

February 15, 1999

**S 90. INSURANCE/COVER CONTRACEPTIVES.** *TO ENSURE THAT INSURERS THAT PROVIDE HEALTH INSURANCE COVERAGE FOR PRESCRIPTION DRUGS PROVIDE COVERAGE FOR PRESCRIBED CONTRACEPTIVE DRUGS AND DEVICES AND FOR OUTPATIENT CONTRACEPTIVE SERVICES.* Adds new GS 58-3-174 as title indicates. Prohibits a number of insurer actions intended to avoid the requirements of section or to encourage persons covered by such insurers to accept less than the minimum protections required by section. Makes conforming amendment to GS 58-50-155. Effective as to health benefit plans delivered, issued for delivery, or renewed on or after January 1, 2000.

**Intro. by Forrester, Lucas, and Purcell.**

Ref. to Health Care

GS 58

March 3, 1999

**S 90. INSURANCE/COVER CONTRACEPTIVES.** Intro. 2/15/99. Senate committee substitute makes the following changes to 1st edition. Rewrites new GS 58-3-174 to require that insurers that provide coverage for prescription drugs or devices “shall provide” (was, “shall not exclude or restrict”) coverage for prescription contraceptive drugs or devices. Makes similar change requiring insurers that provide outpatient services to provide outpatient contraceptive services. Adds provision allowing health benefit plan to require that total coinsurance, based on useful life of prescription contraceptive drug or device, be paid in advance for drugs or devices that are inserted or prescribed and do not have to be refilled on periodic basis. Rewrites amendment to GS 58-50-155 (standard health care plan coverage) to make it clear that plan must cover prescribed contraceptive drugs or devices and outpatient services *only if the plan covers prescription drugs or devices or outpatient services as applicable*. Makes additional technical changes.

April 8, 1999

**S 90. INSURANCE/COVER CONTRACEPTIVES.** Intro. 3/3/99. House committee substitute makes the following changes to 2nd edition. Exempts from prescribed contraceptives that are required to be covered by health insurance drug known as “RU-486” and drug marketed under name “Preven.” Allows religious employer (defined in bill) to provide to employees health benefit plan that excludes coverage for prescription contraceptive drugs if contrary to employer’s religious tenets but entity providing health benefit plan must provide written notice to each person covered that contraceptive drugs are excluded from the plan.

June 10, 1999

**S 90. INSURANCE/COVER CONTRACEPTIVES.** Intro. 2/15/99. House committee substitute makes the following changes to 3rd edition. Adds new subparagraph GS 58-3-174(c)(1)(m) to specify that health benefit plan as defined in the bill does not include short-term limited duration health insurance policies as defined in Part 144 of Title 45 of the Code of Federal Regulations.

June 15, 1999

**S 90. INSURANCE/COVER CONTRACEPTIVES.** Intro. 2/15/99. House amendments make the following changes to 4th edition. (1) Provide that if H 314 becomes law (it was ratified and presented for the governor’s signature on 6/11/99), then the section of this bill adding a requirement of coverage for contraceptive drugs and devices in the standard health plan developed and approved under GS 58-50-125 is deleted and a new section is added with substantially the same coverage requirement, adding that coverage requirement as an amendment to GS 58-55-155(a) in addition to those enacted by H 314. (2) The bill exempts from the definition of “prescribed contraceptive drugs or devices” two drugs: RU-486 and Preven. Amendments add in each case “or any ‘equivalent drug product’ as defined in GS 90-85.27(1).” (3) The bill provides that religious employers may request health insurance for their employees that does not include coverage for contraception. Before the amendment, it defined “religious employer” to mean those organized “exclusively for religious purposes,” exempt under the Internal

Revenue Code, with the “primary purpose” of inculcating religious values. Amendments delete the word “exclusively” and “primary.”