

Bill No. CS for CS for SB 1294

Amendment No. \_\_\_\_

<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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Senator Kurth moved the following amendment:

**Senate Amendment (with title amendment)**

On page 1, line 19,

insert:

Section 1. This act may be cited as the "Equity in Prescription Insurance and Contraceptive Coverage Act of 1999."

Section 2. Legislative findings and intent.--

(1) The Legislature finds that:

(a) Each year, more than half of all pregnancies in this state are unintended.

(b) Contraceptive services are part of basic health care, allowing families to both adequately space desired pregnancies and avoid unintended pregnancy.

(c) Contraceptives are highly cost effective, yielding from \$4 to \$14 dollars in savings for every dollar expended.

(d) By reducing rates of unintended pregnancy, contraceptives help reduce the need for abortions.

(e) Unintended pregnancies lead to higher rates of

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1 infant mortality, low birth weight, and maternal morbidity and  
2 threaten the economic viability of families.

3 (f) Most women in this state of childbearing age rely  
4 on private employment-related insurance to cover their medical  
5 expenses.

6 (g) Most private insurers cover prescription drugs,  
7 but many exclude coverage for prescription contraceptives.

8 (h) The lack of contraceptive coverage in health  
9 insurance policies places many effective forms of  
10 contraceptives beyond the financial reach of many women,  
11 leading to unintended pregnancies.

12 (2) Therefore, the Legislature determines that  
13 enactment of this bill constitutes an important state  
14 interest.

15 Section 3. Option for plans and policyholders of plans  
16 provided by religious health plan sponsors.

17 (1) GENERAL RULE.--Notwithstanding any other provision  
18 of section 627.64061 or section 627.65741, Florida Statutes, a  
19 religious health plan sponsor may provide a health plan that  
20 does not provide benefits for prescription oral contraceptives  
21 that are contrary to the religious tenets of the religion or  
22 religious corporation, association, or society referred to in  
23 subsection (3). Further, the requirements of section 627.64061  
24 or section 627.65741, Florida Statutes, shall not apply to an  
25 individual health care service plan contract or a group health  
26 care service plan contract purchased by an employer that is a  
27 religious health plan sponsor, including, but not limited to,  
28 any church, religious school, religious association, or other  
29 religious organization that is not organized for private  
30 profit, if the provision of prescription oral contraceptives  
31 under such sections is inconsistent with the religious beliefs

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1 of the organization.

2 (2) EXCEPTION.--Nothing in this section shall be  
3 construed as authorizing the exclusion of coverage under a  
4 health plan of prescription oral contraceptives necessary to  
5 preserve the life or health of the patient.

6 (3) DEFINITION.--As used in this section, the term  
7 "religious health plan sponsor" means a health plan sponsor  
8 that meets the definition of "church plan" under s. 3(33) of  
9 the Employee Retirement Income Security Act of 1974.

10 (4) Nothing in this act shall be construed to require  
11 coverage for chemically induced abortions.

12 Section 4. Section 627.64061, Florida Statutes, is  
13 created to read:

14 627.64061 Coverage for prescription  
15 contraceptives.--Any health insurance policy that provides  
16 coverage for outpatient prescription drugs shall cover  
17 prescription oral contraceptives approved by the federal Food  
18 and Drug Administration and prescribed by a practitioner  
19 authorized by state licensure to prescribe such medication.  
20 Coverage must be provided to the same extent and subject to  
21 the same contract terms, including copayments and deductibles,  
22 as any other prescription drug.

23 Section 5. Paragraph (c) of subsection (2) of section  
24 627.6515, Florida Statutes, 1998 Supplement, is amended to  
25 read:

26 627.6515 Out-of-state groups.--

27 (2) This part does not apply to a group health  
28 insurance policy issued or delivered outside this state under  
29 which a resident of this state is provided coverage if:

30 (c) The policy provides the benefits specified in ss.  
31 627.419, 627.6574, 627.65741, 627.6575, 627.6579, 627.6612,

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1 627.66121, 627.66122, 627.6613, 627.667, 627.6675, 627.6691,  
2 and 627.66911.

3 Section 6. Section 627.65741, Florida Statutes, is  
4 created to read:

5 627.65741 Coverage for prescription  
6 contraceptives.--Any group, franchise, accident, or health  
7 insurance policy that provides coverage for outpatient  
8 prescription drugs shall cover prescription oral  
9 contraceptives approved by the federal Food and Drug  
10 Administration and prescribed by a practitioner authorized by  
11 state licensure to prescribe such medication. Coverage must  
12 be provided to the same extent and subject to the same  
13 contract terms, including copayments and deductibles, as any  
14 other prescription drug.

