AM2716 LB933 2022 DLM - 04/05/2022

AMENDMENTS TO LB933

Introduced by Blood, 3.

- 1 1. Insert the following new sections:
- Sec. 11. (1) Notwithstanding section 44-3,131, any individual or
- 3 group sickness and accident insurance policy, certificate, or subscriber
- 4 contract delivered, issued for delivery, or renewed in this state, any
- 5 hospital, medical, or surgical expense-incurred policy, except for
- 6 policies that provide coverage for a specified disease or other limited-
- 7 benefit coverage, and any self-funded employee benefit plan to the extent
- 8 not preempted under federal law that includes coverage for a self-
- 9 <u>administered hormonal contraceptive that is approved by the federal Food</u>
- 10 and Drug Administration shall reimburse an in-network health care
- 11 provider or dispensing entity on a per-unit basis for dispensing a supply
- of such contraceptives to a covered individual as follows:
- 13 (a) For the first prescription of such contraceptive, at least up to
- 14 <u>a three-month supply, if so prescribed; and</u>
- 15 (b) For subsequent refills of the same contraceptive, regardless of
- 16 <u>whether the covered individual was enrolled in the policy, con</u>tract, or
- 17 plan at the time of the first prescription for such contraceptive, up to
- 18 a six-month supply, if so prescribed.
- 19 (2) Nothing in this section shall be construed to:
- 20 (a) Require a health care provider to prescribe a six-month supply
- 21 <u>of a self-administered hormonal contraceptive; or</u>
- 22 <u>(b) Permit a policy, contract, or plan to impose cost-sharing for an</u>
- 23 <u>alternative method of contraception if a covered individual changes</u>
- 24 contraceptive methods before exhausting a previously dispensed supply of
- 25 a self-administered hormonal contraceptive.
- 26 (3) A policy, contract, or plan shall be exempt from this section
- 27 for a policy, contract, or plan year if, using a calculation method

AM2716 LB933 DLM - 04/05/2022 DLM - 04/05/2022

- 1 approved by the Department of Insurance, the cost of coverage would
- 2 <u>likely exceed one percent of all premiums collected under such policy,</u>
- 3 <u>contract</u>, or plan for such policy, contract, or plan year.
- 4 Sec. 12. Section 68-901, Revised Statutes Supplement, 2021, is
- 5 amended to read:
- 6 68-901 Sections 68-901 to 68-9,101 <u>and section 13 of this act</u>shall
- 7 be known and may be cited as the Medical Assistance Act.
- 8 Sec. 13. (1) In providing family planning services and supplies
- 9 under the medical assistance program, the department shall ensure that a
- 10 prescription for the dispensation of a covered self-administered hormonal
- 11 <u>contraceptive is provided as follows:</u>
- 12 <u>(a) For the first prescription of such contraceptive, at least up to</u>
- 13 a three-month supply, if so prescribed; and
- 14 (b) For subsequent refills of the same contraceptive, regardless of
- 15 whether the covered individual was enrolled in the medical assistance
- 16 program at the time of the first prescription for such contraceptive, up
- 17 <u>to a six-month supply, if so prescribed.</u>
- 18 (2) Nothing in this section shall be construed to limit a medical
- 19 assistance recipient's freedom to choose or change the method of family
- 20 planning to use, regardless of whether the recipient has exhausted a
- 21 previously dispensed supply of contraceptives.
- 22 2. Renumber the remaining section and correct the repealer
- 23 accordingly.