

# ASSEMBLY APPROPRIATIONS COMMITTEE

## STATEMENT TO

[Second Reprint]

## SENATE, No. 526

with committee amendments

# STATE OF NEW JERSEY

DATED: FEBRUARY 24, 2021

The Assembly Appropriations Committee reports favorably Senate Bill No. 526 (2R), with committee amendments.

As amended, this bill makes certain findings and declarations concerning the rising cost of insulin and requires health benefits plans issued pursuant to the New Jersey Individual Health Coverage and Small Employer Health Benefits Programs, the State Health Benefits Program, and the School Employees' Health Benefits Program, to provide coverage for insulin for the treatment of diabetes.

The bill further requires health insurers (health, hospital and medical service corporations, commercial individual and group health insurers, and health maintenance organizations) and health benefits plans issued pursuant to the New Jersey Individual Health Coverage and Small Employer Health Benefits Programs, the State Health Benefits Program, and the School Employees' Health Benefits Program to provide coverage for the purchase of insulin that is not subject to any deductible and to limit the copayment or coinsurance that may be required for an insulin prescription to \$50 per 30 day supply of insulin.

The bill specifies that nothing in the bill is to prevent the State Health Benefits Commission or the School Employees' Health Benefits Commission from reducing an enrollee's cost-sharing requirement by an amount greater than the amount specified in the bill or from utilizing formulary management, including a mandatory generic policy, to promote the use of lower-cost alternative generic drugs that are the therapeutic equivalent of the brand-name drug.

As adopted and reported by this committee, Senate Bill No. 526(2R) is identical to the Assembly Committee Substitute for Assembly Bill Nos. 954, 653, and 1669, as also adopted and reported by this committee.

### COMMITTEE AMENDMENTS:

The committee amended the bill to specify that nothing in the bill is to prevent the State Health Benefits Commission or the School Employees' Health Benefits Commission from reducing an enrollee's

cost-sharing requirement by an amount greater than the amount specified in the bill or from utilizing formulary management, including a mandatory generic policy, to promote the use of lower-cost alternative generic drugs that are the therapeutic equivalent of the brand-name drug.

FISCAL IMPACT:

There is currently no fiscal information available for this bill.