

As Introduced

135th General Assembly

Regular Session

2023-2024

H. B. No. 384

Representatives Abdullahi, Hall

Cosponsors: Representatives Isaacsohn, Denson, McNally, Brewer, Miranda, Blackshear, Grim, Liston, Dell'Aquila, Robinson, Brennan, Jarrells, Thomas, C., Troy, Weinstein, Miller, J., Rogers, Upchurch, Skindell, Sweeney, Brown, Dobos, Young, T., Humphrey, Mohamed, Somani, Forhan, Baker, Brent, Russo

A BILL

To enact section 3902.63 of the Revised Code to cap 1
cost sharing for prescription insulin drugs and 2
diabetes devices. 3

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That section 3902.63 of the Revised Code be 4
enacted to read as follows: 5

Sec. 3902.63. (A) As used in this section: 6

(1) "Prescription insulin drug" means a prescription drug 7
that contains insulin and is used to treat diabetes; 8

(2) (a) "Diabetes care device" means any of the following 9
when prescribed to cure, diagnose, mitigate, prevent, or treat 10
diabetes or low blood sugar: 11

(i) Blood glucose test strip; 12

(ii) Glucometer; 13

(iii) Continuous glucose monitor; 14

<u>(iv) Lancet;</u>	15
<u>(v) Lancing device;</u>	16
<u>(vi) Insulin syringe;</u>	17
<u>(vii) Insulin pump.</u>	18
<u>(b) "Diabetes care device" includes nonprescription kits for checking and recording blood ketone levels.</u>	19 20
<u>(B) Notwithstanding section 3901.71 of the Revised Code, no health plan issuer that provides coverage for prescription insulin drugs or diabetes care devices pursuant to the terms of a health benefit plan amended, issued, or renewed on or after the effective date of this section shall require cost sharing in excess of either of the following:</u>	21 22 23 24 25 26
<u>(1) Thirty-five dollars in aggregate for a thirty-day supply of all covered prescription insulin drugs prescribed for the covered person, regardless of the amount or type of insulin needed to fill the covered person's prescription;</u>	27 28 29 30
<u>(2) One hundred dollars in aggregate for a thirty-day supply of all covered diabetes care devices used by the covered person.</u>	31 32 33
<u>(C) The cost-sharing limitations prescribed by division (B) of this section apply regardless of any deductible, copayment, coinsurance, or any other cost-sharing requirement that would otherwise apply to the covered person under the health benefit plan.</u>	34 35 36 37 38
<u>(D) This section does not prohibit a health plan issuer from reducing a covered person's cost-sharing requirement for prescription insulin drugs or diabetes care devices to amounts less than those prescribed by division (B) of this section.</u>	39 40 41 42