



Legislative Council Staff

Research Note

Version: Senate SVMA
Date: 4/27/2016

Bill Number

House Bill 16-1322

Sponsors

*Representatives Pettersen &
Coram
Senator Donovan*

Short Title

*Health Coverage Prescription
Contraceptives Supply*

Research Analyst

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Status

The bill is currently pending before the Senate State, Veterans, and Military Affairs Committee. This research note reflects the reengrossed bill.

Summary

The bill requires health insurance plans that are required by federal law to cover contraceptives to cover a 3-month supply of a prescription contraceptive the first time it is dispensed by a provider or pharmacy that is in the insurer's network to a covered person and a 12-month supply any time it is subsequently redispensed.

Background

Patient Protection and Affordable Care Act. The Patient Protection and Affordable Care Act, enacted in 2010, requires health insurance plans to cover at least one method from each of the 18 contraceptive methods approved by the federal Food and Drug Administration with no cost sharing to the covered individual. Certain religious employers, such as places of worship, are exempt from the requirement to provide contraceptive coverage. Some health insurance plans that existed prior to the act are "grandfathered" in to the act's requirements and are exempt from providing coverage for contraceptives. Nonprofit religious organizations are not required to contract, arrange, pay, or refer for contraceptive coverage; contraceptive coverage for such organizations is arranged through a third-party administrator.

Dispensing contraceptives. Under current practice, many health insurers reimburse for a one- to three-month supply of prescribed contraceptives. In 2015, Oregon became the first state

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to require health insurers to cover a 12-month supply of prescribed contraceptives, and Washington D.C. subsequently adopted a similar policy. Similar legislation is currently being considered in Washington and California. Colorado's Medicaid program currently covers a three-month supply of contraceptives that are obtained from a pharmacy, or a six-month supply that is obtained from a provider.

House Action

House Public Health Care and Human Services (April 15, 2016). At the hearing, representatives of the Colorado Consumer Health Initiative, 9 to 5 Colorado, the Women's Lobby, and Kaiser Permanente testified in support of the bill. The committee adopted amendments L.001, L.004, and L.005 and referred the bill, as amended, to the Committee of the Whole. Amendment L.001 clarified that the provider or pharmacy dispensing the contraceptive must be in the insurer's network and defines "prescription contraceptive" to include oral drugs and contraceptive patches. Amendment L.004 specified that health benefit plans must reimburse providers or pharmacies in the health plan's network for dispensing a prescribed vaginal contraceptive ring intended to last for a three-month period. Amendment L.005 added a conforming amendment to statutes governing insurance coverage for maternity care.

House second reading (April 22, 2016). The House adopted the Public Health Care and Human Services Committee report and passed the bill on second reading, as amended.

House third reading (April 25, 2016). The House passed the bill on third reading with no amendments.