AN ACT

To amend and reenact R.S. 44:4.1(B)(11) and to enact R.S. 22:976, relative to prescription drug pricing; to provide for confidentiality; to provide for disclosure; to provide for information available to the commissioner of insurance; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 22:976 is hereby enacted to read as follows:

§976. Disclosure of prescription drug consumer cost burden; certification

A. As used in this Section:

(1) "Excess consumer cost burden" means an amount charged to an enrollee for a covered prescription drug that is greater than the amount that an enrollee's health insurance issuer pays, or would pay absent the enrollee cost sharing, after accounting for an issuer's estimate of at least fifty percent of future rebate payments for that enrollee's actual point of sale prescription drug claim.

(2) "Health benefit plan", "plan", "benefit", or "health insurance coverage" means services consisting of medical care provided directly through insurance, reimbursement, or other means, and including items and services paid for as medical care under any hospital or medical service policy or certificate, hospital or medical service plan contract, preferred provider organization contract, or health maintenance organization contract offered by a health insurance issuer. However, excepted benefits are not included as a "health benefit plan".

(3) "Health insurance issuer" means any entity that offers health insurance coverage through a plan, policy, or certificate of insurance subject to

Coding: Words which are struck through are deletions from existing law; words in boldface type and underscored are additions.
state law that regulates the business of insurance. "Health insurance issuer"
shall also include a health maintenance organization, as defined and licensed
pursuant to Subpart I of Part I of Chapter 2 of this Code. "Health insurance
issuer" shall not include the Office of Group Benefits.

(4) "Rebates" means both of the following:

(a) Negotiated price concessions, including but not limited to base
rebates and reasonable estimates of any price protection rebates and
performance-based rebates that may accrue directly or indirectly to the health
insurance issuer as a result of point of sale prescription drug claims processing
during the coverage year from a manufacturer, dispensing pharmacy, or other
party to the transaction.

(b) Reasonable estimates of any fees and other administrative costs that
are passed through to the health insurance issuer as a result of point of sale
prescription drug claims processing and serve to reduce the health insurance
issuer’s prescription drug liabilities for the coverage year.

B. In the case of a health insurance issuer that offers or renews a health
benefit plan for sale in the state on or after January 1, 2020, if the health
insurance issuer may charge enrollees cost-sharing amounts that may result in
an excess consumer cost burden for covered prescription drugs, the health
insurance issuer shall disclose to enrollees and prospective enrollees the fact
that enrollees may be subject to an excess consumer cost burden. The notice
shall be provided in the coverage agreement, formulary, or preferred drug
guide issued by the health plan.

C. A health insurance issuer that offers or renews a health benefit plan
for sale in the state on or after January 1, 2020, shall annually make available
to the commissioner of insurance information regarding the value of rebates
expressed as a percentage that the health insurance issuer made available to
enrollees at the point of sale.

D. In complying with the provisions of this Section a health insurance
issuer shall not publish or otherwise reveal information regarding the actual
amount of rebates the health insurance issuer receives, including but not limited
to information regarding the amount of rebates it receives on a product,
manufacturer, or pharmacy specific basis. Such information is a trade secret,
is not a public record as defined in R.S. 44:1 et seq., and shall not be disclosed
directly or indirectly. A health insurance issuer shall impose the confidentiality
protections of this Section on any third parties or vendors with which it
contracts that may receive or have access to rebate information.

Section 2. R.S. 44:4.1(B)(11) is hereby amended and reenacted to read as follows:
§4.1. Exceptions

* * *

B. The legislature further recognizes that there exist exceptions, exemptions,
and limitations to the laws pertaining to public records throughout the revised
statutes and codes of this state. Therefore, the following exceptions, exemptions, and
limitations are hereby continued in effect by incorporation into this Chapter by
citation:

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(11) R.S. 22:2, 14, 31, 42.1, 88, 244, 263, 265, 461, 550.7, 571, 572, 572.1,
574, 618, 639, 691.4, 691.5, 691.6, 691.7, 691.8, 691.9, 691.9.1, 691.10, 691.38,
691.56, 732, 752, 753, 771, 834, 972(D), 976, 1008, 1019.2, 1203, 1460, 1464, 1466,
1488, 1546, 1559, 1566(D), 1644, 1656, 1723, 1796, 1801, 1808.3, 1927, 1929,
1983, 1984, 2036, 2045, 2056, 2085, 2091, 2293, 2303

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PRESIDENT OF THE SENATE

SPEAKER OF THE HOUSE OF REPRESENTATIVES

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: ____________