



## Specialty Tier Reform Update – Week of June 23, 2014

By Mark Hobraczk

### STATES

#### California

#### ***Senate advances bill limiting prescription drug cost-sharing***

The Senate Health Committee passed A.B. 1917 this week, which would prohibit cost-sharing for a 30-day supply of any single prescription from exceeding 1/12 of the annual out-of-pocket limits set by the Affordable Care Act (ACA). For a drug that has a time-limited course of treatment of three months or less, this limit would be set at one-half of the annual out-of-pocket limit for the time-limited course of treatment.

The measure cleared the Assembly late last month, which revised the cap from 1/24 of the annual out-of-pocket limit to 1/12 (see Specialty Tier Reform Update for Week of June 2<sup>nd</sup>). The Health committee amended A.B. 1917 to clarify that the limits apply to self-only coverage. It now moves to the Senate Appropriations Committee prior to a full floor vote.

A.B. 1917 would effectively spread out the cost-sharing for the highest tier specialty drugs over a full year instead of forcing consumers to pay all at once and is backed by consumer groups like Health Access California.