

LEGISLATURE OF NEBRASKA
ONE HUNDRED NINTH LEGISLATURE
FIRST SESSION

LEGISLATIVE BILL 158

Introduced by Wordekemper, 15.

Read first time January 13, 2025

Committee: Banking, Commerce and Insurance

1 A BILL FOR AN ACT relating to insurance; to require a health carrier or
2 pharmacy benefit manager to include amounts paid by a health benefit
3 plan enrollee or paid on behalf of an enrollee by another person for
4 purposes of calculating the enrollee's overall contribution to any
5 out-of-pocket maximum or cost-sharing requirement under a health
6 benefit plan as prescribed.

7 Be it enacted by the people of the State of Nebraska,

1 **Section 1.** (1) For purposes of this section:

2 (a) Cost-sharing requirement means any copayment, deductible, or
3 annual limitation on cost sharing, required by or on behalf of a health
4 benefit plan enrollee in order to receive a specific health care service,
5 including a prescription drug covered by a health plan, whether covered
6 under the medical or pharmacy benefit;

7 (b) Health benefit plan means a policy, contract, certificate, or
8 subscriber agreement entered into, offered, or issued by a health carrier
9 to provide, deliver, arrange for, pay for, or reimburse any of the costs
10 of health care services;

11 (c) Health carrier has the same meaning as in section 44-1303;

12 (d) Person means a natural person, corporation, mutual company,
13 unincorporated association, partnership, joint venture, limited liability
14 company, trust, estate, foundation, nonprofit corporation, unincorporated
15 organization, or government or governmental subdivision or agency; and

16 (e) Pharmacy benefit manager has the same meaning as in section
17 44-4603.

18 (2)(a) Except as provided in subdivision (b) of this subsection, for
19 any health benefit plan entered into, amended, extended, or renewed on or
20 after January 1, 2026, a health carrier or pharmacy benefit manager shall
21 include any amount paid by a health benefit plan enrollee or paid on
22 behalf of an enrollee by another person for purposes of calculating the
23 enrollee's overall contribution to any out-of-pocket maximum or cost-
24 sharing requirement under a health benefit plan.

25 (b) If the requirement described in subdivision (a) of this
26 subsection would result in the ineligibility of a health savings account
27 under section 223 of the Internal Revenue Code, such requirement for such
28 health savings account shall only apply after the enrollee has satisfied
29 the minimum deductible under section 223 of the Internal Revenue Code,
30 except that for items or services that are preventive care pursuant to
31 section 223(c)(2)(C) of the Internal Revenue Code, such requirement shall

- 1 apply regardless of whether the minimum deductible under section 223 of
- 2 the Internal Revenue Code has been satisfied.