

# Federal Legislation And State Policy Efforts Promote Access To And Use of Discounted Cash Prices

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## HB 2558

The proposed bill introduces new legislation in Arizona concerning the regulation of prescription drugs, specifically targeting essential off-patent or generic drugs. It defines “essential off-patent or generic drugs” as those that have no exclusive marketing rights, are recognized by the World Health Organization or the U.S. Department of Health and Human Services as essential, are manufactured by three or fewer companies, and are available for sale in Arizona. The bill also defines “price gouging” as an unconscionable increase in the price of a prescription drug, with specific criteria for what constitutes an “unconscionable increase.” The bill prohibits manufacturers and wholesale distributors from engaging in price gouging of essential off-patent or generic drugs. It outlines the process by which the state medical assistance program can notify the attorney general of significant price increases, and it requires manufacturers to justify such increases. The attorney general is empowered to take legal action against violators, including restraining orders, financial restitution, and civil penalties. The bill also ensures the confidentiality of commercial information provided to the attorney general and clarifies that direct dealings with consumers in Arizona are not a necessary defense

for those accused of violating the law.

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## **HB 2644**

The bill proposes an amendment to Title 36 of the Arizona Revised Statutes by adding a new chapter that pertains to health care employment. Specifically, it introduces a definition for “noncompete clause” as a clause in an employment contract that restricts a medical resident or fellow from working within a certain geographic area for a specified time after their residency or fellowship ends. The bill prohibits employers from requiring medical residents or fellows, who are employed as a result of a matching process, to agree to a noncompete clause that would take effect after the completion of their residency or fellowship. This restriction applies to contracts entered into after the effective date of the act, meaning it would not be retroactive to existing contracts.

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## **SB 1292**

Notwithstanding Any Other Law, Every Health Care Insurer That Offers An Individual Health Care Plan, Short-Term Limited Duration Insurance Or A Small Employer Group Health Care Plan In This State: 1. Shall: (A) Ensure That All Products Sold Cover Essential Health Care Benefits. (B) Limit Cost Sharing For The Coverage Of Essential Health Care Benefits, Including Deductibles, Coinsurance And Copayments.

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## HB 2243

Medical Service Corporation, A Hospital Service Corporation Or A Hospital, Medical, Dental And Optometric Service Corporation Shall Limit The Total Amount That A Subscriber Must Pay For A Covered Prescription Insulin Drug To Not More Than \$25 Per Thirty-Day Supply Of Insulin, Regardless Of The Amount Or Type Of Insulin Required To Fill The Subscriber'S Prescription. For The Purposes Of This Subsection, "Prescription Insulin Drug" Means Any Prescription Medication As Defined In Section That Is Prescribed By A Health Care Professional To A Subscriber To Treat The Subscriber'S Condition, That Contains Insulin And That Is Used To Treat Diabetes.

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## SB 1458

A Health Care Insurer May Not Rank Or Classify Health Care Providers Based On Performance Or Publish Provider-Specific Information That Includes Ranking, Tiers, Ratings Or Other Comparisons Of A Health Care Provider'S Performance Against Standards, Measures Or Other Providers, Unless An Exception Applies

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# HB 2126

A Disability Insurance Policy That Includes Prescription Drug Coverage Shall Provide Coverage For Any Prescribed Drug Or Device That Is Approved By The United States Food And Drug Administration For Use As A Contraceptive. A Disability Insurance Policy May Not Include Any Cost Sharing Requirements For Contraceptive Drugs, Intrauterine Devices, Prescription Barrier Methods Or Male Sterilization.

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# HB 2622

Includes in the report to the Joint Legislative Audit Committee (JLAC), any restrictions on the form or amount of cost sharing related to a health plan benefit issued by an insurer, hospital, medical, dental, optometric or other health care services organization

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# HB 2245

The Department Shall Enter Into Partnerships, Consistent With Section 36-4203 In Consultation With Other State Departments As Necessary, To Increase Competition, Lower Prices And Address Shortages In The Market For Generic Prescription Drugs, To Reduce The Cost Of Prescription Drugs For Public And Private Purchasers, Taxpayers And Consumers And To Increase Patient Access To Affordable Drugs.

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# HB 2139

Establishes the Medical Services Purchase Program Study Committee. The study committee shall research and make recommendations for establishing and implementing a medical services purchase program. The study committee shall focus on the feasibility and implications of allowing individuals to access insurance coverage through this state's existing medicaid program.