

AMENDMENTS TO LB20

Introduced by Banking, Commerce and Insurance.

1           1. Strike the original sections and insert the following new  
2 sections:

3           Section 1. (1) Notwithstanding section 44-3,131, any individual or  
4 group sickness and accident insurance policy, certificate, or subscriber  
5 contract delivered, issued for delivery, or renewed in this state and any  
6 hospital, medical, or surgical expense-incurred policy, except for  
7 policies that provide coverage for a specified disease or other limited  
8 benefit coverage, and any self-funded employee benefit plan to the extent  
9 not preempted under federal law that includes coverage for a self-  
10 administered hormonal contraceptive that is approved by the federal Food  
11 and Drug Administration shall reimburse an in-network health care  
12 provider or dispensing entity on a per-unit basis for dispensing a supply  
13 of such contraceptive to a covered individual as follows:

14           (a) For the first prescription of such contraceptive, at least up to  
15 a three-month supply, if so prescribed; and

16           (b) For subsequent refills of the same contraceptive, regardless of  
17 whether the covered individual was enrolled in the policy, contract, or  
18 plan at the time of the first prescription for such contraceptive, up to  
19 a six-month supply, if so prescribed.

20           (2) Nothing in this section shall be construed to:

21           (a) Require a health care provider to prescribe a six-month supply  
22 of a self-administered hormonal contraceptive; or

23           (b) Permit a policy, contract, or plan to impose cost-sharing for an  
24 alternative method of contraception if a covered individual changes  
25 contraceptive methods before exhausting a previously dispensed supply of  
26 a self-administered hormonal contraceptive.

27           (3) A policy, contract, or plan shall be exempt from this section

1 for a policy, contract, or plan year if, using a calculation method  
2 approved by the Department of Insurance, the cost of coverage would  
3 likely exceed one percent of all premiums collected under such policy,  
4 contract, or plan for such policy, contract, or plan year.

5 Sec. 2. Section 68-901, Revised Statutes Cumulative Supplement,  
6 2020, is amended to read:

7 68-901 Sections 68-901 to 68-9,100 and section 3 of this act shall  
8 be known and may be cited as the Medical Assistance Act.

9 Sec. 3. (1) In providing family planning services and supplies  
10 under the medical assistance program, the department shall ensure that a  
11 prescription for the dispensation of a covered self-administered hormonal  
12 contraceptive is provided as follows:

13 (a) For the first prescription of such contraceptive, at least up to  
14 a three-month supply, if so prescribed; and

15 (b) For subsequent refills of the same contraceptive, regardless of  
16 whether the covered individual was enrolled in the medical assistance  
17 program at the time of the first prescription for such contraceptive, up  
18 to a six-month supply, if so prescribed.

19 (2) Nothing in this section shall be construed to limit a medical  
20 assistance recipient's freedom to choose or change the method of family  
21 planning to use, regardless of whether the recipient has exhausted a  
22 previously dispensed supply of contraceptives.

23 Sec. 4. Original section 68-901, Revised Statutes Cumulative  
24 Supplement, 2020, is repealed.