Sixty-ninth Legislative Assembly of North Dakota

## **SENATE BILL NO. 2249**

Introduced by

Senators Barta, Sickler

Representatives Bahl, Karls, McLeod

- 1 A BILL for an Act to create and enact a new section to chapter 54-52.1 of the North Dakota
- 2 Century Code, relating to step therapy protocol exceptions; to provide for a report to the
- 3 legislative assembly; to provide for application; and to provide an expiration date.

## 4 BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

- 5 **SECTION 1.** A new section to chapter 54-52.1 of the North Dakota Century Code is created and enacted as follows:
- 7 Step therapy protocol exceptions.
- 8 1. As used in this section:

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- a. "Step therapy protocol" has the same meaning as in section 19-02.1-16.3.
- b. "Step therapy protocol exception" means a step therapy protocol is overridden in
   favor of coverage of the prescription drug selected by a health care professional
   as provided in subsection 2.
- 13 <u>2. A health carrier, health benefit plan, pharmacy benefits manager, or utilization review</u>
   14 <u>agent, shall approve a request for a step therapy protocol exception if:</u>
  - a. The prescription drug required under the step therapy protocol is contraindicated according to the drug manufacturer's prescribing information for the drug.
  - b. Due to a documented adverse event with previous use or a documented medical condition, including a comorbid condition, the prescription drug is likely to:
    - (1) Cause an adverse reaction to a covered individual;
- 20 (2) Decrease the ability of a covered individual to achieve or maintain
  21 reasonable functional ability in performing daily activities; or
- 22 (3) Cause physical or mental harm to a covered individual.

1		<u>C.</u>	<u>The</u>	prescription drug required under the step therapy protocol is expected to be
2			<u>inef</u>	fective based on the known clinical characteristics of the covered individual,
3			<u>incl</u> ı	uding the individual's adherence to or compliance with the plan of care, and:
4			<u>(1)</u>	The known characteristics of the prescription drug regimen as described in
5				peer-reviewed literature or in the manufacturer's prescribing information for
6				the drug;
7			<u>(2)</u>	The health care professional's medical judgment based on clinical practice
8				guidelines or peer-reviewed journals; or
9			<u>(3)</u>	The covered individual's documented experience with the prescription drug
10				regimen.
11		<u>d.</u>	<u>Whi</u>	le under the covered individual's current or previous health benefit plan, for a
12			peri	od of time to allow for a positive treatment outcome, the covered individual
13			<u>had</u>	a trial of a therapeutically equivalent dose of the prescription drug under a
14			<u>step</u>	therapy protocol, and that trial was discontinued by the covered individual's
15			<u>hea</u>	Ith care professional due to lack of effectiveness.
16		<u>e.</u>	<u>Whi</u>	le under the covered individual's current or previous health benefit plan, the
17			COV	ered individual received a positive therapeutic outcome on a prescription drug
18			<u>sele</u>	ected by the covered individual's health care professional for the medical
19			con	dition under consideration.
20	<u>3.</u>	<u>A h</u>	ealth	carrier, health benefit plan, pharmacy benefits manager, or utilization review
21		<u>age</u>	nt, sh	<u>iall:</u>
22		<u>a.</u>	If th	e prescription drug is a covered prescription drug under the covered
23			indi	vidual's health benefit plan, upon approval of a request supporting a step
24			ther	apy protocol exception, authorize coverage for the prescription drug selected
25			by t	he covered individual's health care professional.
26		<u>b.</u>	Exc	ept as provided in subdivision c, within five calendar days after the receipt of
27			<u>a re</u>	quest supporting a step therapy protocol exception, make a determination to
28			<u>app</u>	rove or deny the request.
29		<u>C.</u>	With	nin seventy-two hours after the receipt of an emergency or urgent care
30			<u>requ</u>	uest supporting a step therapy protocol exception, make a determination to
31			app	rove or deny the request.

1	<u>4.</u>	If a health carrier, health plan, pharmacy benefits manager, or utilization review agent
2		fails to respond to a request supporting a step therapy protocol exception as provided
3		in subdivisions b or c of subsection 3, the request is deemed approved.
4	SEC	TION 2. PUBLIC EMPLOYEES RETIREMENT SYSTEM - STEP THERAPY
5	PROTO	COL EXCEPTIONS - REPORT TO LEGISLATIVE ASSEMBLY. Pursuant to section
6	54-03-28	3, the public employees retirement system shall prepare and submit for introduction a
7	bill to the	e seventieth legislative assembly to repeal the expiration date for this Act and to extend
8	step the	rapy protocol exception requirements to all group and individual health insurance
9	policies.	The public employees retirement system shall append a report to the bill regarding the
10	effect of	the step therapy protocol exception requirements on the system's health insurance
11	program	s, information on the utilization and costs relating to the requirements, and a
12	recomm	endation regarding whether the coverage should be continued.
13	SEC	CTION 3. APPLICATION. This Act applies to health benefits coverage that begins after
14	June 30	, 2025, and which does not extend past June 30, 2027.
15	SEC	CTION 4. EXPIRATION DATE. This Act is effective through June 30, 2027, and after that
16	date is i	neffective.