

1-1 By: Menéndez, Campbell S.B. No. 2051
 1-2 (In the Senate - Filed March 12, 2021; April 1, 2021, read
 1-3 first time and referred to Committee on Business & Commerce;
 1-4 May 5, 2021, reported adversely, with favorable Committee
 1-5 Substitute by the following vote: Yeas 7, Nays 0; May 5, 2021, sent
 1-6 to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8	X			
1-9	X			
1-10	X			
1-11	X			
1-12			X	
1-13	X			
1-14			X	
1-15	X			
1-16	X			
1-17	X			

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 2051 By: Hancock

1-19 A BILL TO BE ENTITLED
 1-20 AN ACT

1-21 relating to step therapy protocols required by health benefit plans
 1-22 for coverage of prescription drugs for serious mental illnesses.

1-23 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-24 SECTION 1. Subchapter B, Chapter 1369, Insurance Code, is
 1-25 amended by adding Section 1369.0547 to read as follows:

1-26 Sec. 1369.0547. STEP THERAPY PROTOCOLS FOR PRESCRIPTION
 1-27 DRUGS TO TREAT SERIOUS MENTAL ILLNESSES. (a) In this section,
 1-28 "serious mental illness" has the meaning assigned by Section
 1-29 1355.001.

1-30 (b) This section applies only to a drug prescribed to an
 1-31 enrollee who is 18 years of age or older to treat a diagnosis of a
 1-32 serious mental illness.

1-33 (c) A health benefit plan that provides coverage for
 1-34 prescription drugs to treat a serious mental illness may not
 1-35 require, before the health benefit plan provides coverage of a
 1-36 prescription drug approved by the United States Food and Drug
 1-37 Administration, that the enrollee:

1-38 (1) fail to successfully respond to more than one
 1-39 different drug for each drug prescribed, excluding the generic or
 1-40 pharmaceutical equivalent of the prescribed drug; or

1-41 (2) prove a history of failure of more than one
 1-42 different drug for each drug prescribed, excluding the generic or
 1-43 pharmaceutical equivalent of the prescribed drug.

1-44 (d) Subject to Section 1369.0546, a health benefit plan
 1-45 issuer may implement a step therapy protocol to require a trial of a
 1-46 generic or pharmaceutical equivalent of a prescribed prescription
 1-47 drug as a condition of continued coverage of the prescribed drug
 1-48 only:

1-49 (1) once in a plan year; and

1-50 (2) if the equivalent drug is added to the plan's drug
 1-51 formulary.

1-52 SECTION 2. This Act applies only to a health benefit plan
 1-53 delivered, issued for delivery, or renewed on or after January 1,
 1-54 2022. A health benefit plan delivered, issued for delivery, or
 1-55 renewed before January 1, 2022, is governed by the law as it existed
 1-56 immediately before the effective date of this Act, and that law is
 1-57 continued in effect for that purpose.

1-58 SECTION 3. This Act takes effect September 1, 2021.

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