



## 2025 ASSEMBLY BILL 246

May 8, 2025 - Introduced by Representatives SNODGRASS, MAYADEV, MCCARVILLE, ANDERSON, ANDRACA, ARNEY, BARE, BROWN, CLANCY, DESMIDT, EMERSON, FITZGERALD, J. JACOBSON, JOERS, JOHNSON, MADISON, MIRESE, MOORE OMOKUNDE, NEUBAUER, ORTIZ-VELEZ, PALMERI, PHELPS, PRADO, ROE, SHEEHAN, SPAUDE, STROUD, STUBBS, SUBECK, TENORIO and UDELL, cosponsored by Senators DASSLER-ALFHEIM, KEYESKI, DRAKE, HESSELBEIN, L. JOHNSON, LARSON, RATCLIFF, ROYS, SPREITZER and WIRCH. Referred to Committee on Health, Aging and Long-Term Care.

- 1     **AN ACT** *to create* 609.835 and 632.895 (16g) of the statutes; **relating to:** cost-
- 2             sharing caps on prescription drugs and medical supplies to treat asthma
- 3             under health insurance policies and plans.

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### *Analysis by the Legislative Reference Bureau*

This bill requires health insurance policies and plans that provide coverage of prescription drugs to cover prescription drugs and related medical supplies for the treatment of asthma. This bill provides that “related medical supplies” includes asthma inhalers and other medical supply items necessary to effectively and appropriately administer a prescription drug prescribed to treat asthma. This bill requires policies and plans to limit the amount of any enrollee cost-sharing for the coverage provided in the bill to no more than \$25 per one-month supply for each prescription drug prescribed to treat asthma and to no more than \$50 per month for all related medical supplies. Cost-sharing may not increase with the number of conditions for which an enrollee is treated. Further, the coverage provided in the bill may not be subject to any deductible. However, the bill provides that the limitations on cost-sharing and deductibles do not apply to the extent that the limitations would result in ineligibility for a health savings account under the federal Internal Revenue Code.

This proposal may contain a health insurance mandate requiring a social and financial impact report under s. 601.423, stats.

**ASSEMBLY BILL 246****SECTION 1**

For further information see the state fiscal estimate, which will be printed as an appendix to this bill.

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*The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:*

1       **SECTION 1.** 609.835 of the statutes is created to read:

2       **609.835 Coverage of prescription drugs and medical supplies to treat**  
3       **asthma.** Limited service health organizations, preferred provider plans, and  
4       defined network plans are subject to s. 632.895 (16g).

5       **SECTION 2.** 632.895 (16g) of the statutes is created to read:

6       **632.895 (16g) COVERAGE OF PRESCRIPTION DRUGS AND MEDICAL SUPPLIES TO**  
7       **TREAT ASTHMA.** (a) In this subsection, “related medical supplies” includes asthma  
8       inhalers and other medical supply items necessary to effectively and appropriately  
9       administer a prescription drug prescribed to treat asthma.

10       (b) Subject to par. (c), every disability insurance policy and every self-insured  
11       health plan of the state or of a county, city, town, village, or school district that  
12       provides coverage of prescription drugs shall cover prescription drugs and related  
13       medical supplies for the treatment of asthma.

14       (c) A disability insurance policy or self-insured health plan of the state or of a  
15       county, city, town, village, or school district to which par. (b) applies shall limit the  
16       amount of any enrollee cost-sharing to no more than \$25 per one-month supply for  
17       each prescription drug prescribed to treat asthma and to no more than \$50 per  
18       month for all related medical supplies. The cost-sharing limitations under this  
19       paragraph may not increase with the number of conditions for which an enrollee is  
20       treated. Coverage under this subsection may not be subject to any deductible.

**ASSEMBLY BILL 246****SECTION 2**

1 (d) If, under federal law, application of par. (c) would result in ineligibility for  
2 a health savings account under section 223 of the Internal Revenue Code, par. (c)  
3 shall apply to a health-savings-account-qualified high deductible health plan with  
4 respect to the deductible of such a plan only after the enrollee has satisfied the  
5 minimum deductible under section 223 of the Internal Revenue Code, except with  
6 respect to items or services that are preventive care pursuant to section 223 (c) (2)  
7 (C) of the Internal Revenue Code, in which case par. (c) shall apply regardless of  
8 whether the minimum deductible under section 223 of the Internal Revenue Code  
9 has been satisfied.

**SECTION 3. Initial applicability.**

10 (1) For policies and plans containing provisions inconsistent with this act, this  
11 act first applies to policy or plan years beginning on the effective date of this  
12 subsection, except as provided in sub. (2).  
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14 (2) For policies and plans that are affected by a collective bargaining  
15 agreement containing provisions inconsistent with this act, this act first applies to  
16 policy or plan years beginning on the effective date of this subsection or on the day  
17 on which the collective bargaining agreement is newly established, extended,  
18 modified, or renewed, whichever is later.

**SECTION 4. Effective date.**

19 (1) This act takes effect on the first day of the 4th month beginning after  
20 publication.  
21

22 (END)