

WEST VIRGINIA LEGISLATURE

2020 REGULAR SESSION

Committee Substitute

for

House Bill 4198

BY DELEGATES PYLES, PUSHKIN, LAVENDER-BOWE, AND

S. BROWN

[Originating in the Committee on Health and Human

Resources; January 28, 2020.]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,
2 designated §33-53-2, relating to required insurance coverage; permitting a person to
3 obtain a 12-month supply of contraceptive drugs; defining terms; and providing exclusions.

Be it enacted by the Legislature of West Virginia:

ARTICLE 53. REQUIRED COVERAGE FOR HEALTH INSURANCE.

§33-53-2. Coverage and dispensing birth control.

1 (a) Notwithstanding the a prohibition or limitation contained within the provisions of §33-
2 1-1 et seq. and §5-16-1 of this code an insurer subject to §5-16-1 et seq., §33-15-1 et seq., §33-
3 16-1 et seq., §33-24-1 et seq., §33-25-1 et seq., and §33-25A-1 of this code which amends,
4 renews, or delivers a health policy on or after January 1, 2021, that provides coverage for
5 contraceptive drugs shall provide coverage for a 12-month refill of contraceptive drugs obtained
6 at one time by the insured after the insured has completed the initial supply of the drugs, unless
7 the insured requests a smaller supply or the prescribing provider instructs that the insured must
8 receive a smaller supply. A health benefit plan that provides coverage shall allow the insured to
9 receive the contraceptive drugs on-site at the provider's office, if available, and dispensing
10 practices must follow all clinical guidelines for appropriate prescribing and dispensing to ensure
11 the health of the patient while maximizing access to effective contraceptive drugs.

12 (b) A health benefit plan that provides coverage for hormonal contraceptives, in the
13 absence of clinical contraindications, may not impose utilization controls or other forms of medical
14 management limiting the supply of contraceptive drugs that may be dispensed or furnished by a
15 provider or pharmacy, or at a location licensed or otherwise authorized to dispense drugs or
16 supplies, to an amount that is less than a 12-month supply.

17 (c) This section does not exclude coverage for contraceptive drugs as prescribed by a
18 provider for reasons other than contraceptive purposes, such as decreasing the risk of ovarian
19 cancer or eliminating symptoms of menopause, or for contraception that is necessary to preserve
20 the life or health of an enrollee.

21 (d) Nothing in this section requires a health benefit plan to cover contraceptive drugs
22 provided by a provider, pharmacy or at a location authorized to dispense drugs or supplies, that
23 does not participate in the health benefit plan's provider or pharmacy network, as applicable,
24 except as may be otherwise authorized or required by state law or by the plan's policies governing
25 out-of-network coverage.

26 (e) For purposes of this section, the term "contraceptive drugs" means all drugs approved
27 by the United States Food and Drug Administration that are used to prevent pregnancy including,
28 but not limited to, hormonal drugs administered orally, transdermally, and intravaginally.

NOTE: The purpose of this bill is to permit a person to obtain a 12-month supply of contraceptive drugs.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.