
HOUSE BILL 2435

State of Washington 62nd Legislature 2012 Regular Session

By Representatives Green, Harris, Appleton, Jenkins, Walsh, Lytton, Clibborn, Johnson, Dunshee, Rivers, Bailey, Wylie, Moeller, and Ormsby

Read first time 01/13/12. Referred to Committee on Health Care & Wellness.

1 AN ACT Relating to prescription drug benefits; and adding a new
2 section to chapter 48.43 RCW.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** A new section is added to chapter 48.43 RCW
5 to read as follows:

6 (1)(a) A health carrier that provides coverage for prescription
7 drugs shall provide a single limit on out-of-pocket expenses in all of
8 its health plans. All out-of-pocket expenses incurred by a covered
9 person for medical services, surgical services, mental health services,
10 or prescription drugs shall be included in the limit. The out-of-
11 pocket limit required by this subsection may not exceed five thousand
12 nine hundred fifty dollars for plans that cover a single enrollee or
13 eleven thousand nine hundred dollars for plans that cover more than one
14 enrollee. In July 2013 and every July thereafter, the insurance
15 commissioner shall adjust the out-of-pocket limits in this subsection
16 to reflect the percentage change in the consumer price index for
17 medical care for a preceding twelve months, as determined by the United
18 States department of labor. The adjusted amounts shall apply on the
19 following January 1st.

1 (b) This subsection (1) does not apply to catastrophic health
2 plans.

3 (2) This section applies to health plans delivered, issued for
4 delivery, or renewed on or after January 1, 2013.

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