

[First Reprint]

ASSEMBLY, No. 5508

STATE OF NEW JERSEY
218th LEGISLATURE

INTRODUCED JUNE 6, 2019

Sponsored by:

Assemblyman ANDREW ZWICKER

District 16 (Hunterdon, Mercer, Middlesex and Somerset)

Assemblywoman CAROL A. MURPHY

District 7 (Burlington)

Assemblywoman SHAVONDA E. SUMTER

District 35 (Bergen and Passaic)

Co-Sponsored by:

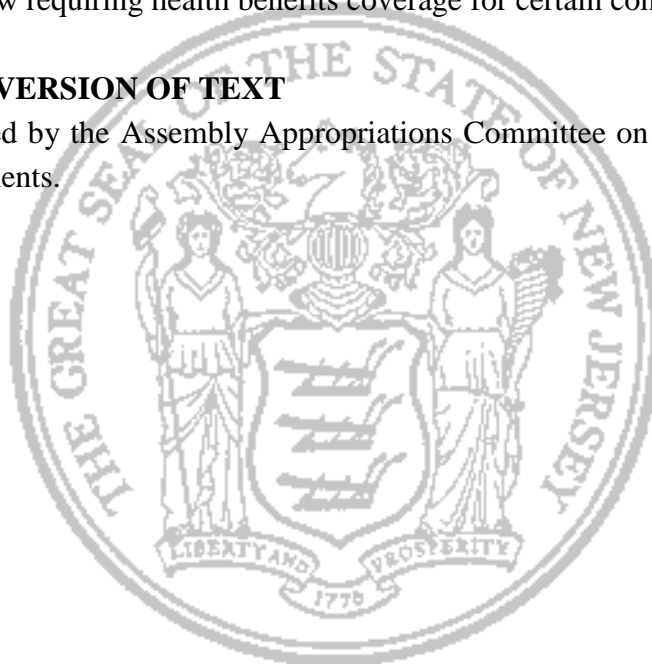
Assemblywomen Vainieri Huttle, Lampitt, Pinkin, McKnight,
Assemblyman Calabrese, Assemblywomen Mosquera, Jasey and
Timberlake

SYNOPSIS

Revises law requiring health benefits coverage for certain contraceptives.

CURRENT VERSION OF TEXT

As reported by the Assembly Appropriations Committee on June 13, 2019,
with amendments.



(Sponsorship Updated As Of: 6/21/2019)

1 AN ACT concerning health benefits coverage for contraceptives and
2 amending P.L.2005, c.251.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

6

7 1. Section 1 of P.L.2005, c.251 (C.17:48-6ee) is amended to
8 read as follows:

9 1. a. A hospital service corporation that provides hospital or
10 medical expense benefits ¹**【for expenses incurred in the purchase of**
11 **outpatient prescription drugs under a contract】**¹ shall provide
12 coverage under every ¹**【such】**¹ contract delivered, issued, executed
13 or renewed in this State or approved for issuance or renewal in this
14 State by the Commissioner of Banking and Insurance, on or after
15 the effective date of this act, for expenses incurred in the purchase
16 of prescription female contraceptives ¹, and the following services,
17 drugs, devices, products, and procedures:

18 (1) Any contraceptive drug, device or product approved by the
19 United States Food and Drug Administration, which coverage shall
20 be subject to all of the following conditions:

21 (a) If there is a therapeutic equivalent of a contraceptive drug,
22 device or product approved by the United States Food and Drug
23 Administration, coverage shall be provided for either the requested
24 contraceptive drug, device or product or for one or more therapeutic
25 equivalents of the requested drug, device or product.

26 (b) Coverage shall be provided without a prescription for all
27 contraceptive drugs available for over-the-counter sale that are
28 approved by the United States Food and Drug Administration.

29 (c) Coverage shall be provided without any infringement upon a
30 subscriber's choice of contraception and medical necessity shall be
31 determined by the provider for covered contraceptive drugs, devices
32 or other products approved by the United States Food and Drug
33 Administration.

34 (2) Voluntary male and female sterilization.

35 (3) Patient education and counseling on contraception.

36 (4) Services related to the administration and monitoring of
37 drugs, devices, products and services required under this section,
38 including but not limited to:

39 (a) Management of side effects;

40 (b) Counseling for continued adherence to a prescribed regimen;

41 (c) Device insertion and removal;

42 (d) Provision of alternative contraceptive drugs, devices or
43 products deemed medically appropriate in the judgment of the
44 subscriber's health care provider; and

EXPLANATION – Matter enclosed in bold-faced brackets **【thus】** in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Assembly AAP committee amendments adopted June 13, 2019.

1 (e) Diagnosis and treatment services provided pursuant to, or as
2 a follow-up to, a service required under this section¹.

3 ¹**【For the purposes of this section, "prescription female**
4 **contraceptives" means any drug or device used for contraception**
5 **【by a female】, which is approved by the federal Food and Drug**
6 **Administration for that purpose【, that can only be purchased in this**
7 **State with a prescription written by a health care professional**
8 **licensed or authorized to write prescriptions, and includes, but is**
9 **not limited to, birth control pills and diaphragms】.】**

10 **b.**¹ The coverage provided shall include prescriptions for
11 dispensing contraceptives for:

12 **【a.】** (1) a three-month period for the first dispensing of the
13 contraceptive; and

14 **【b.】** (2) a six-month period for any subsequent dispensing of
15 the same contraceptive, regardless of whether coverage under the
16 contract was in effect at the time of the first dispensing, except that
17 an entity subject to this section may provide coverage for a supply
18 of contraceptives that is for less than a six-month period, if a six-
19 month period would extend beyond the term of the contract.

