

Bill Draft Summary
2026 REGULAR SESSION

BR 1027

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3120	Medicaid, utilization controls, nonopioid analgesics
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6800	Medicaid, utilization controls, nonopioid analgesics

Create a new section of KRS Chapter 205 to prohibit the Department for Medicaid Services, any Medicaid managed care organization contracted by the department, and the Medicaid state pharmacy benefit manager from denying coverage for a nonopioid analgesic in favor of opioid analgesic or establishing more restrictive or more extensive utilization controls for nonopioid analgesics than the least restrictive or extensive utilization controls for any opioid or narcotic analgesic; require the Cabinet for Health and Family Services or the Department for Medicaid to seek federal approval if it is determined that such approval is necessary; provide authorization from the General Assembly to make changes to the Medicaid program as required under KRS 205.5372(1).

1 AN ACT relating to utilization controls for nonopioid analgesics in the Medicaid
2 program.

3 *Be it enacted by the General Assembly of the Commonwealth of Kentucky:*

4 ➔SECTION 1. A NEW SECTION OF KRS CHAPTER 205 IS CREATED TO
5 READ AS FOLLOWS:

6 *The Department for Medicaid Services, any managed care organization with whom the*
7 *department contracts for the delivery of Medicaid services, and the state pharmacy*
8 *benefit manager contracted by the department pursuant to KRS 205.5512 shall not:*

9 *(1) Deny coverage of a nonopioid prescription drug in favor of an opioid prescription*
10 *drug when a licensed physician has prescribed a nonopioid medication for the*
11 *treatment of chronic or acute pain; or*

12 *(2) Establish more restrictive or more extensive utilization controls, including but not*
13 *limited to more restrictive or more extensive prior authorization or step therapy*
14 *requirements, for clinically appropriate nonopioid drugs than the least restrictive*
15 *or extensive utilization controls applicable to any clinically appropriate opioid or*
16 *narcotic drug.*

17 ➔Section 2. If the Cabinet for Health and Family Services or the Department for
18 Medicaid Services determines that a state plan amendment, waiver, or any other form of
19 authorization or approval from any federal agency to implement Section 1 of this Act is
20 necessary to prevent the loss of federal funds or to comply with federal law, the cabinet
21 or department:

22 (1) Shall, within 90 days after the effective date of this section, request the
23 necessary federal authorization or approval to implement Section 1 of this Act; and

24 (2) May only delay implementation of the provisions of Section 1 of this Act for
25 which federal authorization or approval was deemed necessary until the federal
26 authorization or approval is granted.

27 ➔Section 3. Sections 1 and 2 of this Act shall constitute the specific authorization

1 required under KRS 205.5372(1).