurer; or

~~(C) "Healthcare insurer" does not include an~~ (iii) An entity that provides only dental benefits or eye and vision care benefits;

SECTION 2. Arkansas Code § 23-99-1103, concerning the definitions under the Prior Authorization Transparency Act, is amended to add an additional subdivision to read as follows:

(21) "Prescription for medication-assisted treatment" means any prescription for medication used as treatment for opioid addiction.

SECTION 3. Arkansas Code Title 23, Chapter 99, Subchapter 11, is amended to add an additional section to read as follows:

23-99-1119. Medication-assisted treatment for opioid addiction.

(a) A healthcare insurer, including Medicaid, shall not:

(1) Require prior authorization in order for a patient to obtain coverage of buprenorphine, methadone, naloxone, naltrexone, Suboxone, or the various formulations of these drugs approved by the United States Food and Drug Administration for the treatment of opioid addiction; or

(2) Impose any other requirement other than a valid prescription or compliance with the medication-assisted treatment guidelines issued by the United States Substance Abuse and Mental Health Services Administration in order for a patient to obtain coverage of buprenorphine, methadone, naloxone, naltrexone, Suboxone, or the various formulations of these drugs approved by the United States Food and Drug Administration for the treatment of opioid addiction.

(b) If a new formulation or medication for treatment of opioid addiction becomes available after the effective date of this section and is either more expensive or has not been shown to be more effective than the formulations and medications in subsection (a) of this section, then the healthcare insurer may require prior authorization of the new formulation or medication.

(c) A charge for coverage of a prescription for medication-assisted treatment for opioid addiction, if applicable, shall be on the lowest-cost benefit tier of a prescription drug formulary.

(d) For purposes of any limit a healthcare insurer imposes on the number of prescriptions for a patient, a prescription for medication-assisted treatment shall not be counted.

(e) This section does not affect the responsibility of a healthcare provider to comply with the standard of care for medication-assisted treatment, including without limitation the use of therapy in combination with medication.

SECTION 4. EMERGENCY CLAUSE. It is found and determined by the General Assembly of the State of Arkansas that medication-assisted treatment is effective at treating opioid addiction and results in substantial cost savings; that some healthcare insurers, including Medicaid, are placing numerous prior authorization requirements on healthcare providers and their patients who are in need of medication-assisted treatment; that these requirements are counterproductive; and that this act is immediately necessary because, as a result of these requirements, patients resort to continued illegal drug use to stop withdrawals and physicians may be deterred from treating patients due to the difficult prior authorization requirements. Therefore, an emergency is declared to exist, and this act being immediately necessary for the preservation of the public peace, health, and safety shall become effective on:

(1) The date of its approval by the Governor;

(2) If the bill is neither approved nor vetoed by the Governor, the expiration of the period of time during which the Governor may veto the bill; or

(3) If the bill is vetoed by the Governor and the veto is overridden, the date the last house overrides the veto.