AN ACT relating to pharmacy benefits.

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

→ SECTION 1. A NEW SECTION OF SUBCHAPTER 17A OF KRS CHAPTER 304 IS CREATED TO READ AS FOLLOWS:

(1) As used in this section:

(a) "Cost sharing" means the cost to an individual insured under a health benefit plan according to any coverage limit, copayment, coinsurance, deductible, or other out-of-pocket expense requirements imposed by the plan;

(b) "Insurer" includes:

1. An insurer offering a health benefit plan providing coverage for pharmacy benefits; or

2. Any other administrator of pharmacy benefits under a health benefit plan;

(c) "Pharmacy" includes:

1. A pharmacy, as defined in KRS Chapter 315;

2. A pharmacist, as defined in KRS Chapter 315; or

3. Any employee of a pharmacy or pharmacist; and

(d) "Pharmacy benefit manager" has the same meaning as in KRS 304.17A-161.

(2) An insurer issuing or renewing a health benefit plan on or after the effective date of this Act or pharmacy benefit manager shall not:

(a) Require an insured purchasing a prescription drug to pay a cost-sharing amount greater than the amount the insured would pay for the drug if he or she were to purchase the drug without coverage under a health benefit plan;

(b) Prohibit a pharmacy from discussing any information under subsection (3)
of this section; and

(c) Impose a penalty on a pharmacy for complying with this section.

(3) A pharmacist shall have the right to provide an insured information regarding the applicable limitations on his or her cost-sharing pursuant to this section for a prescription drug.

(4) Any amount paid by an insured under subsection (2)(a) of this section shall be attributable toward any annual out-of-pocket maximums under the insured's health benefit plan.

Section 2. This Act takes effect January 1, 2019.