[First Reprint]

ASSEMBLY, No. 5703

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED MAY 12, 2021

Sponsored by:
Assemblyman JOHN ARMATO
District 2 (Atlantic)
Assemblyman ANTHONY S. VERRELLI
District 15 (Hunterdon and Mercer)
Assemblyman HERB CONAWAY, JR.
District 7 (Burlington)
Senator DAWN MARIE ADDIEGO
District 8 (Atlantic, Burlington and Camden)
Senator JOSEPH A. LAGANA
District 38 (Bergen and Passaic)

Co-Sponsored by:
Assemblyman Benson, Assemblywomen Vainieri Huttle, Downey, Assemblymen Stanley, McKeon, Assemblywomen Quijano, Murphy, Jasey and Senator Beach

SYNOPSIS

Requires certain health insurers, Medicaid, NJ FamilyCare, SHBP, and SEHBP to cover opioid antidote without imposing prior authorization requirements.

CURRENT VERSION OF TEXT

As reported by the Assembly Health Committee on May 17, 2021, with amendments.

(Sponsorship Updated As Of: 6/21/2021)

AN ACT concerning health benefits coverage of [1]**[**naloxone**]** opioid antidotes[1] and supplementing various parts of the statutory law.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

1. a. A carrier shall ensure that every contract to provide prescription drug benefits, or to authorize the purchase of a contract to provide prescription drug benefits, shall provide coverage for [1]**[**naloxone**]** an opioid antidote[1] to covered persons without the imposition of any prior authorization or other utilization management requirements, provided that the drug is:

(1) prescribed or administered to the covered person by a licensed medical practitioner who is authorized to prescribe or administer that treatment pursuant to State and federal law; or

(2) dispensed to the covered person by a licensed pharmacist under a standing order to dispense an opioid antidote pursuant [1]to section 1 of[1] P.L.2017, c.88 (C.45:14-67.2).

b. The provisions of this section shall not be construed to limit the coverage of [1]**[**naloxone**]** an opioid antidote[1] only when administered by a medical practitioner.

c. As used in this section:

"Carrier" means an insurance company, health service corporation, hospital service corporation, medical service corporation, or health maintenance organization authorized to issue health benefits plans in this State.

[1]**[**"Naloxone" means a drug or device containing naloxone hydrochloride that is approved by the United States Food and Drug Administration for the treatment of an opioid overdose, either in the intramuscular or intranasal form and including a nasal atomizer if required to administer the drug**]** "Opioid antidote" means naloxone hydrochloride, or any other similarly acting drug approved by the United States Food and Drug Administration for self-administration for the treatment of an opioid overdose[1].

2. a. The Division of Medical Assistance and Health Services in the Department of Human Services shall provide coverage for [1]**[**naloxone**]** an opioid antidote[1] under the Medicaid program and the NJ FamilyCare program without the imposition of any prior authorization or other utilization management requirements, provided that the drug is:

(1) prescribed or administered to an enrollee by a licensed medical practitioner who is authorized to prescribe or administer that treatment pursuant to State and federal law; or

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.
Matter enclosed in superscript numerals has been adopted as follows:
[1]Assembly AHE committee amendments adopted May 17, 2021.

(2) dispensed to an enrollee by a licensed pharmacist under a standing order to dispense an opioid antidote pursuant [1]to section 1 of[1] P.L.2017, c.88 (C.45:14-67.2).

b. The provisions of this section shall not be construed to limit the coverage of [1]**[**naloxone**]** an opioid antidote[1] only when administered by a medical practitioner.

c. The division shall require each managed care organization contracted with the division to provide pharmacy benefits to Medicaid and NJ FamilyCare enrollees to comply with the provisions of this section.

d. The Commissioner of Human Services shall apply for such State plan amendments or waivers as may be necessary to implement the provisions of this section and to secure federal financial participation for State Medicaid expenditures under the federal Medicaid program.

e. As used in this section:

"Medicaid program" means the program established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.).

[1]**[**"Naloxone" means a drug or device containing naloxone hydrochloride that is approved by the United States Food and Drug Administration for the treatment of an opioid overdose, either in the intramuscular or intranasal form and including a nasal atomizer if required to administer the drug**]** "Opioid antidote" means naloxone hydrochloride, or any other similarly acting drug approved by the United States Food and Drug Administration for self-administration for the treatment of an opioid overdose[1].

"NJ FamilyCare program" means the program established pursuant to P.L.2005, c.156 (C.30:4J-8 et al.).

3. a. Notwithstanding any law or regulation to the contrary, the State Health Benefits Commission and the School Employees' Health Benefits Commission shall ensure that every contract under the State Health Benefits Program shall provide coverage for [1]**[**naloxone**]** an opioid antidote[1] to eligible members of the State Health Benefits Program and the School Employees' Health Benefits Program. The coverage shall be provided without the imposition of any prior authorization or other utilization management requirements, provided that the treatment is:

(1) prescribed or administered to the eligible member by a licensed medical practitioner who is authorized to prescribe or administer that treatment pursuant to State and federal law; or

(2) dispensed to the eligible member by a licensed pharmacist under a standing order to dispense an opioid antidote pursuant [1]to section 1 of[1] P.L.2017, c.88 (C.45:14-67.2).

b. The provisions of this section shall not be construed to limit the coverage of [1]**[**naloxone**]** an opioid antidote[1] only when administered by a medical practitioner.

c. Each commission shall develop and issue guidelines to ensure the safety and efficacy of benefits provided pursuant to this section.

d. As used in this section:

[1]**[**"Naloxone" means a drug or device containing naloxone hydrochloride that is approved by the United States Food and Drug Administration for the treatment of an opioid overdose, either in the intramuscular or intranasal form and including a nasal atomizer if required to administer the drug**]** "Opioid antidote" means naloxone hydrochloride, or any other similarly acting drug approved by the United States Food and Drug Administration for self-administration for the treatment of an opioid overdose[1].

4. This act shall take effect immediately and apply to every contract issued, renewed, or issued for renewal on or after that date, notwithstanding any federal approval required under the Medicaid and NJ FamilyCare programs pursuant to section 2 of this act.