

2022 Regular Session

HOUSE BILL NO. 939

BY REPRESENTATIVE ROBERT OWEN

HEALTH SERVICES: Provides relative to prior authorization required by pharmacy benefit managers

1 AN ACT

2 To amend and reenact R.S. 22:1006.1(B), relative to prior authorization for prescription drug  
3 benefits; to prohibit relative to pharmacy benefit managers and prior authorization  
4 for generic drugs; to provide for exceptions; and to provide for related matters.

5 Be it enacted by the Legislature of Louisiana:

6 Section 1. R.S. 22:1006.1(B) is hereby amended and reenacted to read as follows:

7 §1006.1. Prior authorization forms required; criteria; prohibitions

8 \* \* \*

9 B.(1) Notwithstanding any other provision of law to the contrary, in order to  
10 establish uniformity in the submission of prescription drug prior authorization forms,  
11 on and after January 1, 2019, a health insurance issuer shall utilize only a single  
12 uniform prescription drug prior authorization form for obtaining any prior  
13 authorization for prescription drug benefits. The requirement for a single uniform  
14 prescription drug prior authorization form shall not apply to prior authorization of  
15 specialty drugs or in cases where electronic prescriptions are utilized. The form shall  
16 not exceed two pages in length, excluding any instructions or guiding  
17 documentation. The only form allowable for use shall be the form jointly  
18 promulgated by the Louisiana Board of Pharmacy and the Louisiana State Board of  
19 Medical Examiners. A health insurance issuer may include issuer specific  
20 information on the form, including but not limited to the issuer's name, address, logo,

1 and other contact information for the issuer. A health insurance issuer may make the  
2 form accessible through multiple computer operating systems.

3 (2) Notwithstanding the provisions of Paragraph (1) of this Subsection, a  
4 pharmacy benefit manager shall not require a prior authorization form or prior  
5 authorization for generic drugs; however, this Paragraph does not prohibit or restrict  
6 a pharmacy benefit manager from requiring a prior authorization form to obtain prior  
7 authorization with respect to quantity limits of generic drugs.

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DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

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HB 939 Original

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**Abstract:** Prohibits a pharmacy benefit manager from requiring a prior authorization form or prior authorization for generic drugs.

Present law requires individual health insurance issuers and health maintenance organizations to use a certain prior authorization form for the purpose of obtaining prior authorization for prescription drug benefits. Required use of the form for prior authorization excludes specialty drugs or cases where electronic prescriptions are utilized. Proposed law retains present law.

Proposed law prohibits a pharmacy benefit manager from requiring a prior authorization form or prior authorization for generic drugs.

Proposed law does not prohibit or restrict a pharmacy benefit manager from requiring a prior authorization form to obtain prior authorization for quantity limits of generic drugs.

(Amends R.S. 22:1006.1(B))