**A** **BILL**

TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 38‑71‑48 SO AS TO DEFINE “PRESCRIPTION INSULIN DRUG” AND REQUIRE ALL INDIVIDUAL AND GROUP HEALTH INSURANCE, HEALTH MAINTENANCE ORGANIZATIONS, AND THE STATE HEALTH PLAN TO CAP AN INSURED’S MONTHLY COST‑SHARING OBLIGATION FOR COVERED PRESCRIPTION INSULIN DRUGS.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Article 1, Chapter 71, Title 38 of the 1976 Code is amended by adding:

“Section 38‑71‑48. (A) ‘Prescription insulin drug’ means a prescription drug that contains insulin, is used to treat diabetes, and has been prescribed as medically necessary by the treating physician.

(B) All health insurance plans offered by individual and group health insurers and health maintenance organizations, including the State Health Plan, providing coverage for medical treatment must cap the total amount of cost‑sharing required of an insured at an amount not to exceed one hundred dollars per thirty‑day supply of prescription insulin drug, regardless of the amount or type of insulin needed to fill the insured’s prescription.

(C) This section does not prevent an insurer from reducing an insured’s cost‑sharing obligation by an amount greater than the amount specified in subsection (B).

(D) The Department of Insurance may adopt rules and regulations to administer this section.”

SECTION 2. This act takes effect upon approval by the Governor and applies to health insurance plans issued, renewed, delivered, or entered into after June 30, 2020.

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