By: Jones of Dallas H.B. No. 2557

A BILL TO BE ENTITLED

1	AN ACT
2	relating to prior authorization for prescription drug benefits
3	related to the treatment of chronic health conditions.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. The heading to Subchapter N , Chapter 1369,
6	Insurance Code, is amended to read as follows:
7	SUBCHAPTER N. COVERAGE OF PRESCRIPTION DRUGS FOR CHRONIC HEALTH
8	CONDITIONS [AUTOIMMUNE DISEASES AND CERTAIN BLOOD DISORDERS]
9	SECTION 2. Section 1369.651, Insurance Code, is amended to
10	read as follows:
11	Sec. 1369.651. <u>DEFINITIONS</u> [DEFINITION]. In this
12	subchapter:
13	(1) "Chronic health condition" means an illness,
14	injury, impairment, or physical or mental condition that is
15	expected to last at least one year and either:
15 16	<pre>expected to last at least one year and either:</pre>
16	(A) requires ongoing medical attention to
16 17 18	(A) requires ongoing medical attention to effectively manage or to prevent an adverse health event; or
16 17 18	(A) requires ongoing medical attention to effectively manage or to prevent an adverse health event; or (B) limits one or more of the following
16171819	(A) requires ongoing medical attention to effectively manage or to prevent an adverse health event; or (B) limits one or more of the following activities of daily living:
16 17 18 19 20	(A) requires ongoing medical attention to effectively manage or to prevent an adverse health event; or (B) limits one or more of the following activities of daily living: (i) bathing;
16 17 18 19 20 21	(A) requires ongoing medical attention to effectively manage or to prevent an adverse health event; or (B) limits one or more of the following activities of daily living: (i) bathing; (ii) personal hygiene;

H.B. No. 2557

```
1 (vi) bed mobility; or
```

- 2 (vii) walking or locomotion.
- 3 (2) "Prescription [, "prescription] drug" has the
- 4 meaning assigned by Section 551.003, Occupations Code.
- 5 SECTION 3. Section 1369.654(a), Insurance Code, is amended
- 6 to read as follows:
- 7 (a) A health benefit plan issuer that provides prescription
- 8 drug benefits may not require an enrollee to receive more than one
- 9 prior authorization annually of the prescription drug benefit for a
- 10 prescription drug prescribed to treat a chronic health condition,
- 11 <u>including</u> an autoimmune disease, hemophilia, <u>neurodegenerative</u>
- 12 disease, or Von Willebrand disease.
- 13 SECTION 4. The change in law made by this Act applies only
- 14 to a health benefit plan that is delivered, issued for delivery, or
- 15 renewed on or after January 1, 2026. A health benefit plan
- 16 delivered, issued for delivery, or renewed before January 1, 2026,
- 17 is governed by the law as it existed immediately before the
- 18 effective date of this Act, and that law is continued in effect for
- 19 that purpose.
- 20 SECTION 5. This Act takes effect September 1, 2025.