

**NEW YORK STATE SENATE  
INTRODUCER'S MEMORANDUM IN SUPPORT  
submitted in accordance with Senate Rule VI. Sec 1**

**BILL NUMBER:** S7114/A.6425

**SPONSOR:** RIVERA

**TITLE OF BILL:**

An act to amend the insurance law, in relation to requiring health insurance plans to provide coverage for epinephrine auto-injector devices

**PURPOSE OR GENERAL IDEA OF BILL:**

To require insurance coverage for epinephrine auto-injectors ("epipens") and set an annual cost-sharing cap.

**SUMMARY OF PROVISIONS:**

Section 1 amends subsection (i) of section 3216 of the insurance law, as it relates to individual accident and health insurance policy provisions, by adding a new paragraph 39 to require insurance coverage of epinephrine auto-injectors.

Section 2 amends subsection (k) of section 3221, as it relates to group or blanket accident and health insurance policies of the insurance law, by adding a new paragraph 23 that provides coverage requirements and a maximum copayment of \$100 annually for two epinephrine auto-injector devices.

Section 3 amends section 4303 of the insurance law by adding a new subsection (vv) to provide coverage requirements and maximum copayment.

Section 4 provides the effective date.

**JUSTIFICATION:**

The rising cost of an epinephrine auto-injector, or "epi-pen," has far outpaced inflation in recent years. Without mandated coverage and a reasonable cost-sharing cap, the accessibility of these life-saving devices are beyond the means of millions of New Yorkers.

In 2010, the most common price for a two-pack of epi-pens was approximately \$100. Today, the generic version will almost always cost upwards of \$350 and the brand name can cost upwards of \$700. It is unacceptable that so many people are forced to risk not having the device during a life-threatening emergency due to the prohibitive cost.

Separate studies by the National Institutes of Health (NIH) and Blue Cross Blue Shield showed that emergency room visits by children having

serious anaphylactic reactions have more than doubled during the 2010s, the same timeframe during which epi-pen prices began to skyrocket. An epinephrine auto-injector significantly mitigates the risk of death from a serious allergic reaction.

By mandating insurance plans to provide coverage for epi-pens and capping the annual cost at \$100 for two pens, these life-saving devices will be more widely accessible for those who need them. Access to essential medication should not be contingent on income level.

**PRIOR LEGISLATIVE HISTORY:**

New Bill.

**FISCAL IMPLICATIONS FOR STATE AND LOCAL GOVERNMENTS:**

None.

**EFFECTIVE DATE:**

Immediately