20 **【A religious employer may request, and a hospital service**
21 **corporation shall grant, an exclusion under the contract for the**
22 **coverage required by this section if the required coverage conflicts**
23 **with the religious employer's bona fide religious beliefs and**
24 **practices. A religious employer that obtains such an exclusion shall**
25 **provide written notice thereof to prospective subscribers and**
26 **subscribers. The provisions of this section shall not be construed as**
27 **authorizing a hospital service corporation to exclude coverage for**
28 **prescription drugs that are prescribed for reasons other than**
29 **contraceptive purposes or for prescription female contraceptives**
30 **that are necessary to preserve the life or health of a subscriber. For**
31 **the purposes of this section, "religious employer" means an**
32 **employer that is a church, convention or association of churches or**
33 **an elementary or secondary school that is controlled, operated or**
34 **principally supported by a church or by a convention or association**
35 **of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that**
36 **qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).】**

37 ¹**【b.】 c.**¹ The benefits shall be provided to the same extent as
38 for any other ¹**【outpatient prescription】 service,¹ drug ¹, device,**
39 **product, or procedure¹ under the contract, except no deductible,**
40 **coinsurance, copayment, or any other cost-sharing requirement on**
41 **the coverage shall be imposed.**

42 ¹**【c.】 d.**¹ This section shall apply to those contracts in which
43 the hospital service corporation has reserved the right to change the
44 premium.

45 ¹**e. Nothing in this section shall limit coverage of any additional**
46 **preventive service for women, as identified or recommended by the**
47 **United States Preventive Services Task Force or the Health**

1 Resources and Services Administration of the United States
2 Department of Health and Human Services pursuant to the
3 provisions of 42 U.S.C. 300gg-13.¹
4 (cf: P.L.2017, c.241, s.1)

5
6 2. Section 2 of P.L.2005, c.251 (C.17:48A-7bb) is amended to
7 read as follows:

8 2. a. A medical service corporation that provides hospital or
9 medical expense benefits ¹for expenses incurred in the purchase of
10 outpatient prescription drugs under a contract¹ shall provide
11 coverage under every ¹such¹ contract delivered, issued, executed
12 or renewed in this State or approved for issuance or renewal in this
13 State by the Commissioner of Banking and Insurance, on or after
14 the effective date of this act, for expenses incurred in the purchase
15 of prescription female contraceptives¹, and the following services,
16 drugs, devices, products, and procedures:

17 (1) Any contraceptive drug, device or product approved by the
18 United States Food and Drug Administration, which coverage shall
19 be subject to all of the following conditions:

20 (a) If there is a therapeutic equivalent of a contraceptive drug,
21 device or product approved by the United States Food and Drug
22 Administration, coverage shall be provided for either the requested
23 contraceptive drug, device or product or for one or more therapeutic
24 equivalents of the requested drug, device or product.

25 (b) Coverage shall be provided without a prescription for all
26 contraceptive drugs available for over-the-counter sale that are
27 approved by the United States Food and Drug Administration.

28 (c) Coverage shall be provided without any infringement upon a
29 subscriber's choice of contraception and medical necessity shall be
30 determined by the provider for covered contraceptive drugs, devices
31 or other products approved by the United States Food and Drug
32 Administration.

33 (2) Voluntary male and female sterilization.

34 (3) Patient education and counseling on contraception.

35 (4) Services related to the administration and monitoring of
36 drugs, devices, products and services required under this section,
37 including but not limited to:

38 (a) Management of side effects;

39 (b) Counseling for continued adherence to a prescribed regimen;

40 (c) Device insertion and removal;

41 (d) Provision of alternative contraceptive drugs, devices or
42 products deemed medically appropriate in the judgment of the
43 subscriber's health care provider; and

44 (e) Diagnosis and treatment services provided pursuant to, or as
45 a follow-up to, a service required under this section¹.

46 ¹For the purposes of this section, "prescription female
47 contraceptives" means any drug or device used for contraception

1 **【by a female】**, which is approved by the federal Food and Drug
2 Administration for that purpose**【, that can only be purchased in this**
3 State with a prescription written by a health care professional
4 licensed or authorized to write prescriptions, and includes, but is
5 not limited to, birth control pills and diaphragms**【.】**

6 **b.**¹ The coverage provided shall include prescriptions for
7 dispensing contraceptives for:

8 **【a.】** (1) a three-month period for the first dispensing of the
9 contraceptive; and

10 **【b.】** (2) a six-month period for any subsequent dispensing of
11 the same contraceptive, regardless of whether coverage under the
12 contract was in effect at the time of the first dispensing, except that
13 an entity subject to this section may provide coverage for a supply
14 of contraceptives that is for less than a six-month period, if a six-
15 month period would extend beyond the term of the contract.

16 **【A religious employer may request, and a medical service**
17 corporation shall grant, an exclusion under the contract for the
18 coverage required by this section if the required coverage conflicts
19 with the religious employer's bona fide religious beliefs and
20 practices. A religious employer that obtains such an exclusion shall
21 provide written notice thereof to prospective subscribers and
22 subscribers. The provisions of this section shall not be construed as
23 authorizing a medical service corporation to exclude coverage for
24 prescription drugs that are prescribed for reasons other than
25 contraceptive purposes or for prescription female contraceptives
26 that are necessary to preserve the life or health of a subscriber. For
27 the purposes of this section, "religious employer" means an
28 employer that is a church, convention or association of churches or
29 an elementary or secondary school that is controlled, operated or
30 principally supported by a church or by a convention or association
31 of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that
32 qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).**】**

33 ¹**【b.】 c.**¹ The benefits shall be provided to the same extent as
34 for any other ¹**【outpatient prescription】** service,¹ drug ¹, device,
35 product, or procedure¹ under the contract, except no deductible,
36 coinsurance, copayment, or any other cost-sharing requirement on
37 the coverage shall be imposed.

38 ¹**【c.】 d.**¹ This section shall apply to those contracts in which
39 the medical service corporation has reserved the right to change the
40 premium.

