

(H. B. 3984)

**(No. 100)**

(Approved June 27, 2008)

## **AN ACT**

To amend Section 6 of Article VI of Act No. 72 of September 7, 1993, as amended, known as the “Health Reform Act” to direct that the list of medications for HIV/AIDS patients be reviewed annually.

### **STATEMENT OF MOTIVES**

A series of medications are presently in the market whose use has proven to be effective in the treatment of HIV/AIDS patients; however, these medications are not available to the patients of the Health Reform. This is allegedly so because the committees that evaluate and select medication have not met to analyze the medications recommended to treat HIV and AIDS patients covered by the Health Reform.

Among the medications available and which the Health Reform does not cover are the following:

- Fuzeon
- Emtriva
- Epzicom
- Truvada
- Viread
- Atripla

Due to their particular condition, HIV/AIDS patients need to have available all those medications that help to control their condition. This cannot be subjected to bureaucratic and arbitrary determinations by the

Health Insurance Administration (ASES, Spanish acronym). The information gathered evinces that ASES has not reviewed the list of the medications for treating HIV and AIDS covered by the Health Reform since 2000.

According to ASES, the reason for not having included the new medications during this period of time is the terms of the contracts between the Administration and the pharmaceutical companies. For such reason, it is necessary to amend the Act in order to impose on ASES the obligation to review the list of medications for HIV/AIDS patients. In this manner, we shall guarantee to these patients the proper treatment for their condition and that they shall have access to the best medications available.

***BE IT ENACTED BY THE LEGISLATURE OF PUERTO RICO:***

Section 1.- Section 6 of Article VI of Act No. 72 of September 7, 1993, as amended, is hereby amended to read as follows:

“Article VI.-

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Section 6.- Coverage and Minimum Benefits

Health plans shall have a broad coverage, with a minimum of exclusions. There shall be no exclusions for pre-existing conditions, nor waiting periods at the time coverage is granted to the beneficiary.

Coverage A.- The Administration shall establish a coverage of benefits to be offered by the contracted insurers or participating providers. The coverage shall include, among others, the following benefits: out-patient services, hospitalizations, dental health, mental health, studies, testing and equipment for beneficiaries that require the use of a ventilator for life support, laboratory tests, and X-rays, as well as prescription medications, which shall be dispensed by a participating pharmacy, freely selected by the

insured and licensed under the laws of Puerto Rico. The coverage shall provide for each beneficiary to have available the laboratory tests and immunizations appropriate to his/her age, sex and physical condition annually. Provided however, that the list of medications for HIV/AIDS patients shall be reviewed annually so that in the event that the Administration should deem it pertinent to include those new medications necessary for the treatment of the condition, the same shall be dispensed and offered pursuant to the best medical practices, provided that the State Plan signed by the Department of Health and the Health Resources and Services Administration is not affected.

The Administration shall revise this coverage periodically.

Coverage B.- The hospital services coverage shall be available twenty-four (24) hours a day, every day of the year.

Coverage C.- In its out-patient coverage, the plans shall include the following without being a limitation:

- (1) Preventive health services:
  - (a) Vaccination of children and adolescents up to eighteen (18) years of age.
  - (b) Vaccination against influenza and pneumonia for persons over sixty-five (65) years of age, and/or children and adults with high risk illnesses such as pulmonary, kidney, diabetes and heart diseases, among others.
  - (c) Visit to the primary physician for a general medical examination once a year.
  - (d) Screening test to detect gynecologic, breast and prostate cancer, according to acceptable practices.

e) Sigmoidoscopy in adults over fifty (50) years of age with risk of colon cancer, according to acceptable practices.

(2) Evaluation and treatment of beneficiaries with known diseases:

The initial evaluation and treatment of beneficiaries shall be made by the primary physician chosen by the patient from among the providers of the corresponding plan.

(3) The Administration shall render a report to the Legislature every six (6) months, which shall include, among others, the list of medications, the controversies which have arisen with the State Plan signed by the Department of Health and the Health Resources and Services Administration, and the number of patients that are affected by these controversies.

Primary physicians shall have the responsibility of the out-patient management of the beneficiaries under their care, providing them with continuity of services. Likewise, they shall be the only ones authorized to refer the beneficiary to the supporting physicians and primary purveyors.”

Section 2.- This Act shall take effect immediately after its approval.

## CERTIFICATION

I hereby certify to the Secretary of State that the following Act No. 100 (H.B. 3984) of the 7<sup>th</sup> Session of the 15<sup>th</sup> Legislature of Puerto Rico:

**AN ACT** to amend Section 6 of Article VI of Act No. 72 of September 7, 1993, as amended, known as the “Health Reform Act” to direct that the list of medications for HIV/AIDS patients be reviewed annually,

has been translated from Spanish to English and that the English version is correct.

In San Juan, Puerto Rico, today 15<sup>th</sup> of July of 2008.

Francisco J. Domenech  
Director