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| BILL ANALYSIS |

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| C.S.H.B. 4055 |
| By: Wu |
| Public Health |
| Committee Report (Substituted) |

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| **BACKGROUND AND PURPOSE**  Although access to antiretroviral drugs used by a patient with HIV to diminish the probability of viral transmission is provided under Medicaid, protecting immediate access to these antiretroviral drugs is critical. C.S.H.B. 4055 seeks to provide this protection by prohibiting the executive commissioner of the Health and Human Services Commission, in the rules and standards governing the Medicaid vendor drug program, from requiring a clinical, nonpreferred, or other prior authorization for an antiretroviral drug, or a step therapy or other protocol, that could restrict or delay the dispensing of the drug. |
| **CRIMINAL JUSTICE IMPACT**  It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision. |
| **RULEMAKING AUTHORITY**  It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution. |
| **ANALYSIS**  C.S.H.B. 4055 amends the Government Code to prohibit the executive commissioner of the Health and Human Services Commission, in the rules and standards governing the Medicaid vendor drug program, from requiring a clinical, nonpreferred, or other prior authorization for an antiretroviral drug, or a step therapy or other protocol, that could restrict or delay the dispensing of the drug. The bill defines "antiretroviral drug" for purposes of the prohibition.  C.S.H.B. 4055 includes among the required contents of a Medicaid managed care contract a requirement that a managed care organization develop, implement, and maintain an outpatient pharmacy benefit plan for its enrolled recipients that does not require a clinical, nonpreferred, or other prior authorization for an antiretroviral drug, or a step therapy or other protocol, that could restrict or delay the dispensing of the drug. |
| **EFFECTIVE DATE**  September 1, 2019. |
| **COMPARISON OF ORIGINAL AND SUBSTITUTE**  While C.S.H.B. 4055 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.  The substitute includes additional inhibitors and antagonists in the definition of "antiretroviral drug." |
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