41 ¹e. Nothing in this section shall limit coverage of any additional
42 preventive service for women, as identified or recommended by the
43 United States Preventive Services Task Force or the Health
44 Resources and Services Administration of the United States
45 Department of Health and Human Services pursuant to the
46 provisions of 42 U.S.C. 300gg-13.¹

47 (cf: P.L.2017, c.241, s.2)

1 3. Section 3 of P.L.2005, c.251 (C.17:48E-35.29) is amended
2 to read as follows:

3 3. a. A health service corporation that provides hospital or
4 medical expense benefits ¹~~["for expenses incurred in the purchase of~~
5 ~~outpatient prescription drugs under a contract"]¹ shall provide
6 coverage under every ¹~~["such"]¹ contract delivered, issued, executed
7 or renewed in this State or approved for issuance or renewal in this
8 State by the Commissioner of Banking and Insurance, on or after
9 the effective date of this act, for expenses incurred in the purchase
10 of prescription female contraceptives¹, and the following services,
11 drugs, devices, products, and procedures:~~~~

12 (1) Any contraceptive drug, device or product approved by the
13 United States Food and Drug Administration, which coverage shall
14 be subject to all of the following conditions:

15 (a) If there is a therapeutic equivalent of a contraceptive drug,
16 device or product approved by the United States Food and Drug
17 Administration, coverage shall be provided for either the requested
18 contraceptive drug, device or product or for one or more therapeutic
19 equivalents of the requested drug, device or product.

20 (b) Coverage shall be provided without a prescription for all
21 contraceptive drugs available for over-the-counter sale that are
22 approved by the United States Food and Drug Administration.

23 (c) Coverage shall be provided without any infringement upon a
24 subscriber's choice of contraception and medical necessity shall be
25 determined by the provider for covered contraceptive drugs, devices
26 or other products approved by the United States Food and Drug
27 Administration.

28 (2) Voluntary male and female sterilization.

29 (3) Patient education and counseling on contraception.

30 (4) Services related to the administration and monitoring of
31 drugs, devices, products and services required under this section,
32 including but not limited to:

33 (a) Management of side effects;

34 (b) Counseling for continued adherence to a prescribed regimen;

35 (c) Device insertion and removal;

36 (d) Provision of alternative contraceptive drugs, devices or
37 products deemed medically appropriate in the judgment of the
38 subscriber's health care provider; and

39 (e) Diagnosis and treatment services provided pursuant to, or as
40 a follow-up to, a service required under this section¹.

41 ¹~~["For the purposes of this section, "prescription female~~
42 ~~contraceptives" means any drug or device used for contraception~~
43 ~~["by a female"], which is approved by the federal Food and Drug~~
44 ~~Administration for that purpose["], that can only be purchased in this~~
45 ~~State with a prescription written by a health care professional~~
46 ~~licensed or authorized to write prescriptions, and includes, but is~~
47 ~~not limited to, birth control pills and diaphragms]."]~~

1 **b.**¹ The coverage provided shall include prescriptions for
2 dispensing contraceptives for:

3 **[a.] (1)** a three-month period for the first dispensing of the
4 contraceptive; and

5 **[b.] (2)** a six-month period for any subsequent dispensing of
6 the same contraceptive, regardless of whether coverage under the
7 contract was in effect at the time of the first dispensing, except that
8 an entity subject to this section may provide coverage for a supply
9 of contraceptives that is for less than a six-month period, if a six-
10 month period would extend beyond the term of the contract.

11 **[A religious employer may request, and a health service**
12 **corporation shall grant, an exclusion under the contract for the**
13 **coverage required by this section if the required coverage conflicts**
14 **with the religious employer's bona fide religious beliefs and**
15 **practices. A religious employer that obtains such an exclusion shall**
16 **provide written notice thereof to prospective subscribers and**
17 **subscribers. The provisions of this section shall not be construed as**
18 **authorizing a health service corporation to exclude coverage for**
19 **prescription drugs that are prescribed for reasons other than**
20 **contraceptive purposes or for prescription female contraceptives**
21 **that are necessary to preserve the life or health of a subscriber. For**
22 **the purposes of this section, "religious employer" means an**
23 **employer that is a church, convention or association of churches or**
24 **an elementary or secondary school that is controlled, operated or**
25 **principally supported by a church or by a convention or association**
26 **of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that**
27 **qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).]**

28 ¹**[b.] c.**¹ The benefits shall be provided to the same extent as
29 for any other ¹**[outpatient prescription] service,¹ drug ¹, device,**
30 **product, or procedure¹ under the contract, except no deductible,**
31 **coinsurance, copayment, or any other cost-sharing requirement on**
32 **the coverage shall be imposed.**

33 ¹**[c.] d.**¹ This section shall apply to those contracts in which
34 the health service corporation has reserved the right to change the
35 premium.

36 ¹**e.** Nothing in this section shall limit coverage of any additional
37 preventive service for women, as identified or recommended by the
38 United States Preventive Services Task Force or the Health
39 Resources and Services Administration of the United States
40 Department of Health and Human Services pursuant to the
41 provisions of 42 U.S.C. 300gg-13.¹

42 (cf: P.L.2017, c.241, s.3)

43

44 4. Section 4 of P.L.2005, c.251 (C.17B:27-46.1ee) is amended
45 to read as follows:

46 4. a. A group health insurer that provides hospital or medical
47 expense benefits ¹**[for expenses incurred in the purchase of**

1 outpatient prescription drugs under a policy¹ shall provide
2 coverage under every ¹["such"]¹ policy delivered, issued, executed or
3 renewed in this State or approved for issuance or renewal in this
4 State by the Commissioner of Banking and Insurance, on or after
5 the effective date of this act, for expenses incurred in the purchase
6 of prescription female contraceptives¹, and the following services,
7 drugs, devices, products, and procedures:

8 (1) Any contraceptive drug, device or product approved by the
9 United States Food and Drug Administration, which coverage shall
10 be subject to all of the following conditions:

11 (a) If there is a therapeutic equivalent of a contraceptive drug,
12 device or product approved by the United States Food and Drug
13 Administration, coverage shall be provided for either the requested
14 contraceptive drug, device or product or for one or more therapeutic
15 equivalents of the requested drug, device or product.

16 (b) Coverage shall be provided without a prescription for all
17 contraceptive drugs available for over-the-counter sale that are
18 approved by the United States Food and Drug Administration.