15 Section 7. Paragraph (b) of subsection (12) of section  
16 627.6699, Florida Statutes, 1998 Supplement, is amended to  
17 read:

18 627.6699 Employee Health Care Access Act.--

19 (12) STANDARD, BASIC, AND LIMITED HEALTH BENEFIT  
20 PLANS.--

21 (b)1. Each small employer carrier issuing new health  
22 benefit plans shall offer to any small employer, upon request,  
23 a standard health benefit plan and a basic health benefit plan  
24 that meets the criteria set forth in this section.

25 2. For purposes of this subsection, the terms  
26 "standard health benefit plan" and "basic health benefit plan"  
27 mean policies or contracts that a small employer carrier  
28 offers to eligible small employers that contain:

29 a. An exclusion for services that are not medically  
30 necessary or that are not covered preventive health services;  
31 and



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- 1           a. Coverage for inpatient hospitalization;  
2           b. Coverage for outpatient services;  
3           c. Coverage for newborn children pursuant to s.  
4 627.6575;  
5           d. Coverage for child care supervision services  
6 pursuant to s. 627.6579;  
7           e. Coverage for adopted children upon placement in the  
8 residence pursuant to s. 627.6578;  
9           f. Coverage for mammograms pursuant to s. 627.6613;  
10          g. Coverage for handicapped children pursuant to s.  
11 627.6615;  
12          h. Emergency or urgent care out of the geographic  
13 service area; and  
14          i. Coverage for services provided by a hospice  
15 licensed under s. 400.602 in cases where such coverage would  
16 be the most appropriate and the most cost-effective method for  
17 treating a covered illness.
- 18          5. The standard health benefit plan and the basic  
19 health benefit plan may include a schedule of benefit  
20 limitations for specified services and procedures. If the  
21 committee develops such a schedule of benefits limitation for  
22 the standard health benefit plan or the basic health benefit  
23 plan, a small employer carrier offering the plan must offer  
24 the employer an option for increasing the benefit schedule  
25 amounts by 4 percent annually.
- 26          6. The basic health benefit plan shall include all of  
27 the benefits specified in subparagraph 4.; however, the basic  
28 health benefit plan shall place additional restrictions on the  
29 benefits and utilization and may also impose additional cost  
30 containment measures.
- 31          7. Sections 627.419(2), (3), and (4), 627.6574,

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1 627.65741, 627.6612, 627.66121, 627.66122, 627.6616, 627.6618,  
2 627.668, and 627.66911 apply to the standard health benefit  
3 plan and to the basic health benefit plan. However,  
4 notwithstanding said provisions, the plans may specify limits  
5 on the number of authorized treatments, if such limits are  
6 reasonable and do not discriminate against any type of  
7 provider.

8           8. Each small employer carrier that provides for  
9 inpatient and outpatient services by allopathic hospitals may  
10 provide as an option of the insured similar inpatient and  
11 outpatient services by hospitals accredited by the American  
12 Osteopathic Association when such services are available and  
13 the osteopathic hospital agrees to provide the service.

14           Section 8. Subsection (36) is added to section 641.31,  
15 Florida Statutes, 1998 Supplement, to read:

16           641.31 Health maintenance contracts.--

17           (36) Health maintenance contracts that provide  
18 coverage for outpatient prescription drugs shall cover  
19 prescription oral contraceptives approved by the federal Food  
20 and Drug Administration and prescribed by a practitioner  
21 authorized by state licensure to prescribe such medication  
22 when such practitioner is under the organization's direct  
23 employ or under contract or other arrangement with the  
24 organization to provide health care services to subscribers.  
25 Coverage must be provided to the same extent and subject to  
26 the same contract terms, including copayments, as any other  
27 prescription medication.

28  
29 (Redesignate subsequent sections.)

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1 ===== T I T L E A M E N D M E N T =====

2 And the title is amended as follows:

3 On page 1, lines 2 and 3, delete those lines

4

5 and insert:

6 An act relating to health insurance; creating  
7 the "Equity in Contraceptive Coverage Act of  
8 1999"; providing legislative findings and  
9 intent; providing requirements with respect to  
10 plans provided by religious health plan  
11 sponsors; creating ss. 627.64061, 627.65741,  
12 F.S., and amending 641.31, F.S.; requiring  
13 certain health insurance policies and health  
14 maintenance contracts to provide coverage for  
15 prescription oral contraceptives; amending s.  
16 627.6515, F.S.; applying certain requirements  
17 for group coverage to out-of-state groups;  
18 amending s. 627.6699, F.S.; applying certain  
19 requirements for group coverage to coverage for  
20 small employers; amending s. 627.6699, F.S.;

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