

INSURANCE COVERAGE FOR OPIOIDS

2017 GENERAL SESSION

STATE OF UTAH

LONG TITLE

General Description:

This bill requires a health insurance policy, a health plan offered to state employees, the Medicaid plan, and workers' compensation insurance to implement a prior authorization process for covering opioid drugs in certain circumstances.

Highlighted Provisions:

This bill:

- ▶ defines terms;
- ▶ requires a health insurance policy, a health plan offered to state employees, the Medicaid program, and workers' compensation insurance to require prior authorization for certain opioid prescriptions;
- ▶ establishes the limited circumstances in which prior authorization is needed;
- ▶ provides certain exemptions to the requirement for prior authorization;
- ▶ applies to policies entered into or renewed on or after January 1, 2018; and
- ▶ requires administrative rules adopted in coordination with the Department of Health.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

ENACTS:

- 26-18-21**, Utah Code Annotated 1953
 - 26-18-103.5**, Utah Code Annotated 1953
 - 31A-22-615**, Utah Code Annotated 1953
 - 34A-2-424**, Utah Code Annotated 1953
 - 49-20-414**, Utah Code Annotated 1953
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33 *Be it enacted by the Legislature of the state of Utah:*

34 Section 1. Section **26-18-21** is enacted to read:

35 **26-18-21. Prior authorization for opioid prescriptions.**

36 (1) The department shall implement a prior authorization program for certain opioid
37 prescriptions that is substantially similar to the prior authorization process required in Section
38 31A-22-615.

39 (2) The department may amend the state program and apply for waivers for the state
40 program, if necessary, to implement Subsection (1).

41 Section 2. Section **26-18-103.5** is enacted to read:

42 **26-18-103.5. DUR Board -- Coordination with Utah Insurance Department.**

43 The board shall assist the Utah insurance commissioner with administrative rulemaking
44 regarding opioid prescriptions and prior authorization under Section 31A-22-615.

45 Section 3. Section **31A-22-615** is enacted to read:

46 **31A-22-615. Insurance coverage for opioids -- Prior authorization -- Exemptions**
47 **-- Rulemaking.**

48 (1) For purposes of this section:

49 (a) "Health care provider" means an individual, other than a veterinarian, who:

50 (i) is licensed to prescribe a controlled substance under Title 58, Chapter 37, Utah
51 Controlled Substances Act; and

52 (ii) possesses the authority, in accordance with the individual's scope of practice, to
53 prescribe Schedule II controlled substances and Schedule III controlled substances that are
54 applicable to opioid narcotics and benzodiazapines.

55 (b) "Health insurer" means:

56 (i) an insurer who offers health care insurance as that term is defined in Section
57 31A-1-301;

58 (ii) health benefits offered to state employees under Section 49-20-202; and

59 (iii) a workers' compensation insurer:

60 (A) authorized to provide workers' compensation insurance in the state; or

61 (B) that is a self-insured employer as defined in Section 34A-2-201.

62 (c) "Prior authorization" means a process established by a health insurer that:

63 (i) requires a health care provider to supply information to the health insurer regarding

64 the medical need for an opioid prescription:

65 (ii) provides information of a prior authorization to a pharmacist who is dispensing a
66 prescription for an opioid; and

67 (iii) complies with administrative rules adopted under Subsection (5).

68 (2) (a) Except as provided in Subsection (3), a health insurer that provides prescription
69 drug coverage shall require the prescribing health care provider to obtain prior authorization
70 from the health insurer for the opioid prescription.

71 (b) The prior authorization process established by a health insurer under this section:

72 (i) shall require a health care provider to provide the health insurer with a statement of
73 the clinical reasons for the opioid prescription, including the duration and dosage of the
74 prescription, along with any other requirements of the health insurer; and

75 (ii) shall provide coverage for the opioid prescription, as prescribed by the health care
76 provider, if the health care provider complies with Subsection (2)(b)(i) and the opioid is a
77 covered drug under the health insurance policy.

78 (3) A health insurer may provide coverage for an opioid prescribed by a health care
79 provider without prior authorization under Subsection (2) if:

80 (a) the opioid prescription is:

81 (i) for no more than seven days;

82 (ii) for an individual who does not have a current prescription for benzodiazapines; and

83 (iii) for an individual whose total daily opioid dosage will not exceed 90 milligram
84 morphine equivalents;

85 (b) the patient is in hospice care;

86 (c) the opioid was administered in a hospital, emergency department, or surgical
87 center; or

88 (d) (i) the individual for whom the opioid is prescribed has been prescribed opioids for
89 more than 90 consecutive days;

90 (ii) the individual does not have a current prescription for benzodiazapines; and

91 (iii) the individual's total daily opioid dosage will not exceed 90 milligram morphine
92 equivalents.

93 (4) (a) This section applies to a health insurance policy, a plan offered to state
94 employees, or workers' compensation insurance that is entered into or renewed on or after

95 January 1, 2018.

96 (b) Nothing in this section requires a health insurer to cover a particular opioid.

97 (5) The commissioner shall, in accordance with Title 63G, Chapter 3, Utah

98 Administrative Rulemaking Act, and in coordination with the Department of Health under

99 Section 26-18-103.5, adopt administrative rules necessary to implement this section, including

100 rules that:

101 (a) list the class or name of a drug that is an opioid or benzodiazapine;

102 (b) establish minimum standards for a prior authorization process required under this

103 section, which standards may include:

104 (i) time limits in which the prior authorization must be processed;

105 (ii) data reporting by insurers to the department; and

106 (iii) other rules necessary to implement this section; and

107 (c) establish a reference list for health care providers that calculates, for each opioid,

108 the 90 milligram morphine equivalents per day.

109 Section 4. Section **34A-2-424** is enacted to read:

110 **34A-2-424. Prior authorization process for certain opioid prescriptions.**

111 (1) This section applies to a person regulated by this chapter or Chapter 3, Utah

112 Occupational Disease Act.

113 (2) On or after January 1, 2018, a self-insured employer, as that term is defined in

114 Section 34A-2-201.5, an insurance carrier, and a managed health care program under Section

115 34A-2-111 shall implement a prior authorization process for certain opioid prescriptions in

116 accordance with Section 31A-22-615.

117 Section 5. Section **49-20-414** is enacted to read:

118 **49-20-414. Prior authorization process for certain opioid prescriptions.**

119 A plan offered to state employees under this chapter shall implement a prior

120 authorization process for certain opioid prescriptions in accordance with Section 31A-22-615.

Legislative Review Note

Office of Legislative Research and General Counsel