19 (c) Coverage shall be provided without any infringement upon a
20 subscriber's choice of contraception and medical necessity shall be
21 determined by the provider for covered contraceptive drugs, devices
22 or other products approved by the United States Food and Drug
23 Administration.

24 (2) Voluntary male and female sterilization.

25 (3) Patient education and counseling on contraception.

26 (4) Services related to the administration and monitoring of
27 drugs, devices, products and services required under this section,
28 including but not limited to:

29 (a) Management of side effects;

30 (b) Counseling for continued adherence to a prescribed regimen;

31 (c) Device insertion and removal;

32 (d) Provision of alternative contraceptive drugs, devices or
33 products deemed medically appropriate in the judgment of the
34 subscriber's health care provider; and

35 (e) Diagnosis and treatment services provided pursuant to, or as
36 a follow-up to, a service required under this section¹.

37 ¹["For the purposes of this section, "prescription female
38 contraceptives" means any drug or device used for contraception
39 ["by a female"], which is approved by the federal Food and Drug
40 Administration for that purpose["], that can only be purchased in this
41 State with a prescription written by a health care professional
42 licensed or authorized to write prescriptions, and includes, but is
43 not limited to, birth control pills and diaphragms["]."]

44 b.¹ The coverage provided shall include prescriptions for
45 dispensing contraceptives for:

46 ["a.](1) a three-month period for the first dispensing of the
47 contraceptive; and

1 **【b.】** (2) a six-month period for any subsequent dispensing of
2 the same contraceptive, regardless of whether coverage under the
3 contract was in effect at the time of the first dispensing, except that
4 an entity subject to this section may provide coverage for a supply
5 of contraceptives that is for less than a six-month period, if a six-
6 month period would extend beyond the term of the contract.

7 **【A religious employer may request, and an insurer shall grant, an**
8 **exclusion under the policy for the coverage required by this section**
9 **if the required coverage conflicts with the religious employer's bona**
10 **fide religious beliefs and practices. A religious employer that**
11 **obtains such an exclusion shall provide written notice thereof to**
12 **prospective insureds and insureds. The provisions of this section**
13 **shall not be construed as authorizing an insurer to exclude coverage**
14 **for prescription drugs that are prescribed for reasons other than**
15 **contraceptive purposes or for prescription female contraceptives**
16 **that are necessary to preserve the life or health of an insured. For**
17 **the purposes of this section, "religious employer" means an**
18 **employer that is a church, convention or association of churches or**
19 **an elementary or secondary school that is controlled, operated or**
20 **principally supported by a church or by a convention or association**
21 **of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that**
22 **qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).】**

23 ¹**【b.】 c.**¹ The benefits shall be provided to the same extent as
24 for any other ¹**【outpatient prescription】 service,¹ drug ¹, device,¹**
25 **product, or procedure¹ under the policy, except no deductible,**
26 **coinsurance, copayment, or any other cost-sharing requirement on**
27 **the coverage shall be imposed.**

28 ¹**【c.】 d.**¹ This section shall apply to those policies in which the
29 insurer has reserved the right to change the premium.

30 ¹**e.** **Nothing in this section shall limit coverage of any additional**
31 **preventive service for women, as identified or recommended by the**
32 **United States Preventive Services Task Force or the Health**
33 **Resources and Services Administration of the United States**
34 **Department of Health and Human Services pursuant to the**
35 **provisions of 42 U.S.C. 300gg-13.**¹

36 (cf: P.L.2017, c.241, s.4)

37

38 5. Section 5 of P.L.2005, c.251 (C.17B:26-2.1y) is amended to
39 read as follows:

40 5. a. An individual health insurer that provides hospital or
41 medical expense benefits ¹**【for expenses incurred in the purchase of**
42 **outpatient prescription drugs under a policy】¹** shall provide
43 coverage under every ¹**【such】¹** policy delivered, issued, executed or
44 renewed in this State or approved for issuance or renewal in this
45 State by the Commissioner of Banking and Insurance, on or after
46 the effective date of this act, for expenses incurred in the purchase

1 of prescription female contraceptives¹, and the following services,
2 drugs, devices, products, and procedures:

3 (1) Any contraceptive drug, device or product approved by the
4 United States Food and Drug Administration, which coverage shall
5 be subject to all of the following conditions:

6 (a) If there is a therapeutic equivalent of a contraceptive drug,
7 device or product approved by the United States Food and Drug
8 Administration, coverage shall be provided for either the requested
9 contraceptive drug, device or product or for one or more therapeutic
10 equivalents of the requested drug, device or product.

11 (b) Coverage shall be provided without a prescription for all
12 contraceptive drugs available for over-the-counter sale that are
13 approved by the United States Food and Drug Administration.

14 (c) Coverage shall be provided without any infringement upon a
15 subscriber's choice of contraception and medical necessity shall be
16 determined by the provider for covered contraceptive drugs, devices
17 or other products approved by the United States Food and Drug
18 Administration.

19 (2) Voluntary male and female sterilization.

20 (3) Patient education and counseling on contraception.

21 (4) Services related to the administration and monitoring of
22 drugs, devices, products and services required under this section,
23 including but not limited to:

24 (a) Management of side effects;

25 (b) Counseling for continued adherence to a prescribed regimen;

26 (c) Device insertion and removal;

27 (d) Provision of alternative contraceptive drugs, devices or
28 products deemed medically appropriate in the judgment of the
29 subscriber's health care provider; and

30 (e) Diagnosis and treatment services provided pursuant to, or as
31 a follow-up to, a service required under this section¹.

32 ¹**【For the purposes of this section, "prescription female**
33 **contraceptives" means any drug or device used for contraception**
34 **【by a female】, which is approved by the federal Food and Drug**
35 **Administration for that purpose【, that can only be purchased in this**
36 **State with a prescription written by a health care professional**
37 **licensed or authorized to write prescriptions, and includes, but is**
38 **not limited to, birth control pills and diaphragms】.】**

39 b.¹ The coverage provided shall include prescriptions for
40 dispensing contraceptives for:

41 **【a.】** (1) a three-month period for the first dispensing of the
42 contraceptive; and

43 **【b.】** (2) a six-month period for any subsequent dispensing of
44 the same contraceptive, regardless of whether coverage under the
45 contract was in effect at the time of the first dispensing, except that
46 an entity subject to this section may provide coverage for a supply

1 of contraceptives that is for less than a six-month period, if a six-
2 month period would extend beyond the term of the contract.

