

HOUSE BILL No. 1443

DIGEST OF INTRODUCED BILL

Citations Affected: IC 27-8-24.2.

Synopsis: Insurance coverage for contraceptives. Requires insurers, health maintenance organizations, limited service health maintenance organizations, preferred provider plans, and comprehensive health insurance policies that: (1) provide coverage for basic health care services; and (2) provide coverage for outpatient prescription drugs and outpatient services provided by health care providers, to provide equal coverage for contraceptive drugs, devices, and services.

Effective: July 1, 1999.

Summers

January 19, 1999, read first time and referred to Committee on Insurance, Corporations and Small Business.

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First Regular Session 111th General Assembly (1999)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 1998 General Assembly.

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HOUSE BILL No. 1443



A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 27-8-24.2 IS ADDED TO THE INDIANA CODE
2 AS A **NEW** CHAPTER TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 1999]:

4 **Chapter 24.2. Contraceptive Coverage**

5 **Sec. 1. As used in this chapter, "contraceptive" means a**
6 **prescription contraceptive drug, device, or service approved by the**
7 **United States Food and Drug Administration that is:**

- 8 (1) **intended to prevent pregnancy, including any medically**
9 **necessary or appropriate consultation, examination,**
10 **procedure, or medical service;**
- 11 (2) **provided on an outpatient basis; and**
- 12 (3) **related to the use of contraceptive methods to prevent an**
13 **unintended pregnancy.**

14 **The term does not include abortion (as defined in IC 16-18-2-1).**

15 **Sec. 2. As used in this chapter, "covered individual" means a**
16 **individual policyholder, a subscriber, a certificate holder, an**
17 **enrollee, or other individual who is covered by the insurance policy**



1 of a policyholder, a subscriber, a certificate holder, or an enrollee.

2 **Sec. 3. (a) As used in this chapter, "insurance policy" means a:**

3 (1) policy of accident and sickness insurance regulated under
4 IC 27-8-5;

5 (2) health maintenance organization contract or limited
6 service health maintenance organization contract regulated
7 under IC 27-13;

8 (3) preferred provider plan (as defined in IC 27-8-11-1); or

9 (4) comprehensive health insurance policy issued under
10 IC 27-8-10;

11 that provides coverage for basic health care services (as defined in
12 IC 27-13-1-4) under an individual or group policy or plan issued
13 for delivery in Indiana.

14 (b) The term does not include:

15 (1) an employee benefit program subject to the federal
16 Employee Retirement Income Security Act (29 U.S.C. 1001 et
17 seq.); or

18 (2) worker's compensation coverage for an injury to, or
19 occupational disease of, an employee under IC 22-3.

20 **Sec. 4. As used in this chapter, "prescription drug" means an**
21 **article or a substance regulated under IC 16-42-19.**

22 **Sec. 5. An insurance policy that provides coverage for**
23 **outpatient prescription drugs may not exclude or restrict benefits**
24 **for prescription contraceptive drugs or devices approved by the**
25 **United States Food and Drug Administration to a covered**
26 **individual.**

27 **Sec. 6. An insurance policy that provides coverage for**
28 **outpatient services provided by a health care provider may not**
29 **exclude or restrict benefits for outpatient contraceptive services**
30 **provided by a health care provider to a covered individual.**

31 **Sec. 7. The coverage required under this chapter may not be**
32 **subject to dollar limits, deductibles, copayments, or coinsurance**
33 **provisions that are less favorable to covered individuals than the**
34 **dollar limits, deductibles, copayments, or coinsurance provisions**
35 **applying to physical illness generally under the insurance policy.**

36 **Sec. 8. A covered individual may not be required to pay a**
37 **deductible, coinsurance, or a copayment for contraceptive drugs,**
38 **devices, or services that is greater than a deductible, coinsurance,**
39 **or a copayment established for other prescription drugs, devices,**
40 **or services under the insurance policy.**

41 **Sec. 9. A covered individual who receives or is eligible to receive**
42 **contraceptive drugs, devices, or services under this chapter may**

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1 not be required to pay a deductible, coinsurance, a copayment, or
 2 a fee that is greater than a deductible, coinsurance, a copayment,
 3 or a fee established for individuals of the same benefit category or
 4 class, or coinsurance or copayment level, receiving benefits for
 5 other prescription drugs, devices, or services.

6 **Sec. 10.** If a covered individual's health care provider
 7 determines that contraceptive methods specifically covered under
 8 an insurance policy are not medically appropriate for the covered
 9 individual, the insurance policy must provide coverage for another
 10 medically approved prescriptive contraceptive method prescribed
 11 by the covered individual's health care provider.

12 SECTION 2. [EFFECTIVE JULY 1, 1999] IC 27-8-24.2, as added
 13 by this act, applies to insurance policies issued, delivered, executed,
 14 or renewed after June 30, 1999.

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