

AMENDMENT**OFFERED BY M**____.

Add at the end the following:

1 **SEC. ____.** **REQUIREMENTS WITH RESPECT TO COST-SHAR-**
2 **ING FOR INSULIN PRODUCTS.**

3 (a) PHSA.—Part D of title XXVII of the Public
4 Health Service Act (42 U.S.C. 300gg–111 et seq.) is
5 amended by adding at the end the following new section:

6 **“SEC. 2799A–11. REQUIREMENTS WITH RESPECT TO COST-**
7 **SHARING FOR CERTAIN INSULIN PRODUCTS.**

8 “(a) IN GENERAL.—For plan years beginning on or
9 after January 1, 2026, a group health plan or health in-
10 surance issuer offering group or individual health insur-
11 ance coverage shall provide coverage of selected insulin
12 products, and with respect to such products, shall not—

13 “(1) apply any deductible; or

14 “(2) impose any cost-sharing in excess of the
15 lesser of, per 30-day supply—

16 “(A) \$35; or

17 “(B) the amount equal to 25 percent of
18 the negotiated price of the selected insulin prod-
19 uct net of all price concessions received by or on
20 behalf of the plan or coverage, including price

1 concessions received by or on behalf of third-
2 party entities providing services to the plan or
3 coverage, such as pharmacy benefit manage-
4 ment services.

5 “(b) DEFINITIONS.—In this section:

6 “(1) SELECTED INSULIN PRODUCTS.—The term
7 ‘selected insulin products’ means at least one of each
8 dosage form (such as vial, pump, or inhaler dosage
9 forms) of each different type (such as rapid-acting,
10 short-acting, intermediate-acting, long-acting, ultra
11 long-acting, and premixed) of insulin (as defined
12 below), when available, as selected by the group
13 health plan or health insurance issuer.

14 “(2) INSULIN DEFINED.—The term ‘insulin’
15 means insulin that is licensed under subsection (a)
16 or (k) of section 351 and continues to be marketed
17 under such section, including any insulin product
18 that has been deemed to be licensed under section
19 351(a) pursuant to section 7002(e)(4) of the Bio-
20 logics Price Competition and Innovation Act of 2009
21 and continues to be marketed pursuant to such li-
22 censure.

23 “(c) OUT-OF-NETWORK PROVIDERS.—Nothing in
24 this section requires a plan or issuer that has a network
25 of providers to provide benefits for selected insulin prod-

1 ucts described in this section that are delivered by an out-
2 of-network provider, or precludes a plan or issuer that has
3 a network of providers from imposing higher cost-sharing
4 than the levels specified in subsection (a) for selected insu-
5 lin products described in this section that are delivered
6 by an out-of-network provider.

7 “(d) RULE OF CONSTRUCTION.—Subsection (a) shall
8 not be construed to require coverage of, or prevent a group
9 health plan or health insurance coverage from imposing
10 cost-sharing other than the levels specified in subsection
11 (a) on, insulin products that are not selected insulin prod-
12 ucts, to the extent that such coverage is not otherwise re-
13 quired and such cost-sharing is otherwise permitted under
14 Federal and applicable State law.

15 “(e) APPLICATION OF COST-SHARING TOWARDS
16 DEDUCTIBLES AND OUT-OF-POCKET MAXIMUMS.—Any
17 cost-sharing payments made pursuant to subsection (a)(2)
18 shall be counted toward any deductible or out-of-pocket
19 maximum that applies under the plan or coverage.”.

20 (b) NO EFFECT ON OTHER COST-SHARING.—Section
21 1302(d)(2) of the Patient Protection and Affordable Care
22 Act (42 U.S.C. 18022(d)(2)) is amended by adding at the
23 end the following new subparagraph:

24 “(D) SPECIAL RULE RELATING TO INSU-
25 LIN COVERAGE.—The exemption of coverage of

1 selected insulin products (as defined in section
2 2799A–11(b) of the Public Health Service Act)
3 from the application of any deductible pursuant
4 to section 2799A–11(a)(1) of such Act shall not
5 be considered when determining the actuarial
6 value of a qualified health plan under this sub-
7 section.”.

8 (c) COVERAGE OF CERTAIN INSULIN PRODUCTS
9 UNDER CATASTROPHIC PLANS.—Section 1302(e) of the
10 Patient Protection and Affordable Care Act (42 U.S.C.
11 18022(e)) is amended by adding at the end the following:

12 “(4) COVERAGE OF CERTAIN INSULIN PROD-
13 UCTS.—

14 “(A) IN GENERAL.—Notwithstanding para-
15 graph (1)(B)(i), a health plan described in
16 paragraph (1) shall provide coverage of selected
17 insulin products, in accordance with section
18 2799A–11 of the Public Health Service Act, for
19 a plan year before an enrolled individual has in-
20 curred cost-sharing expenses in an amount
21 equal to the annual limitation in effect under
22 subsection (c)(1) for the plan year.

23 “(B) TERMINOLOGY.—For purposes of
24 subparagraph (A)—

1 “(i) the term ‘selected insulin prod-
2 ucts’ has the meaning given such term in
3 section 2799A–11(b) of the Public Health
4 Service Act; and

5 “(ii) the requirements of section
6 2799A–11 of such Act shall be applied by
7 deeming each reference in such section to
8 ‘individual health insurance coverage’ to be
9 a reference to a plan described in para-
10 graph (1).”.

