HB 2574 -5 STAFF MEASURE SUMMARY

House Committee On Behavioral Health and Health Care

Prepared By:Brian Nieubuurt, LPRO AnalystSub-Referral To:Joint Committee On Ways and MeansMeeting Dates:2/14, 3/13

WHAT THE MEASURE DOES:

Requires hospitals to adopt policies and procedures for prescribing and dispensing of five-day supply of human immunodeficiency virus (HIV) post-exposure prophylactic (PEP) drugs or therapies following patient's possible exposure to HIV. Requires Oregon Health Authority (OHA) to prescribe by rule formula to determine number of five-day supplies of PEP drugs or therapies needed by type A or type B hospitals and provide those supplies to hospitals at no cost. Prohibits health benefit plans from imposing cost-sharing for coverage of five-day supply of PEP drugs or therapies.

ISSUES DISCUSSED:

- Barriers to PEP access, especially in rural areas
- Responsibility for required coverage
- Cost of PEP therapies
- Potential implications of prohibition on cost-sharing for enrollees of high deductible health plans

EFFECT OF AMENDMENT:

-5 Exempts special inpatient care facilities. Clarifies hospital responsibility to dispense minimum of five-day supply of PEP drugs or therapies, including requiring patient's informed consent. Modifies requirement for OHA to provide PEP drugs and therapies to type A and type B hospitals to one 30-day supply annually. Clarifies prohibition against health benefit plan imposition of deductible, copayment, coinsurance, or other cost-sharing for supplies of PEP drugs and therapies.

FISCAL: Fiscal impact issued

REVENUE: No revenue impact

BACKGROUND:

Post-exposure prophylactic drugs and therapies that, if taken after recent exposure to the human immunodeficiency virus (HIV), can prevent HIV infection. In order to be effective, PEP therapies need to be started within 72 hours and taken for 28 days. Side effects of PEP are generally not life threatening, but can include treatable issues like nausea.

In 2021, the Legislative Assembly passed House Bill 2958, allowing pharmacists to prescribe, dispense, and administer both preexposure prophylactic antiretroviral (PrEP) and PEP therapies. The measure also required health insurers to cover the cost of prescription, dispensation and administration of PrEP and PEP therapies, including patient consultation by the prescribing pharmacist.

House Bill 2574 would require hospitals to adopt policies and procedures for the prescribing and dispensing of a five-day supply of post-exposure prophylactic drugs and therapies and would require the Oregon Health Authority to provide type A and B hospitals the five-day supply at no cost.