

Stricken language would be deleted from and underlined language would be added to present law.

State of Arkansas
93rd General Assembly
Regular Session, 2021

As Engrossed: H3/8/21
A Bill

HOUSE BILL 1450

By: Representatives *Magie, Eubanks*
By: Senator Bledsoe

For An Act To Be Entitled

AN ACT TO REQUIRE A HEALTH BENEFIT PLAN TO PROVIDE
COVERAGE FOR EARLY REFILLS OF PRESCRIPTION EYE DROPS;
TO ESTABLISH THE ARKANSAS COVERAGE FOR EARLY REFILLS
OF PRESCRIPTION EYE DROPS ACT; AND FOR OTHER
PURPOSES.

Subtitle

TO REQUIRE A HEALTH BENEFIT PLAN TO
PROVIDE COVERAGE FOR EARLY REFILLS OF
PRESCRIPTION EYE DROPS; AND TO ESTABLISH
THE ARKANSAS COVERAGE FOR EARLY REFILLS
OF PRESCRIPTION EYE DROPS ACT.

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

SECTION 1. Arkansas Code Title 23, Chapter 79, is amended to add an
additional subchapter to read as follows:

Subchapter 21 – Arkansas Coverage for Early Refills of Prescription Eye Drops
Act

23-79-2101. Title.

This subchapter shall be known and may be cited as the "Arkansas
Coverage for Early Refills of Prescription Eye Drops Act".

23-79-2102. Definitions.

As used in this subchapter:



(1) "Covered person" means a person who is and continues to remain eligible for coverage under a health benefit plan and is covered under the health benefit plan;

(2)(A) "Health benefit plan" means:

(i) An individual, blanket, or group plan, policy, or contract for healthcare services issued or delivered by a healthcare insurer; and

(ii) Any health benefit program receiving state or federal appropriations from the State of Arkansas, including the Arkansas Medicaid Program and the Arkansas Works Program, or any successor program.

(B) "Health benefit plan" includes:

(i) Indemnity and managed care plans; and

(ii) Nonfederal governmental plans as defined in 29 U.S.C. § 1002(32), as it existed on January 1, 2021.

(C) "Health benefit plan" does not include:

(i) A disability income plan;

(ii) A credit insurance plan;

(iii) Insurance coverage issued as a supplement to liability insurance;

(iv) A medical payment under automobile or homeowners insurance plans;

(v) A health benefit plan provided under Arkansas Constitution, Article 5, § 32, the Workers' Compensation Law, § 11-9-101 et seq., or the Public Employee Workers' Compensation Act, § 21-5-601 et seq.;

(vi) A plan that provides only indemnity for hospital confinement;

(vii) An accident-only plan;

(viii) A specified disease plan;

(ix) A long-term-care-only plan;

(x) A dental-only plan; or

(xi) A vision-only plan;

(3) "Healthcare insurer" means an entity subject to the insurance laws of this state or the jurisdiction of the Insurance Commissioner that contracts or offers to contract to provide health insurance coverage, including without limitation an insurance company, a health maintenance organization, a hospital medical service corporation, a self-

insured governmental or church plan in this state, or the Arkansas Medicaid Program;

(4) "Healthcare professional" means a person who is licensed, certified, or otherwise authorized by the laws of this state to administer health care in the ordinary course of the practice of his or her profession; and

(5) "Prescription eye drops" means a prescription topical eye medication that is delivered through eye drops and is used to treat a chronic condition of the eye.

23-79-2103. Prescription eye drops – Early refills – Requirements.

A healthcare insurer that provides coverage for prescription eye drops under a health benefit plan shall provide coverage for early refills of prescription eye drops to a covered person on and after January 1, 2022, if:

(1) For a thirty-day supply:

(A) The amount of time has passed after which a covered person should have used seventy percent (70%) of the dosage of the prescription eye drops according to a healthcare professional's instructions on the prescription; or

(B) Twenty-two (22) days have passed from:

(i) The original date the prescription eye drops were distributed to a covered person; or

(ii) The date the most recent refill of the prescription eye drops was distributed to a covered person;

(2) The healthcare professional indicates on the original prescription that additional quantities of the prescription eye drops are needed;

(3) A refill request of a covered person for prescription eye drops does not exceed the number of additional quantities needed as described in subdivision (2) of this section; and

(4) The prescription eye drops prescribed by a healthcare professional are a covered benefit under the health benefit plan of the covered person.

SECTION 2. TEMPORARY LANGUAGE. DO NOT CODIFY. Rules.

(a)(1) Except as provided in subdivision (a)(2) of this section, the

Insurance Commissioner shall promulgate rules necessary to implement this act.

(2) The Secretary of the Department of Human Services shall promulgate rules necessary to implement this act that may apply to the Arkansas Medicaid Program.

(b)(1) When adopting the initial rules to implement this act, the final rule shall be filed with the Secretary of State for adoption under § 25-15-204(f):

(A) On or before January 1, 2022; or

(B) If approval under § 10-3-309 has not occurred by January 1, 2022, as soon as practicable after approval under § 10-3-309.

(2) The commissioner and secretary shall file the proposed rule with the Legislative Council under § 10-3-309(c) sufficiently in advance of January 1, 2022, so that the Legislative Council may consider the rule for approval before January 1, 2022.

/s/Eubanks