

RÉSUMÉ DIGEST

ACT 206 (SB 258)

2016 Regular Session

Luneau

New law requires that any health insurance plan or policy issued or renewed in this state on or after January 1, 2017 provide coverage for the costs of refilling a topical ophthalmic prescription. Prohibits denial of a refill request under the following circumstances:

1. The refill for a 30 day supply is requested between 23 and 30 days from the original date the prescription was distributed to the insured or the date the most recent refill was distributed to the insured, whichever is later.
2. The refill for a 60 day supply is requested between 46 and 60 days from the original date the prescription was distributed to the insured or the date the most recent refill was distributed to the insured, whichever is later.
3. The refill for a 90 day supply is requested between 69 and 90 days from the original date the prescription was distributed to the insured or the date the most recent refill was distributed to the insured, whichever is later.

Requires the prescriber to indicate on the original prescription that additional quantities are necessary and provides that the original prescription not exceed the number of additional quantities necessary for treatment.

Limits the refills to a quantity not to exceed the remaining dosage initially approved for coverage, provided the limited refills do not limit or restrict coverage with regard to any previously or subsequently approved topical ophthalmic prescription.

Effective August 1, 2016.

(Adds R.S. 22:997.1)