3 **【A religious employer may request, and an insurer shall grant, an**
4 **exclusion under the policy for the coverage required by this section**
5 **if the required coverage conflicts with the religious employer's bona**
6 **fade religious beliefs and practices. A religious employer that**
7 **obtains such an exclusion shall provide written notice thereof to**
8 **prospective insureds and insureds. The provisions of this section**
9 **shall not be construed as authorizing an insurer to exclude coverage**
10 **for prescription drugs that are prescribed for reasons other than**
11 **contraceptive purposes or for prescription female contraceptives**
12 **that are necessary to preserve the life or health of an insured. For**
13 **the purposes of this section, "religious employer" means an**
14 **employer that is a church, convention or association of churches or**
15 **an elementary or secondary school that is controlled, operated or**
16 **principally supported by a church or by a convention or association**
17 **of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that**
18 **qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).】**

19 **¹【b.】 c.**¹ The benefits shall be provided to the same extent as
20 for any other **¹【outpatient prescription】 service,¹ drug ¹, device,**
21 **product, or procedure¹ under the policy, except no deductible,**
22 **coinsurance, copayment, or any other cost-sharing requirement on**
23 **the coverage shall be imposed.**

24 **¹【c.】 d.**¹ This section shall apply to those policies in which the
25 insurer has reserved the right to change the premium.

26 **¹e. Nothing in this section shall limit coverage of any additional**
27 **preventive service for women, as identified or recommended by the**
28 **United States Preventive Services Task Force or the Health**
29 **Resources and Services Administration of the United States**
30 **Department of Health and Human Services pursuant to the**
31 **provisions of 42 U.S.C. 300gg-13.**¹

32 (cf: P.L.2017, c.241, s.5)

33

34 6. Section 6 of P.L.2005, c.251 (C.26:2J-4.30) is amended to
35 read as follows:

36 6. a. A certificate of authority to establish and operate a health
37 maintenance organization in this State shall not be issued or
38 continued on or after the effective date of this act for a health
39 maintenance organization **¹【that provides health care services for**
40 **outpatient prescription drugs under a contract】¹, unless the health**
41 **maintenance organization ¹【also】¹ provides health care services for**
42 **prescription female contraceptives¹, and the following services,**
43 **drugs, devices, products, and procedures:**

44 **(1) Any contraceptive drug, device or product approved by the**
45 **United States Food and Drug Administration, which coverage shall**
46 **be subject to all of the following conditions:**

1 (a) If there is a therapeutic equivalent of a contraceptive drug,
2 device or product approved by the United States Food and Drug
3 Administration, coverage shall be provided for either the requested
4 contraceptive drug, device or product or for one or more therapeutic
5 equivalents of the requested drug, device or product.

6 (b) Coverage shall be provided without a prescription for all
7 contraceptive drugs available for over-the-counter sale that are
8 approved by the United States Food and Drug Administration.

9 (c) Coverage shall be provided without any infringement upon a
10 subscriber's choice of contraception and medical necessity shall be
11 determined by the provider for covered contraceptive drugs, devices
12 or other products approved by the United States Food and Drug
13 Administration.

14 (2) Voluntary male and female sterilization.

15 (3) Patient education and counseling on contraception.

16 (4) Services related to the administration and monitoring of
17 drugs, devices, products and services required under this section,
18 including but not limited to:

19 (a) Management of side effects;

20 (b) Counseling for continued adherence to a prescribed regimen;

21 (c) Device insertion and removal;

22 (d) Provision of alternative contraceptive drugs, devices or
23 products deemed medically appropriate in the judgment of the
24 subscriber's health care provider; and

25 (e) Diagnosis and treatment services provided pursuant to, or as
26 a follow-up to, a service required under this section¹.

27 ¹**【For the purposes of this section, "prescription female**
28 **contraceptives" means any drug or device used for contraception**
29 **【by a female】, which is approved by the federal Food and Drug**
30 **Administration for that purpose【, that can only be purchased in this**
31 **State with a prescription written by a health care professional**
32 **licensed or authorized to write prescriptions, and includes, but is**
33 **not limited to, birth control pills and diaphragms】.】**

34 b.¹ The coverage provided shall include prescriptions for
35 dispensing contraceptives for:

36 **【a.】** (1) a three-month period for the first dispensing of the
37 contraceptive; and

38 **【b.】** (2) a six-month period for any subsequent dispensing of
39 the same contraceptive, regardless of whether coverage under the
40 contract was in effect at the time of the first dispensing, except that
41 an entity subject to this section may provide coverage for a supply
42 of contraceptives that is for less than a six-month period, if a six-
43 month period would extend beyond the term of the contract.

44 **【A religious employer may request, and a health maintenance**
45 **organization shall grant, an exclusion under the contract for the**
46 **health care services required by this section if the required health**
47 **care services conflict with the religious employer's bona fide**

1 religious beliefs and practices. A religious employer that obtains
2 such an exclusion shall provide written notice thereof to prospective
3 enrollees and enrollees. The provisions of this section shall not be
4 construed as authorizing a health maintenance organization to
5 exclude health care services for prescription drugs that are
6 prescribed for reasons other than contraceptive purposes or for
7 prescription female contraceptives that are necessary to preserve the
8 life or health of an enrollee. For the purposes of this section,
9 "religious employer" means an employer that is a church,
10 convention or association of churches or an elementary or
11 secondary school that is controlled, operated or principally
12 supported by a church or by a convention or association of churches
13 as defined in 26 U.S.C.s.3121(w)(3)(A), and that qualifies as a tax-
14 exempt organization under 26 U.S.C.s.501(c)(3).】

15 ¹**【b.】 c.**¹ The health care services shall be provided to the same
16 extent as for any other ¹**【outpatient prescription】 service,**¹ drug ¹,
17 device, product, or procedure¹ under the contract, except no
18 deductible, coinsurance, copayment, or any other cost-sharing
19 requirement on the coverage shall be imposed.

