

26 *Be it enacted by the Legislature of the state of Utah:*

27 Section 1. Section **31a-22-645** is enacted to read:

28 **31a-22-645. Step therapy.**

29 (1) As used in this section:

30 (a) "AB-rated generic equivalent of a drug" means a drug that is therapeutically
31 equivalent to another drug, as set forth in the latest edition of, or supplement to, the federal
32 Food and Drug Administration's Approved Drug Products with Therapeutic Equivalence
33 Evaluations.

34 (b) "Drug" means the same as that term is defined in Section 58-17b-102.

35 (c) "Health care provider" means a health care provider, as defined in Section
36 78B-3-403, with authority to prescribe a step drug.

37 (d) "Health insurer" means an insurer, as defined in Subsection 31A-22-634(1).

38 (e) "Hospice" means the same as that term is defined in Section 26-21-2.

39 (f) "Medically necessary" means appropriate, under the applicable standard of care:

40 (i) to preserve or improve health, life, or function;

41 (ii) to slow the deterioration of health, life, or function; or

42 (iii) for the early screening, prevention, evaluation, diagnosis, or treatment of a disease,
43 condition, illness, or injury.

44 (g) "Step drug" means a drug described in Subsection (1)(h) that must be used before
45 an insured's health benefit plan will pay for a drug ordered by the insured's health care provider.

46 (h) "Step therapy" means a fail-first protocol that requires an insured to use a drug, or
47 several drugs in a particular order, before the insured's health benefit plan will pay for a drug
48 ordered by the insured's health care provider.

49 (2) A health insurer may not offer a health benefit plan that includes step therapy
50 unless the health insurer:

51 (a) notifies each insured covered by the plan of the process described in Subsections
52 (3) through (7) for bypassing use of a step drug; and

53 (b) makes available on the health insurer's website forms for an insured to make a
54 request to bypass use of a step drug.

55 (3) Except as provided in Subsection (5)(a), a health insurer shall authorize an insured
56 to bypass use of one or more step drugs if, for each step drug to be bypassed, the insured ~~H~~→ or the
56a insured's physician ←~~H~~