

HOUSE BILL NO. 6526

December 17, 2020, Introduced by Reps. Lasinski and Pagan and referred to the Committee on Insurance.

A bill to amend 1956 PA 218, entitled
"The insurance code of 1956,"
(MCL 500.100 to 500.8302) by adding section 3406u.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 3406u. (1) A health insurance policy delivered, issued
2 for delivery, or renewed in this state that provides coverage for
3 prescription drugs must include coverage for all of the following:
4 (a) All United States Food and Drug Administration-approved
5 contraceptive drugs, devices, and other products, including those

1 prescribed by a physician or otherwise authorized by state or
2 federal law. Both of the following apply to coverage under this
3 subdivision:

4 (i) If there is a therapeutic equivalent of a United States
5 Food and Drug Administration-approved contraceptive drug, device,
6 or product, the health insurance policy must include coverage for
7 either the original United States Food and Drug Administration-
8 approved contraceptive drug, device, or product or at least 1 of
9 its therapeutic equivalents.

10 (ii) If the insured's physician considers the covered
11 contraceptive drug, device, or product medically inadvisable, the
12 health insurance policy must defer to the determination of the
13 insured's physician and provide coverage for an alternate
14 prescribed contraceptive drug, device, or product.

15 (b) A voluntary sterilization procedure.

16 (c) Patient education and counseling on contraception.

17 (d) Follow-up services related to drugs, devices, products,
18 and procedures coverage under this section, including, but not
19 limited to, management of side effects, counseling for continued
20 adherence, and device insertion and removal.

21 (2) Coverage under subsection (1) must not impose a copayment,
22 deductible, or coinsurance provision on the insured. This
23 subsection does not apply to grandfathered health plan coverage.

24 (3) Except as otherwise provided in this section, a health
25 insurance policy described in subsection (1) must not impose a
26 restriction or delay on coverage required under this section.

27 (4) The coverage required under subsection (1) must also
28 provide coverage to the insured's spouse and nonspouse dependents.

29 (5) This section does not apply to a religious employer that

1 provides group health coverage to its employees.

2 (6) This section does not exclude coverage for contraceptive
3 supplies prescribed by a physician, acting in the scope of his or
4 her practice, for reasons other than contraceptive purposes,
5 including, but not limited to, decreasing the risk of ovarian
6 cancer or eliminating symptoms of menopause, or for contraception
7 that is necessary to preserve the life or health of an insured.

8 (7) This section does not restrict the director's authority to
9 ensure compliance with this act if a health insurance policy
10 provides coverage for contraceptive drugs, devices, and products.

11 (8) As used in this section:

12 (a) "Grandfathered health plan coverage" means that term as
13 defined in 45 CFR 147.140.

14 (b) "Religious employer" means an employer that is a nonprofit
15 organization that is exempt from filing under section
16 6033(a)(3)(A)(i) or (iii) of the internal revenue code of 1986, 26
17 USC 6033.

18 (c) "Therapeutic equivalent" means a product that the United
19 States Food and Drug Administration has determined to be
20 therapeutically equivalent to the prescribed product as set forth
21 in the latest edition or supplement of the "Approved Drug Products
22 With Therapeutic Equivalence Evaluations", a United States Food and
23 Drug Administration publication that is sometimes referred to as
24 the "Orange Book".

25 Enacting section 1. This amendatory act applies to health
26 insurance policies delivered, executed, issued, amended, adjusted,
27 or renewed in this state, or outside of this state if covering
28 residents of this state, beginning 90 days after the date this
29 amendatory act is enacted into law.