20 ¹**【c.】 d.**¹ The provisions of this section shall apply to those
21 contracts for health care services by health maintenance
22 organizations under which the right to change the schedule of
23 charges for enrollee coverage is reserved.

24 ¹e. Nothing in this section shall limit coverage of any additional
25 preventive service for women, as identified or recommended by the
26 United States Preventive Services Task Force or the Health
27 Resources and Services Administration of the United States
28 Department of Health and Human Services pursuant to the
29 provisions of 42 U.S.C. 300gg-13.¹

30 (cf: P.L.2017, c.241, s.6)

31

32 7. Section 7 of P.L.2005, c.251 (C.17B:27A-7.12) is amended
33 to read as follows:

34 7. a. An individual health benefits plan required pursuant to
35 section 3 of P.L.1992, c.161 (C.17B:27A-4) ¹**【that provides benefits**
36 **for expenses incurred in the purchase of outpatient prescription**
37 **drugs】**¹ shall provide coverage for expenses incurred in the
38 purchase of prescription female contraceptives¹, and the following
39 services, drugs, devices, products, and procedures:

40 (1) Any contraceptive drug, device or product approved by the
41 United States Food and Drug Administration, which coverage shall
42 be subject to all of the following conditions:

43 (a) If there is a therapeutic equivalent of a contraceptive drug,
44 device or product approved by the United States Food and Drug
45 Administration, coverage shall be provided for either the requested
46 contraceptive drug, device or product or for one or more therapeutic
47 equivalents of the requested drug, device or product.

1 **(b) Coverage shall be provided without a prescription for all**
2 **contraceptive drugs available for over-the-counter sale that are**
3 **approved by the United States Food and Drug Administration.**

4 **(c) Coverage shall be provided without any infringement upon a**
5 **subscriber's choice of contraception and medical necessity shall be**
6 **determined by the provider for covered contraceptive drugs, devices**
7 **or other products approved by the United States Food and Drug**
8 **Administration.**

9 **(2) Voluntary male and female sterilization.**

10 **(3) Patient education and counseling on contraception.**

11 **(4) Services related to the administration and monitoring of**
12 **drugs, devices, products and services required under this section,**
13 **including but not limited to:**

14 **(a) Management of side effects;**

15 **(b) Counseling for continued adherence to a prescribed regimen;**

16 **(c) Device insertion and removal;**

17 **(d) Provision of alternative contraceptive drugs, devices or**
18 **products deemed medically appropriate in the judgment of the**
19 **subscriber's health care provider; and**

20 **(e) Diagnosis and treatment services provided pursuant to, or as**
21 **a follow-up to, a service required under this section¹.**

22 ¹**【For the purposes of this section, "prescription female**
23 **contraceptives" means any drug or device used for contraception**
24 **【by a female】, which is approved by the federal Food and Drug**
25 **Administration for that purpose【, that can only be purchased in this**
26 **State with a prescription written by a health care professional**
27 **licensed or authorized to write prescriptions, and includes, but is**
28 **not limited to, birth control pills and diaphragms】.】**

29 **b.¹ The coverage provided shall include prescriptions for**
30 **dispensing contraceptives for:**

31 **【a.】 (1) a three-month period for the first dispensing of the**
32 **contraceptive; and**

33 **【b.】 (2) a six-month period for any subsequent dispensing of**
34 **the same contraceptive, regardless of whether coverage under the**
35 **contract was in effect at the time of the first dispensing, except that**
36 **an entity subject to this section may provide coverage for a supply**
37 **of contraceptives that is for less than a six-month period, if a six-**
38 **month period would extend beyond the term of the contract.**

39 **【A religious employer may request, and a carrier shall grant, an**
40 **exclusion under the health benefits plan for the coverage required**
41 **by this section if the required coverage conflicts with the religious**
42 **employer's bona fide religious beliefs and practices. A religious**
43 **employer that obtains such an exclusion shall provide written notice**
44 **thereof to prospective covered persons and covered persons. The**
45 **provisions of this section shall not be construed as authorizing a**
46 **carrier to exclude coverage for prescription drugs that are**
47 **prescribed for reasons other than contraceptive purposes or for**

1 prescription female contraceptives that are necessary to preserve the
2 life or health of a covered person. For the purposes of this section,
3 "religious employer" means an employer that is a church,
4 convention or association of churches or an elementary or
5 secondary school that is controlled, operated or principally
6 supported by a church or by a convention or association of churches
7 as defined in 26 U.S.C.s.3121(w)(3)(A), and that qualifies as a tax-
8 exempt organization under 26 U.S.C.s.501(c)(3). **】**

9 **1[b.] c.**¹ The benefits shall be provided to the same extent as
10 for any other **1[outpatient prescription] service,**¹ drug **1, device,**
11 **product, or procedure**¹ under the health benefits plan, **except no**
12 **deductible, coinsurance, copayment, or any other cost-sharing**
13 **requirement on the coverage shall be imposed.**

14 **1[c.] d.**¹ This section shall apply to all individual health
15 benefits plans in which the carrier has reserved the right to change
16 the premium.

