

CS FOR HOUSE BILL NO. 345(HSS)

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-NINTH LEGISLATURE - SECOND SESSION

BY THE HOUSE HEALTH AND SOCIAL SERVICES COMMITTEE

Offered: 4/7/16

Referred: Finance

Sponsor(s): REPRESENTATIVES CLAMAN, Muñoz, Kito

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to insurance coverage for contraceptives and related services; relating**
2 **to medical assistance coverage for contraceptives and related services; and providing for**
3 **an effective date."**

4 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

5 *** Section 1.** AS 21.42 is amended by adding a new section to read:

6 **Sec. 21.42.427. Coverage for contraceptives.** (a) A health care insurer that
7 offers, issues for delivery, delivers, or renews in the state a health care insurance plan
8 in the group or individual market shall

9 (1) provide coverage for

10 (A) prescription contraceptives;

11 (B) voluntary sterilization procedures; and

12 (C) consultations, examinations, procedures, and medical
13 services that are necessary to prescribe, dispense, insert, deliver, distribute,
14 administer, or remove the drugs, devices, and other products or services

1 provided under this paragraph;

2 (2) reimburse a health care provider or dispensing entity for dispensing
3 prescription contraceptives intended to last for a 12-month period for subsequent
4 dispensings of the same prescription contraceptive to the insured regardless of whether
5 the insured was enrolled in the health care insurance plan at the time of the first
6 dispensing.

7 (b) A health care insurer may not deny coverage or reimbursement under (a)
8 of this section because an insured changed contraceptive methods within a 12-month
9 period.

10 (c) A health care insurer may not offset the costs of compliance with (a) of
11 this section and may not require copayments, deductibles, or other forms of cost
12 sharing for contraceptives or services covered under (a) of this section.

13 (d) A health care insurer may not restrict or delay the coverage or
14 reimbursement required under (a) of this section, including use of medical
15 management techniques that limit an insured's choice in accessing a full range of
16 prescription contraceptives.

17 (e) A health care insurer shall provide coverage and reimbursement under (a)
18 of this section to all insureds enrolled in a health care insurance plan, including
19 enrolled spouses and dependents.

20 (f) A health care insurer that offers, issues for delivery, delivers, or renews in
21 the state a health care insurance plan in the group market to a religious employer is
22 exempt from the requirements of this section with respect to the health care insurance
23 plan of the religious employer if the religious employer opposes the coverage required
24 under this section and is an

25 (1) organization that meets the criteria set out in 26 U.S.C.
26 6033(a)(3)(A)(i) or (iii) (Internal Revenue Code of 1986), as amended; or

27 (2) eligible organization that has self-certified in the form and manner
28 specified by the United States Secretary of Labor or has provided notice to the United
29 States Secretary of Health and Human Services, under the requirements set out in 45
30 C.F.R. 147.131(b)(1) - (3).

31 (g) In this section,

1 (1) "health care insurer" includes a self-insured employer that offers,
 2 issues for delivery, delivers, or renews in the state a health care insurance plan for its
 3 employees;

4 (2) "prescription contraceptive" means a drug or device that requires a
 5 prescription and is approved by the United States Food and Drug Administration to
 6 prevent pregnancy.

7 * **Sec. 2.** AS 47.07.065 is amended by adding new subsections to read:

8 (b) The department shall pay for

9 (1) prescription contraceptives intended to last for a 12-month period
 10 for subsequent dispensings of the same prescription contraceptive if prescribed to and
 11 requested by the recipient, regardless of whether the recipient was receiving medical
 12 assistance at the time of the first dispensing; and

13 (2) consultations, examinations, procedures, and medical services that
 14 are necessary to

15 (A) prescribe, dispense, insert, distribute, or administer
 16 prescription contraceptives; or

17 (B) remove prescription contraceptives.

18 (c) Nothing in this section requires itemized reimbursement when a service is
 19 reimbursable as part of a bundled or composite rate.

20 (d) In this section, "prescription contraceptive" means a drug or device that
 21 requires a prescription and is approved by the United States Food and Drug
 22 Administration to prevent pregnancy.

23 * **Sec. 3.** The uncodified law of the State of Alaska is amended by adding a new section to
 24 read:

25 **MEDICAID STATE PLAN INSTRUCTIONS; NOTICE TO REVISOR OF**
 26 **STATUTES.** The Department of Health and Social Services shall immediately amend and
 27 submit for federal approval a state plan for medical assistance coverage consistent with
 28 AS 47.07.065(b) - (d), added by sec. 2 of this Act. The Department of Health and Social
 29 Services shall apply to the United States Department of Health and Human Services for any
 30 waivers necessary to implement AS 47.07.065(b) - (d), added by sec. 2 of this Act. The
 31 commissioner of health and social services shall notify the revisor of statutes in writing if the

1 United States Department of Health and Human Services approves the provisions of
2 AS 47.07.065(b) - (d), added by sec. 2 of this Act.

3 * **Sec. 4.** The uncodified law of the State of Alaska is amended by adding a new section to
4 read:

5 CONDITIONAL EFFECT. AS 47.07.065(b) - (d), added by sec. 2 of this Act, take
6 effect only if the commissioner of health and social services notifies the revisor of statutes in
7 writing under sec. 3 of this Act, on or before January 1, 2017, that the provisions of
8 AS 47.07.065(b) - (d), added by sec. 2 of this Act, have been approved by the United States
9 Department of Health and Human Services.

10 * **Sec. 5.** If AS 47.07.065(b) - (d), added by sec. 2 of this Act, take effect, they take effect on
11 the day after the date the commissioner of health and social services makes a certification to
12 the revisor of statutes under secs. 3 and 4 of this Act.

13 * **Sec. 6.** Except as provided in sec. 5 of this Act, this Act takes effect January 1, 2017.