

1 SB63
2 215744-1
3 By Senators Coleman-Madison, Figures and Beasley
4 RFD: Banking and Insurance
5 First Read: 11-JAN-22

SYNOPSIS: Under existing law, a health benefit plan is required to offer coverage for certain medical treatments and procedures.

This bill would require health benefit plans to provide coverage for continuous glucose monitors for all patients with diabetes.

A BILL
TO BE ENTITLED
AN ACT

Relating to health benefit plans; to require health benefit plans to provide coverage for continuous glucose monitoring; and to amend Sections 10A-20-6.16 and 27-21A-23, Code of Alabama 1975, as last amended by Act 2021-236 and Act 2021-341 of the 2021 Regular Session, to make conforming changes.

BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

Section 1. As used in Sections 2 and 3, the following terms shall have the following meanings:

1 (1) CONTINUOUS GLUCOSE MONITOR. An instrument or
2 device, including repair and replacement parts, which meets
3 all of the following requirements:

4 a. Is designed and offered for the purposes of
5 aiding an individual with diabetes.

6 b. Measures glucose levels at set intervals by means
7 of a small electrode placed under the skin and held in place
8 by an adhesive.

9 c. Is generally not useful to an individual who has
10 not been diagnosed with diabetes.

11 (2) HEALTH BENEFIT PLAN. Any group insurance plan,
12 individual health insurance policy or other policy, or
13 contract for health care services that covers hospital,
14 medical, or surgical expenses, health maintenance
15 organizations, preferred provider organizations, medical
16 service organizations, physician-hospital organizations, or
17 any other person, firm, corporation, joint venture, or other
18 similar business entity that pays for, purchases, or furnishes
19 group health care services to patients, insureds, or
20 beneficiaries in this state. For the purposes of this section,
21 a health benefit plan located or domiciled outside of the
22 State of Alabama is deemed to be subject to this section if
23 the plan, policy, or contract is issued or delivered in the
24 State of Alabama. The term includes, but is not limited to,
25 entities created pursuant to Article 6 of Chapter 20 of Title
26 10A.

1 Section 2. On and after October 1, 2022, each health
2 benefit plan shall offer, together with identification of
3 associated costs, policies, and contracts, coverage for
4 continuous glucose monitors for patients diagnosed with
5 diabetes.

6 Section 3. (a) The benefits provided in Section 2
7 shall be subject to the same annual deductible or coinsurance
8 established for all coverage benefits within a given policy.
9 Private third party payors may not reduce or eliminate
10 coverage due to the requirements Section 2.

11 (b) A health benefit plan subject to this section
12 and Sections 1 and 2 shall not terminate services, reduce
13 capitation payment, or otherwise penalize an attending
14 physician or health care provider who orders medical care
15 consistent with Section 2.

16 (c) Nothing in this section or Section 1 or 2 is
17 intended to expand the list of designations of covered
18 providers as specified in any health benefit plan.

19 Section 4. Sections 10A-20-6.16 and 27-21A-23, Code
20 of Alabama 1975, as last amended by Act 2021-236 and Act
21 2021-341 of the 2021 Regular Session, are amended to read as
22 follows:

23 "§10A-20-6.16.

24 "(a) No law of this state applying to insurance
25 companies shall be applicable to any corporation organized
26 under this article and amendments thereto or to any contract

1 made by the corporation; except the corporation shall be
2 subject to the following:

3 "(1) The provisions regarding annual premium tax to
4 be paid by insurers on insurance premiums.

5 "(2) Chapter 55 of Title 27.

6 "(3) Article 2 and Article 3 of Chapter 19 of Title
7 27.

8 "(4) Section 27-1-17.

9 "(5) Chapter 56 of Title 27.

10 "(6) Rules adopted by the Commissioner of Insurance
11 pursuant to Sections 27-7-43 and 27-7-44.

12 "(7) Chapter 54 of Title 27.

13 "(8) Chapter 57 of Title 27.

14 "(9) Chapter 58 of Title 27.

15 "(10) Chapter 59 of Title 27.

16 "(11) Chapter 54A of Title 27.

17 "(12) Chapter 12A of Title 27.

18 "(13) Chapter 2B of Title 27.

19 "(14) Chapter 29 of Title 27.

20 "(15) Chapter 62 of Title 27.

21 "(16) Chapter 63 of Title 27.

22 "(17) Chapter 45A of Title 27.

23 "(18) Sections 1, 2, and 3 of this act.

24 "(b) The provisions in subsection (a) that require
25 specific types of coverage to be offered or provided shall not
26 apply when the corporation is administering a self-funded

1 benefit plan or similar plan, fund, or program that it does
2 not insure.

3 "§27-21A-23.

4 "(a) Except as otherwise provided in this chapter,
5 provisions of the insurance law and provisions of health care
6 service plan laws shall not be applicable to any health
7 maintenance organization granted a certificate of authority
8 under this chapter. This provision shall not apply to an
9 insurer or health care service plan licensed and regulated
10 pursuant to the insurance law or the health care service plan
11 laws of this state except with respect to its health
12 maintenance organization activities authorized and regulated
13 pursuant to this chapter.

14 "(b) Solicitation of enrollees by a health
15 maintenance organization granted a certificate of authority
16 shall not be construed to violate any provision of law
17 relating to solicitation or advertising by health
18 professionals.

19 "(c) Any health maintenance organization authorized
20 under this chapter shall not be deemed to be practicing
21 medicine and shall be exempt from the provisions of Section
22 34-24-310, et seq., relating to the practice of medicine.

23 "(d) No person participating in the arrangements of
24 a health maintenance organization other than the actual
25 provider of health care services or supplies directly to
26 enrollees and their families shall be liable for negligence,

1 misfeasance, nonfeasance, or malpractice in connection with
2 the furnishing of such services and supplies.

3 "(e) Nothing in this chapter shall be construed in
4 any way to repeal or conflict with any provision of the
5 certificate of need law.

6 "(f) Notwithstanding the provisions of subsection
7 (a), a health maintenance organization shall be subject to all
8 of the following:

9 "(1) Section 27-1-17.

10 "(2) Chapter 56.

11 "(3) Chapter 54.

12 "(4) Chapter 57.

13 "(5) Chapter 58.

14 "(6) Chapter 59.

15 "(7) Rules adopted by the Commissioner of Insurance
16 pursuant to Sections 27-7-43 and 27-7-44.

17 "(8) Chapter 12A.

18 "(9) Chapter 54A.

19 "(10) Chapter 2B.

20 "(11) Chapter 29.

21 "(12) Chapter 62.

22 "(13) Chapter 63.

23 "(14) Chapter 45A.

24 "(15) Sections 1, 2, and 3 of this act."

25 Section 5. This act shall become effective on the
26 first day of the third month following its passage and
27 approval by the Governor, or its otherwise becoming law.

