SENATE No. 549

The Commonwealth of Massachusetts

PRESENTED BY:

Sonia Chang-Diaz

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to women's health.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
Sonia Chang-Diaz	Second Suffolk	
Joanne M. Comerford	Hampshire, Franklin and Worcester	1/25/2019
Jason M. Lewis	Fifth Middlesex	1/28/2019
José F. Tosado	9th Hampden	1/31/2019
Denise Provost	27th Middlesex	2/1/2019
James B. Eldridge	Middlesex and Worcester	2/1/2019
Bud L. Williams	11th Hampden	2/1/2019
Liz Miranda	5th Suffolk	2/1/2019

SENATE No. 549

By Ms. Chang-Diaz, a petition (accompanied by bill, Senate, No. 549) of Sonia Chang-Diaz, Joanne M. Comerford, Jason M. Lewis, José F. Tosado and other members of the General Court for legislation relative to women's health. Financial Services.

[SIMILAR MATTER FILED IN PREVIOUS SESSION SEE SENATE, NO. 507 OF 2017-2018.]

The Commonwealth of Massachusetts

In the One Hundred and Ninety-First General Court (2019-2020)

An Act relative to women's health.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

- SECTION 1: Chapter 32A of the General Laws, as appearing in the 2016 Official
- 2 Edition, is hereby amended by inserting after section 27 the following section:
- 3 Section 28. Any coverage offered by the commission to an active or retired employee of
- 4 the commonwealth insured under the group insurance commission shall provide coverage for
- 5 long acting reversible contraceptives. Notwithstanding any other provision of law to the contrary,
- 6 effective January 1, 2020, the insertion and removal of long-acting reversible contraceptives,
- 7 whether provided in an inpatient or outpatient setting, shall each be reimbursed separately from
- 8 other services. The maximum allowed reimbursement rate to providers for insertion or removal
- 9 of long-acting reversible contraceptives shall be increased by no less than two hundred and
- ninety nine dollars, effective January 1, 2020.

SECTION 2. Chapter 118E of the General Laws, as so appearing, is hereby amended by inserting after section 10J the following section:

10K (a) The division and its contracted health insurers, health plans, health maintenance organizations, behavioral health management firms and third-party administrators under contract to a Medicaid managed care organization or primary care clinician plan shall provide coverage for long acting reversible contraceptives. Notwithstanding any other provision of law to the contrary, effective January 1, 2020, the insertion and removal of long-acting reversible contraceptives, whether provided in an inpatient or outpatient setting, shall each be reimbursed separately from other services. The maximum allowed reimbursement rate to providers for insertion or removal of long-acting reversible contraceptives shall be increased by no less than two hundred and ninety nine dollars, effective January 1, 2020.

SECTION 3. Chapter 175 of the General Laws, as so appearing, is hereby amended in section 47W(c) by inserting at the end thereof the following:

(d) An individual policy of accident and sickness insurance issued pursuant to section 108 that provides hospital expense and surgical expense and any group blanket policy of accident and sickness insurance issued pursuant to section 110 that provides hospital expense and surgical expense insurance, delivered, issued or renewed by agreement between the insurer and the policyholder, within or without the commonwealth, (hereinafter "policy") shall provide benefits for residents of the commonwealth and all group members having a principal place of employment within the commonwealth coverage for long acting reversible contraceptives.

Notwithstanding any other provision of law to the contrary, effective January 1, 2020, the insertion and removal of long-acting reversible contraceptives, whether provided in an inpatient

or outpatient setting, shall each be reimbursed separately from other services. The maximum allowed reimbursement rate to providers for insertion or removal of long-acting reversible contraceptives shall be increased by no less than two hundred and ninety nine dollars, effective January 1, 2020.

SECTION 4. Chapter 176A of the General Laws, as so appearing, is hereby amended in section 8W(c) by inserting at the end thereof the following:

- (d) Any contract between a subscriber and the corporation under an individual or group hospital service plan that is delivered, issued or renewed within or without the commonwealth and that provides benefits for outpatient services shall provide to all individual subscribers and members within the commonwealth and to all group members having a principal place of employment within the commonwealth coverage for long acting reversible contraceptives.

 Notwithstanding any other provision of law to the contrary, effective January 1, 2020, the insertion and removal of long-acting reversible contraceptives, whether provided in an inpatient or outpatient setting, shall each be reimbursed separately from other services. The maximum allowed reimbursement rate to providers for insertion or removal of long-acting reversible contraceptives shall be increased by no less than two hundred and ninety nine dollars, effective January 1, 2020.
- SECTION 5. Chapter 176B of the General Laws, as so appearing, is hereby amended in section 4W(c) by inserting at the end thereof the following:
- (d) Any subscription certificate under an individual or group medical service agreement that is delivered, issued or renewed within or without the commonwealth and that provides benefits for outpatient services shall provide to all individual subscribers and members within the

commonwealth and to all group members having a principal place of employment within the commonwealth coverage for long acting reversible contraceptives. Notwithstanding any other provision of law to the contrary, effective January 1, 2020, the insertion and removal of long-acting reversible contraceptives, whether provided in an inpatient or outpatient setting, shall each be reimbursed separately from other services. The maximum allowed reimbursement rate to providers for insertion or removal of long-acting reversible contraceptives shall be increased by no less than two hundred and ninety nine dollars, effective January 1, 2020.

SECTION 6. Chapter 176G of the General Laws, as so appearing, is hereby amended in section 4O(c) by inserting at the end thereof the following:

(d) Any individual or group health maintenance contract that is issued, renewed or delivered within or without the commonwealth and that provides benefits for outpatient prescription drugs or devices shall provide to residents of the commonwealth and to persons having a principal place of employment within the commonwealth coverage for long acting reversible contraceptives. Notwithstanding any other provision of law to the contrary, effective January 1, 2020, the insertion and removal of long-acting reversible contraceptives, whether provided in an inpatient or outpatient setting, shall each be reimbursed separately from other services. The maximum allowed reimbursement rate to providers for insertion or removal of long-acting reversible contraceptives shall be increased by no less than two hundred and ninety nine dollars, effective January 1, 2020.

SECTION 7: Chapter 111 of the General Laws, as so appearing, is hereby amended by inserting after section 236 the following section:-

Section 237. The department of public health shall develop and implement, or cause to be developed and implemented, a training program that works to expand the number of clinicians and practices equipped to provide long-acting reversible contraceptives. The training shall address best practices for patient counseling, implant placement and removal, and addressing administrative barriers to providing long-acting reversible contraceptives, including the development of policies and procedures, procurement of devices, stocking devices, billing and reimbursement. To the fullest extent possible, said training shall be eligible for relevant continuing education credits. Upon completion of the training program, providers should be adequately prepared to provide access to all methods of contraception in a single patient visit.

SECTION 8. Section 10A of chapter 118E of the General Laws is hereby amended by adding the following paragraph after the second paragraph: -

Beginning on January 1, 2020, postpartum visits shall be billed separately from prenatal care and childbirth.