

## OFFICE OF FISCAL ANALYSIS

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sHB-6096

AN ACT LIMITING CHANGES TO PRESCRIPTION DRUG  
FORMULARIES AND LISTS OF COVERED DRUGS.

AMENDMENT

LCO No.: 10394

File Copy No.: 396

House Calendar No.: 249

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### ***OFA Fiscal Note***

#### ***See Fiscal Note Details***

The amendment strikes the underlying bill and its associated fiscal impact. The amendment is not anticipated to result in a fiscal impact to the state employee and retiree health plan as the amendment is not interpreted to materially modify the pharmacy benefit manager's administration of the plan's formulary compared to current practice given the \$40 copay cap in the amendment.

The amendment will increase costs to certain fully insured municipal plans to comply with the provisions of the amendment if the plans are not otherwise excluded by the copay cap. There will be a cost to the extent the amendment's provisions impact a municipal plan's ability to modify their formulary during a plan year, predominately resulting in a reduction in the amount of drug rebates. The coverage requirements will result in increased premium costs when municipalities enter into new health insurance contracts after January 1, 2020. In addition, many municipal health plans are recognized as "grandfathered" health plans under the Affordable Care Act (ACA). It is unclear what effect the adoption of certain health mandates will have on the grandfathered status of certain municipal plans under ACA. Pursuant to federal law, self-insured health plans are exempt from state health insurance mandates.

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Contributing Analyst(s):

5/31/19  
(FN)

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