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THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1260 Session of 2021

INTRODUCED BY THOMAS, SAMUELSON, BENHAM, BROOKS, CONKLIN, SCHLEGEL CULVER, FREEMAN, HENNESSEY, HILL-EVANS, JOZWIAK, KOSIEROWSKI, LONGIETTI, McNEILL, MIZGORSKI, O'MARA, OTTEN, PARKER, PICKETT, POLINCHOCK, SANCHEZ, SAPPEY, SCHLOSSBERG, SHUSTERMAN, STEPHENS, WEBSTER, D. WILLIAMS, A. BROWN, FARRY, FITZGERALD, DEASY, CIRESI AND N. NELSON, APRIL 21, 2021

AS AMENDED ON SECOND CONSIDERATION, HOUSE OF REPRESENTATIVES, OCTOBER 26, 2021

AN ACT

Amending the act of August 26, 1971 (P.L.351, No.91), entitled "An act providing for a State Lottery and administration thereof; authorizing the creation of a State Lottery 3 Commission; prescribing its powers and duties; disposition of funds; violations and penalties therefor; exemption of prizes from State and local taxation and making an appropriation," in Pharmaceutical Assistance for the Elderly, further 7 providing for the pharmaceutical assistance contract for the 8 elderly needs enhancement tier, for board, for powers of the 9 department and for coordination of benefits. 10 The General Assembly of the Commonwealth of Pennsylvania 11 12 hereby enacts as follows: 13 Section 1. Section 519(b) and (c.1) of the act of August 26, 1971 (P.L.351, No.91), known as the State Lottery Law, are 14 15 amended to read: 16 Section 519. The Pharmaceutical Assistance Contract for the 17 Elderly Needs Enhancement Tier. 18

(b) PACENET eligibility. -- A person with an annual income of

- 1 not less than \$14,500 and not more than [\$27,500] \$33,500 in the
- 2 case of a single person and of not less than \$17,700 and not
- 3 more than [\$35,500] \$41,500 in the case of the combined income
- 4 of persons married to each other shall be eligible for enhanced
- 5 pharmaceutical assistance under this section. A person may, in
- 6 reporting income to the department, round the amount of each
- 7 source of income and the income total to the nearest whole
- 8 dollar, whereby any amount which is less than 50¢ is eliminated.
- 9 +(c.1) Premium.--In those instances in which a PACENET
- 10 claimant is not enrolled in Part D pursuant to section 533, the
- 11 claimant shall be required to pay a monthly premium equivalent
- 12 to the regional benchmark premium[.] FOR EACH MONTH THE CLAIMANT <--

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- 13 IS DISPENSED A PRESCRIPTION DRUG. THE CLAIMANT SHALL NOT BE
- 14 REQUIRED TO PAY A MONTHLY PREMIUM FOR ANY MONTH THE CLAIMANT IS
- 15 NOT DISPENSED A PRESCRIPTION DRUG.
- 16 * * *
- 17 Section 2. Section 520(c.1) of the act is amended by adding
- 18 a paragraph to read:
- 19 Section 520. Board.
- 20 * * *
- 21 (c.1) Powers and duties. -- The board shall advise on the
- 22 following:
- 23 * * *
- 24 (4) The development and modernization of the program, as
- 25 <u>necessary, to ensure that the program is providing and</u>
- 26 continues to provide the assistance intended in a fiscally
- 27 <u>responsible manner.</u>
- 28 * * *
- 29 Section 3. Sections 533 and $\frac{534(b)(3)}{and(4)}$ 534(B)(4) of <--
- 30 the act are amended to read:

- 1 Section 533. Powers of the department.
- 2 The department [shall]:

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- 3 (1) [Identify] Shall identify the Part D plan or plans
 4 with which the department has entered into a contract under
 5 section 534 that meet the prescription drug needs and
 6 pharmacy preferences of a claimant.
- 7 (2) [Recommend] May require that the claimant enroll in 8 the Part D plan or program that meets the prescription drug 9 needs and pharmacy preferences of the claimant in the most cost-effective manner for the Commonwealth.
 - (3) [Initiate] Shall initiate enrollment on behalf of the claimant in the Part D plan recommended by the department unless the claimant notifies the department that the claimant wishes to enroll in another Part D plan.
 - (4) [File] Shall file and pursue appeals in accordance with CMS regulations with a claimant's Part D plan on the claimant's behalf to request exceptions to the plan's tiered cost-sharing structure or to request a nonformulary Part D drug.
 - (5) [Assist] Shall assist claimants the department believes to be eligible for the LIS in making an application to the Social Security Administration.
 - (6) [Provide] <u>Shall provide</u> at least ten days for the claimant to decline enrollment in the recommended plan.
- 25 (7) [Develop] <u>Shall develop</u> and distribute language, 26 when recommending enrollment, notifying claimants of:
- 27 (i) The ability to decline enrollment in the recommended Part D plan.
- 29 (ii) The ability to file and pursue appeals to the 30 recommended Part D plan on their own behalf.

- 1 (iii) The possibility that their choice of plan may
- 2 affect their medical coverage if they are enrolled in a
- 3 Medicare advantage plan, if applicable.
- 4 Section 534. Coordination of benefits.
- 5 * * *
- 6 (b) Specific coordination provisions. -- The following
- 7 provisions shall apply to claimants who are also Part D
- 8 enrollees:
- 9 * * *
- 10 (3) The program shall pay the premium assessed by a PACE <--
- 11 <u>or PACENET</u> enrollee's PDP or, with respect to the
- 12 prescription drug plan, Medicare Advantage Prescription Drug
- 13 Plan in an amount not to exceed the regional benchmark
- 14 premium and any copayments in excess of those set forth in
- 15 section 509.
- f(4) Part D enrollees enrolled in PACENET shall pay the
- Part D premiums charged by their PDP or, with respect to the
- 18 prescription drug plan, Medicare Advantage Prescription Drug
- 19 Plan and the program shall pay any copayments in excess of
- 20 those set forth in section 519. A CLAIMANT ENROLLED IN A PDP <--
- 21 SHALL NOT BE REQUIRED TO PAY A MONTHLY PREMIUM FOR ANY MONTH
- 22 THE CLAIMANT IS NOT DISPENSED A PRESCRIPTION DRUG.
- 23 * * *
- 24 Section 4. This act shall take effect in 60 days.