## **Kentucky Department of Insurance Financial Impact Statement**

I. Mandating health insurance coverage of <u>BR 1629/HB 713</u>, is not expected to materially increase premiums, based upon <u>our analysis of the proposed mandate and our experience with similar health insurance benefits. The mandate requires health benefit plans to cover all FDA-approved prescription drugs for the treatment of postpartum mood disorders. Health benefit plans must cover either the original FDA-approved prescription drug or at least one therapeutic equivalent. Our analysis includes health benefit plans, for all fully insured policies in Kentucky, excluding Medicaid and state employees.</u>

The proposed <u>BR 1629/HB 713</u>, as described above, is not expected to materially increase the total cost of health care in the Commonwealth, <u>based upon our analysis of the proposed mandate and our experience with similar health insurance benefits. Our analysis includes health benefit plans, for all fully insured policies in Kentucky, excluding Medicaid and state employees.</u>

The proposed <u>BR 1629/HB 713</u>, as described above, is <u>not expected to materially increase</u> administrative expenses of insurers, <u>based upon our analysis of the proposed mandate and our experience with similar health insurance benefits. The proposed legislation for all insured health benefit plan coverages, excluding Medicaid and state employees, is not expected to materially increase administrative expenses of Insurers. It is our assumption that Insurers will have this information readily available, and the additional administrative requirements imposed by this mandate would not significantly impact the administrative costs relative to current levels.</u>

Our analysis included the use of data and statistics from the Centers for Disease Control and Prevention (CDC), the American Journal of Managed Care, the American Journal of Public Health, the National Library of Medicine, the Mayo Clinic, publicly available drug policies for large insurers, actuarial judgement, and a 2022 Annual Data Report provided by DOI.

Note: It is acknowledged that there is potential for long-term savings due to increased accessibility and early and effective treatment of postpartum mood disorders. This was considered in estimating the fiscal impact range, however, due to time and budget constraints, a full and in-depth analysis was not performed.

Disclosure: L&E made several assumptions in performing the analysis. Several of these assumptions are subject to material uncertainty and it is not unexpected that actual results could materially differ from these estimates if a more in-depth analysis were to be performed.

Disclosure: Due to the material disclosure requirements required therein, we must acknowledge that the content of this report may not comply with Actuarial Standard of Practice No. 41 Actuarial Communications

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3/13/2024

(Signature of Commissioner/Date)

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