

1 SB254
2 136209-1
3 By Senator Whatley
4 RFD: Health
5 First Read: 08-FEB-12

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8 SYNOPSIS: This bill would require all group health
9 benefit plans executed or renewed in this state to
10 offer coverage for treatment for infertility.

11
12 A BILL
13 TO BE ENTITLED
14 AN ACT

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16 To require certain health benefit plans to offer
17 coverage for treatment for infertility; and to amend Sections
18 10A-20-6.16 and 27-21A-23, Code of Alabama 1975, relating to
19 applicability of insurance laws to certain health service
20 plans.

21 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

22 Section 1. For purposes of this action, the
23 following terms shall have the following meanings:

24 (1) HEALTH BENEFIT PLAN. A group insurance policy
25 that covers hospital, medical, or surgical expenses, health
26 maintenance organizations, preferred provider organizations,
27 medical service organizations, physician-hospital

1 organizations, or any other person, firm, corporation, joint
2 venture, or other similar business entity that pays for,
3 purchases, or furnishes health care services to patients,
4 insureds, or beneficiaries in this state. For the purposes of
5 this chapter, a health benefit plan located or domiciled
6 outside of the State of Alabama is deemed to be subject to
7 this chapter if it receives, processes, adjudicates, pays, or
8 denies claims for health care services submitted by or on
9 behalf of patients, insureds, or beneficiaries who reside in
10 the State of Alabama or who receive health care services in
11 the State of Alabama. The term includes, but is not limited
12 to, entities created pursuant to Article 6, Chapter 20, Title
13 10A, Code of Alabama 1975.

14 (2) IN VITRO FERTILIZATION. The laboratory medical
15 procedures involving the actual in vitro fertilization
16 process.

17 (3) TREATMENT FOR INFERTILITY. Procedures consistent
18 with established medical practices in the treatment of
19 infertility by licensed physicians and surgeons including, but
20 not limited to, diagnosis, diagnostic tests, medication,
21 surgery, and gamete intrafallopian transfer.

22 (b) On and after the effective date of this act,
23 every health benefit plan which is issued, amended, or renewed
24 that covers hospital, medical, or surgical expenses shall
25 offer coverage for the treatment of infertility, except in
26 vitro fertilization, under those terms and conditions as may
27 be agreed upon between the group subscriber and the plan.

1 Every plan shall communicate the availability of that coverage
2 to all group contract holders and to all prospective group
3 contract holders with whom they are negotiating.

4 (c) Nothing in this section shall be construed to
5 deny or restrict any existing right or benefit to coverage and
6 treatment of infertility under an existing law, plan, or
7 policy.

8 Section 2. Sections 10A-20-6.16 and 27-21A-23, Code
9 of Alabama 1975, are amended to read as follows:

10 "§10A-20-6.16.

11 "(a) No statute of this state applying to insurance
12 companies shall be applicable to any corporation organized
13 under this article and amendments thereto or to any contract
14 made by the corporation unless expressly mentioned in this
15 article and made applicable; except as follows:

16 "(1) The corporation shall be subject to the
17 provisions regarding annual premium tax to be paid by insurers
18 on insurance premiums.

19 "(2) The corporation shall be subject to the
20 provisions of Chapter 55, Title 27, regarding the prohibition
21 of unfair discriminatory acts by insurers on the basis of an
22 applicant's or insured's abuse status.

23 "(3) The corporation shall be subject to the
24 provisions regarding Medicare Supplement Minimum Standards set
25 forth in Article 2 of Chapter 19 of Title 27, and Long-Term
26 Care Insurance Policy Minimum Standards set forth in Article 3
27 of Chapter 19 of Title 27.

1 "(4) The corporation shall be subject to Section
2 27-1-17, requiring insurers and health plans to pay health
3 care providers in a timely manner.

4 "(5) The corporation shall be subject to the
5 provisions of Chapter 56 of Title 27, regarding the Access to
6 Eye Care Act.

7 "(6) The corporation shall be subject to the
8 regulations promulgated by the Commissioner of Insurance
9 pursuant to Sections 27-7-43 and 27-7-44.

10 "(7) The corporation shall be subject to the
11 provisions of Chapter 54 of Title 27.