17 **1e. Nothing in this section shall limit coverage of any additional**
18 **preventive service for women, as identified or recommended by the**
19 **United States Preventive Services Task Force or the Health**
20 **Resources and Services Administration of the United States**
21 **Department of Health and Human Services pursuant to the**
22 **provisions of 42 U.S.C. 300gg-13.**¹

23 (cf: P.L.2017, c.241, s.7)

24

25 8. Section 8 of P.L.2005, c.251 (C.17B:27A-19.15) is amended
26 to read as follows:

27 8. **a.** A small employer health benefits plan required pursuant
28 to section 3 of P.L.1992, c.162 (C.17B:27A-19) **1[that provides**
29 **benefits for expenses incurred in the purchase of outpatient**
30 **prescription drugs]**¹ shall provide coverage for expenses incurred in
31 the purchase of prescription female contraceptives¹, **and the**
32 **following services, drugs, devices, products, and procedures:**

33 **(1) Any contraceptive drug, device or product approved by the**
34 **United States Food and Drug Administration, which coverage shall**
35 **be subject to all of the following conditions:**

36 **(a) If there is a therapeutic equivalent of a contraceptive drug,**
37 **device or product approved by the United States Food and Drug**
38 **Administration, coverage shall be provided for either the requested**
39 **contraceptive drug, device or product or for one or more therapeutic**
40 **equivalents of the requested drug, device or product.**

41 **(b) Coverage shall be provided without a prescription for all**
42 **contraceptive drugs available for over-the-counter sale that are**
43 **approved by the United States Food and Drug Administration.**

44 **(c) Coverage shall be provided without any infringement upon a**
45 **subscriber's choice of contraception and medical necessity shall be**
46 **determined by the provider for covered contraceptive drugs, devices**

1 or other products approved by the United States Food and Drug
2 Administration.

3 (2) Voluntary male and female sterilization.

4 (3) Patient education and counseling on contraception.

5 (4) Services related to the administration and monitoring of
6 drugs, devices, products and services required under this section,
7 including but not limited to:

8 (a) Management of side effects;

9 (b) Counseling for continued adherence to a prescribed regimen;

10 (c) Device insertion and removal;

11 (d) Provision of alternative contraceptive drugs, devices or
12 products deemed medically appropriate in the judgment of the
13 subscriber's health care provider; and

14 (e) Diagnosis and treatment services provided pursuant to, or as
15 a follow-up to, a service required under this section¹.

16 ¹**【For the purposes of this section, "prescription female**
17 **contraceptives" means any drug or device used for contraception**
18 **【by a female】, which is approved by the federal Food and Drug**
19 **Administration for that purpose【, that can only be purchased in this**
20 **State with a prescription written by a health care professional**
21 **licensed or authorized to write prescriptions, and includes, but is**
22 **not limited to, birth control pills and diaphragms】.】**

23 **b.**¹ The coverage provided shall include prescriptions for
24 dispensing contraceptives for:

25 **【a.】** (1) a three-month period for the first dispensing of the
26 contraceptive; and

27 **【b.】** (2) a six-month period for any subsequent dispensing of
28 the same contraceptive, regardless of whether coverage under the
29 contract was in effect at the time of the first dispensing, except that
30 an entity subject to this section may provide coverage for a supply
31 of contraceptives that is for less than a six-month period, if a six-
32 month period would extend beyond the term of the contract.

33 **【A religious employer may request, and a carrier shall grant, an**
34 **exclusion under the health benefits plan for the coverage required**
35 **by this section if the required coverage conflicts with the religious**
36 **employer's bona fide religious beliefs and practices. A religious**
37 **employer that obtains such an exclusion shall provide written notice**
38 **thereof to prospective covered persons and covered persons. The**
39 **provisions of this section shall not be construed as authorizing a**
40 **carrier to exclude coverage for prescription drugs that are**
41 **prescribed for reasons other than contraceptive purposes or for**
42 **prescription female contraceptives that are necessary to preserve the**
43 **life or health of a covered person. For the purposes of this section,**
44 **"religious employer" means an employer that is a church,**
45 **convention or association of churches or an elementary or**
46 **secondary school that is controlled, operated or principally**
47 **supported by a church or by a convention or association of churches**

1 as defined in 26 U.S.C.s.3121(w)(3)(A), and that qualifies as a tax-
2 exempt organization under 26 U.S.C.s.501(c)(3).】

3 ¹【b.】 c.¹ The benefits shall be provided to the same extent as
4 for any other ¹【outpatient prescription】 service,¹ drug ¹, device,
5 product, or procedure¹ under the health benefits plan, except no
6 deductible, coinsurance, copayment, or any other cost-sharing
7 requirement on the coverage shall be imposed.

8 ¹【c.】 d.¹ This section shall apply to all small employer health
9 benefits plans in which the carrier has reserved the right to change
10 the premium.

11 ¹e. Nothing in this section shall limit coverage of any additional
12 preventive service for women, as identified or recommended by the
13 United States Preventive Services Task Force or the Health
14 Resources and Services Administration of the United States
15 Department of Health and Human Services pursuant to the
16 provisions of 42 U.S.C. 300gg-13.¹

17 (cf: P.L.2017, c.241, s.8)

18

19 9. Section 9 of P.L.2005, c.251 (C.17:48F-13.2) is amended to
20 read as follows:

21 9. a. A prepaid prescription service organization ¹【that
22 provides benefits for expenses incurred in the purchase of
23 outpatient prescription drugs under a contract】¹ shall provide
24 coverage under every ¹【such】¹ contract delivered, issued, executed
25 or renewed in this State or approved for issuance or renewal in this
26 State by the Commissioner of Banking and Insurance, on or after
27 the effective date of this act, for expenses incurred in the purchase
28 of prescription female contraceptives¹, and the services, drugs,
29 devices, products, and procedures as determined to be required to
30 be covered by the commissioner pursuant to subsection b. of this
31 section.

32 b. The Commissioner of Banking and Insurance shall
33 determine, in the commissioner's discretion, which provisions of
34 the coverage requirements applicable to insurers pursuant to
35 P.L. , c. (C.) (pending before the Legislature as this bill),
36 shall apply to prepaid prescription organizations, and shall adopt
37 regulations in accordance with the commissioner's determination¹.

