



General Assembly

Substitute Bill No. 5639

January Session, 2001

AN ACT CONCERNING THE USE OF DRUG FORMULARIES BY HEALTH INSURERS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (a) Subject to subsection (b) of this section, each
2 individual health insurance policy providing coverage of the type
3 specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of
4 the general statutes delivered, issued for delivery, amended, renewed
5 or continued in this state on or after October 1, 2001, that provides
6 coverage for outpatient prescription drugs pursuant to a list of covered
7 drugs or that otherwise imposes limits on the availability of
8 prescription drugs shall provide benefits for all medically necessary
9 prescription drugs for up to ten calendar days, or until an appeal of a
10 decision to deny coverage is completed, whichever is earlier.

11 (b) Such benefits shall only be provided if (1) an insured is denied
12 coverage for a prescription drug and an appeal of the denial is initiated
13 by the insured or on behalf of the insured, or (2) the prescription drug
14 is prescribed by an emergency room physician pursuant to treatment
15 in an emergency room.

16 Sec. 2. (NEW) (a) Subject to subsection (b) of this section, each group
17 health insurance policy providing coverage of the type specified in
18 subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general
19 statutes delivered, issued for delivery, amended, renewed or

20 continued in this state on or after October 1, 2001, that provides
21 coverage for outpatient prescription drugs pursuant to a list of covered
22 drugs or that otherwise imposes limits on the availability of
23 prescription drugs shall provide benefits for all medically necessary
24 prescription drugs for up to ten calendar days, or until an appeal of a
25 decision to deny coverage is completed, whichever is earlier.

26 (b) Such benefits shall only be provided if (1) an insured is denied
27 coverage for a prescription drug and an appeal of the denial is initiated
28 by the insured or on behalf of the insured, or (2) the prescription drug
29 is prescribed by an emergency room physician pursuant to treatment
30 in an emergency room.

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