Stricken language would be deleted from and underlined language would be added to present law.
Act 964 of the Regular Session

State of Arkansas
As Engrossed: H3/25/19 S4/3/19

A Bill

by Representative D. Ferguson

by Senator Bledsoe

For An Act To Be Entitled
AN ACT TO AMEND THE PRIOR AUTHORIZATION TRANSPARENCY ACT; TO PROHIBIT PRIOR AUTHORIZATION FOR MEDICATION-ASSISTED TREATMENT; TO DECLARE AN EMERGENCY; AND FOR OTHER PURPOSES.

Subtitle
TO AMEND THE PRIOR AUTHORIZATION TRANSPARENCY ACT; TO PROHIBIT PRIOR AUTHORIZATION FOR MEDICATION-ASSISTED TREATMENT; AND TO DECLARE AN EMERGENCY.

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

SECTION 1. Arkansas Code § 23-99-1103(8), concerning the definition of "healthcare insurer" under the Prior Authorization Transparency Act, is amended to read as follows:

(8)(A)(i) "Healthcare insurer" means an entity that is subject to state insurance regulation, including an insurance company, a health maintenance organization, self-insured health plan for employees of a governmental entity, and a hospital and medical service corporation, a risk-based provider organization, and a sponsor of a nonfederal self-funded governmental plan.

(ii) "Healthcare insurer" includes Medicaid where specifically referenced in § 23-99-1119.

(B) "Healthcare insurer" does not include:

(i) workers' compensation plans or A workers'
compensation plan; or

(ii) Medicaid, except as provided under § 23-99-1119 or when Medicaid services are managed or reimbursed by a healthcare insurer; or

(C) “Healthcare insurer” does not include an (iii)

An entity that provides only dental benefits or eye and vision care benefits;

SECTION 2. Arkansas Code § 23-99-1103, concerning the definitions under the Prior Authorization Transparency Act, is amended to add an additional subdivision to read as follows:

(21) “Prescription for medication-assisted treatment” means any prescription for medication used as treatment for opioid addiction approved by the United States Food and Drug Administration.

SECTION 3. Arkansas Code Title 23, Chapter 99, Subchapter 11, is amended to add an additional section to read as follows:


(a) Except in the case of injectables, a healthcare insurer, including Medicaid, shall not:

(1) Require prior authorization in order for a patient to obtain coverage of buprenorphine, naloxone, naltrexone, methadone, and their various formulations and combinations approved by the United States Food and Drug Administration for the treatment of opioid addiction; or

(2) Impose any other requirement other than a valid prescription and compliance with the medication-assisted treatment guidelines issued by the Substance Abuse and Mental Health Services Administration under the United States Department of Health and Human Services in order for a patient to obtain coverage for buprenorphine, naloxone, naltrexone, methadone, and their various formulations and combinations approved by the United States Food and Drug Administration for the treatment of opioid addiction.

(b) Subdivision (a)(1) of this section shall only apply to the Arkansas Medicaid Program as it pertains to prescription drugs for treatment of opioid addiction designated as preferred on the evidence-based preferred drug list provided there is at least one (1) of each of the drugs listed in subdivision (a)(1) of this section with the preferred designation on the preferred drug list or available without prior authorization.
(c) If a new formulation or medication approved by the United States Food and Drug Administration for use as a prescription for medication-assisted treatment becomes available after the effective date of this section and is either more expensive or has not been shown to be more effective than the formulations and medications in subsection (a) of this section, then the healthcare insurer may require prior authorization of the new formulation or medication.

(d) A healthcare insurer utilizing a tiered drug formulary shall place on the lowest-cost benefit tier at least one (1) product for each of the following medications that is approved by the United States Food and Drug Administration:

(1) Buprenorphine;
(2) Naloxone;
(3) Naltrexone;
(4) Methadone; and
(5) A product containing both buprenorphine and naloxone.

(e) For purposes of any limit a healthcare insurer imposes on the number of prescriptions for a patient, a prescription for medication-assisted treatment shall not be counted.

(f) This section does not affect the responsibility of a healthcare provider to comply with the standard of care for medication-assisted treatment, including without limitation the use of therapy in combination with medication.

(g) The Arkansas Medicaid Program shall have until January 1, 2020, to comply with this section.

SECTION 4. EMERGENCY CLAUSE. It is found and determined by the General Assembly of the State of Arkansas that medication-assisted treatment is effective at treating opioid addiction and results in substantial cost savings; that some healthcare insurers, including Medicaid, are placing numerous prior authorization requirements on healthcare providers and their patients who are in need of medication-assisted treatment; that these requirements are counterproductive; and that this act is immediately necessary because, as a result of these requirements, patients resort to continued illegal drug use to stop withdrawals and physicians may be deterred from treating patients due to the difficult prior authorization requirements.
Therefore, an emergency is declared to exist, and this act being immediately
necessary for the preservation of the public peace, health, and safety shall
become effective on:

(1) The date of its approval by the Governor;
(2) If the bill is neither approved nor vetoed by the Governor,
the expiration of the period of time during which the Governor may veto the
bill; or
(3) If the bill is vetoed by the Governor and the veto is
overridden, the date the last house overrides the veto.

/s/D. Ferguson

APPROVED: 4/12/19