38 ¹【For the purposes of this section, "prescription female
39 contraceptives" means any drug or device used for contraception
40 【by a female】, which is approved by the federal Food and Drug
41 Administration for that purpose【, that can only be purchased in this
42 State with a prescription written by a health care professional
43 licensed or authorized to write prescriptions, and includes, but is
44 not limited to, birth control pills and diaphragms】.】

45 c.¹ The coverage provided shall include prescriptions for
46 dispensing contraceptives for:

1 **[a.] (1)** a three-month period for the first dispensing of the
2 contraceptive; and

3 **[b.] (2)** a six-month period for any subsequent dispensing of
4 the same contraceptive, regardless of whether coverage under the
5 contract was in effect at the time of the first dispensing, except that
6 an entity subject to this section may provide coverage for a supply
7 of contraceptives that is for less than a six-month period, if a six-
8 month period would extend beyond the term of the contract.

9 **[A religious employer may request, and a prepaid prescription**
10 **service organization shall grant, an exclusion under the contract for**
11 **the coverage required by this section if the required coverage**
12 **conflicts with the religious employer's bona fide religious beliefs**
13 **and practices. A religious employer that obtains such an exclusion**
14 **shall provide written notice thereof to prospective enrollees and**
15 **enrollees. The provisions of this section shall not be construed as**
16 **authorizing a prepaid prescription service organization to exclude**
17 **coverage for prescription drugs that are prescribed for reasons other**
18 **than contraceptive purposes or for prescription female**
19 **contraceptives that are necessary to preserve the life or health of an**
20 **enrollee. For the purposes of this section, "religious employer"**
21 **means an employer that is a church, convention or association of**
22 **churches or an elementary or secondary school that is controlled,**
23 **operated or principally supported by a church or by a convention or**
24 **association of churches as defined in 26 U.S.C.s.3121(w)(3)(A),**
25 **and that qualifies as a tax-exempt organization under 26**
26 **U.S.C.s.501(c)(3).]**

27 ¹**[b.] d.**¹ The benefits shall be provided to the same extent as
28 for any other ¹**[outpatient prescription] service,¹ drug ¹, device,**
29 **product, or procedure¹ under the contract, except no deductible,**
30 **coinsurance, copayment, or any other cost-sharing requirement on**
31 **the coverage shall be imposed.**

32 ¹**[c.] e.**¹ This section shall apply to those prepaid prescription
33 contracts in which the prepaid prescription service organization has
34 reserved the right to change the premium.

35 ¹**f.** Nothing in this section shall limit coverage of any additional
36 preventive service for women, as identified or recommended by the
37 United States Preventive Services Task Force or the Health
38 Resources and Services Administration of the United States
39 Department of Health and Human Services pursuant to the
40 provisions of 42 U.S.C. 300gg-13.¹

41 (cf: P.L.2017, c.241, s.9)

42
43 10. Section 10 of P.L.2005, c.251 (C.52:14-17.29j) is amended
44 to read as follows:

45 10. a. The State Health Benefits Commission shall ensure that
46 every contract purchased by the commission on or after the
47 effective date of this act ¹**[that provides benefits for expenses**

1 incurred in the purchase of outpatient prescription drugs¹ shall
2 provide benefits for expenses incurred in the purchase of
3 prescription female contraceptives¹, and the following services,
4 drugs, devices, products, and procedures:

5 (1) Any contraceptive drug, device or product approved by the
6 United States Food and Drug Administration, which coverage shall
7 be subject to all of the following conditions:

8 (a) If there is a therapeutic equivalent of a contraceptive drug,
9 device or product approved by the United States Food and Drug
10 Administration, coverage shall be provided for either the requested
11 contraceptive drug, device or product or for one or more therapeutic
12 equivalents of the requested drug, device or product.

13 (b) Coverage shall be provided without a prescription for all
14 contraceptive drugs available for over-the-counter sale that are
15 approved by the United States Food and Drug Administration.

16 (c) Coverage shall be provided without any infringement upon a
17 subscriber's choice of contraception and medical necessity shall be
18 determined by the provider for covered contraceptive drugs, devices
19 or other products approved by the United States Food and Drug
20 Administration.

21 (2) Voluntary male and female sterilization.

22 (3) Patient education and counseling on contraception.

23 (4) Services related to the administration and monitoring of
24 drugs, devices, products and services required under this section,
25 including but not limited to:

26 (a) Management of side effects;

27 (b) Counseling for continued adherence to a prescribed regimen;

28 (c) Device insertion and removal;

29 (d) Provision of alternative contraceptive drugs, devices or
30 products deemed medically appropriate in the judgment of the
31 subscriber's health care provider; and

32 (e) Diagnosis and treatment services provided pursuant to, or as
33 a follow-up to, a service required under this section¹.

34 ¹**【For the purposes of this section, "prescription female**
35 **contraceptives" means any drug or device used for contraception**
36 **【by a female】, which is approved by the federal Food and Drug**
37 **Administration for that purpose【, that can only be purchased in this**
38 **State with a prescription written by a health care professional**
39 **licensed or authorized to write prescriptions, and includes, but is**
40 **not limited to, birth control pills and diaphragms】.】**

41 **b.**¹ The coverage provided shall include prescriptions for
42 dispensing contraceptives for:

43 **【a.】** (1) a three-month period for the first dispensing of the
44 contraceptive; and

45 **【b.】** (2) a six-month period for any subsequent dispensing of
46 the same contraceptive, regardless of whether coverage under the
47 contract was in effect at the time of the first dispensing, except that

1 an entity subject to this section may provide coverage for a supply
2 of contraceptives that is for less than a six-month period, if a six-
3 month period would extend beyond the term of the contract.

4 ¹**[b.] c.**¹ The contract shall specify that no deductible,
5 coinsurance, copayment, or any other cost-sharing requirement may
6 be imposed on the coverage required pursuant to this section.

7 ¹d. Nothing in this section shall limit coverage of any additional
8 preventive service for women, as identified or recommended by the
9 United States Preventive Services Task Force or the Health
10 Resources and Services Administration of the United States
11 Department of Health and Human Services pursuant to the
12 provisions of 42 U.S.C. 300gg-13.¹

13 (cf: P.L.2017, c.241, s.10)

14

15 11. This act shall take effect on the 90th day next following
16 enactment and shall apply to policies or contracts issued or renewed
17 on or after the effective date.