12 "(8) The corporation shall be subject to the
13 provisions of Chapter 57 of Title 27, requiring coverage to be
14 offered for the payment of colorectal cancer examinations for
15 covered persons who are 50 years of age or older, or for
16 covered persons who are less than 50 years of age and at high
17 risk for colorectal cancer according to current American
18 Cancer Society colorectal cancer screening guidelines.

19 "(9) The corporation shall be subject to Chapter 58
20 of Title 27, requiring that policies and contracts including
21 coverage for prostate cancer early detection be offered,
22 together with identification of associated costs.

23 "(10) The corporation shall be subject to Chapter 59
24 of Title 27 requiring that policies and contracts including
25 coverage for chiropractic be offered, together with
26 identification of associated costs.

1 "(11) The corporation shall be subject to Section 1
2 of the act adding this subdivision requiring that group
3 policies and contracts offer coverage for certain treatment
4 for infertility.

5 "(b) The provisions in subsection (a) that require
6 specific types of coverage to be offered or provided shall not
7 apply when the corporation is administering a self-funded
8 benefit plan or similar plan, fund, or program that it does
9 not insure.

10 "§27-21A-23.

11 "(a) Except as otherwise provided in this chapter,
12 provisions of the insurance law and provisions of health care
13 service plan laws shall not be applicable to any health
14 maintenance organization granted a certificate of authority
15 under this chapter. This provision shall not apply to an
16 insurer or health care service plan licensed and regulated
17 pursuant to the insurance law or the health care service plan
18 laws of this state except with respect to its health
19 maintenance organization activities authorized and regulated
20 pursuant to this chapter.

21 "(b) Solicitation of enrollees by a health
22 maintenance organization granted a certificate of authority
23 shall not be construed to violate any provision of law
24 relating to solicitation or advertising by health
25 professionals.

26 "(c) Any health maintenance organization authorized
27 under this chapter shall not be deemed to be practicing

1 medicine and shall be exempt from the provisions of Section
2 34-24-310, et seq., relating to the practice of medicine.

3 "(d) No person participating in the arrangements of
4 a health maintenance organization other than the actual
5 provider of health care services or supplies directly to
6 enrollees and their families shall be liable for negligence,
7 misfeasance, nonfeasance, or malpractice in connection with
8 the furnishing of such services and supplies.

9 "(e) Nothing in this chapter shall be construed in
10 any way to repeal or conflict with any provision of the
11 certificate of need law.

12 "(f) Notwithstanding the provisions of subsection
13 (a), a health maintenance organization shall be subject to
14 Section 27-1-17.

15 "(g) Notwithstanding the provisions of subsection
16 (a), a health maintenance organization shall be subject to the
17 provisions of Chapter 56 of this title, regarding the Access
18 to Eye Care Act.

19 "(h) Notwithstanding the provisions of subsection
20 (a), a health maintenance organization shall be subject to the
21 provisions of Chapter 54 of this title.

22 "(i) Notwithstanding the provisions of subsection
23 (a), a health maintenance organization shall be subject to the
24 provisions of Chapter 57 of this title, requiring coverage to
25 be offered for the payment of colorectal cancer examinations
26 for covered persons who are 50 years of age or older, or for
27 covered persons who are less than 50 years of age and at high

1 risk for colorectal cancer according to current American
2 Cancer Society colorectal cancer screening guidelines.

3 "(j) Notwithstanding the provisions of subsection
4 (a), a health maintenance organization shall be subject to
5 Chapter 58 of Title 27, requiring that policies and contracts
6 including coverage for prostate cancer early detection be
7 offered, together with identification of associated costs.

8 "(k) Notwithstanding the provisions of subsection
9 (a), a health maintenance organization shall be subject to
10 Chapter 59 of this title, requiring that policies and
11 contracts including coverage for chiropractic be offered,
12 together with identification of associated costs.

13 "(l) Notwithstanding the provisions of subsection
14 (a), a health maintenance organization shall be subject to
15 Section 1 of the act adding this subsection requiring group
16 health benefit plans to include coverage for certain treatment
17 for infertility."

18 Section 3. This act shall become effective on the
19 first day of the third month following its passage and
20 approval by the Governor, or its otherwise becoming law.