

Kansas



Kansas - HB 2157

Sponsor:

Actions: 02/03/2021 Hearing held
01/27/2021 Introduced; Referred to Health and Human Services Committee

Summary: Summary for 1/27/21 Version

This measure establishes conditions for step therapy requirements, exceptions, and appeals.

This measure is applicable to health insurers.

This measure requires health insurers to consider evidence-based and peer-reviewed clinical practice guidelines when establishing a step therapy protocol. The review must be available to patients by request. Insurers must also provide a method for providers and patients to request step therapy exceptions. Requests for exceptions must be responded to within 72 hours or 24 hours if the prescriber indicates exigent circumstances. If the insurer fails to respond within that timeframe, the request or appeal will be granted.

An exception will be made if;

- a) The prescription drug is contraindicated or a
- b) There is a documented adverse effect with a previous use or a medical condition is likely to cause an adverse reaction, including decreasing reasonable functional ability
- c) The patient has had a trial of the drug or a drug in the same pharmacologic class but discontinued the trial due to lack of effectiveness or adverse effect
- d) The patient is currently receiving a positive therapeutic effect from a drug and the prescriber provides documentation that a change in prescription will be ineffective or cause harm

Patients or providers may appeal a decision. Insurers must specifically state why the request was denied.

This measure does not require insurers to provide coverage for prescription medication that is outside of the patient's plan.

The Department of Insurance is authorized to promulgate rules necessary to implement this measure.

This measure, if enacted, will take effect on January 1, 2022.

Bill Links [1/27/21 Version](#)