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SYNOPSIS
Requires health insurance coverage for contraceptives to include prescriptions for six months.

CURRENT VERSION OF TEXT
As amended on July 31, 2017 by the General Assembly pursuant to the Governor's recommendations.

(Sponsorship Updated As Of: 8/1/2017)
AN ACT concerning insurance coverage for prescribed contraceptives and amending P.L.2005, c.251.

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

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

1. A hospital service corporation that provides hospital or medical expense benefits for expenses incurred in the purchase of outpatient prescription drugs under a contract shall provide coverage under every such contract delivered, issued, executed or renewed in this State or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, for expenses incurred in the purchase of prescription female contraceptives. For the purposes of this section, "prescription female contraceptives" means any drug or device used for contraception by a female, which is approved by the federal Food and Drug Administration for that purpose, that can only be purchased in this State with a prescription written by a health care professional licensed or authorized to write prescriptions, and includes, but is not limited to, birth control pills and diaphragms. The coverage provided shall include prescriptions for dispensing contraceptives for:

a. a three-month period for the first dispensing of the contraceptive; and

b. a [twelve-month] six-month\(^1\) period for any subsequent dispensing of the same contraceptive, regardless of whether coverage under the contract was in effect at the time of the first dispensing \(^1\), except that an entity subject to this section may provide coverage for a supply of contraceptives that is for less than a six-month period, if a six-month period would extend beyond the term of the contract \(^1\).

A religious employer may request, and a hospital service corporation shall grant, an exclusion under the contract for the coverage required by this section if the required coverage conflicts with the religious employer's bona fide religious beliefs and practices. A religious employer that obtains such an exclusion shall provide written notice thereof to prospective subscribers and subscribers. The provisions of this section shall not be construed as authorizing a hospital service corporation to exclude coverage for prescription drugs that are prescribed for reasons other than contraceptive purposes or for prescription female contraceptives that are necessary to preserve the life or health of a subscriber. For

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:
\(^1\)Assembly amendments adopted in accordance with Governor's recommendations July 31, 2017.
the purposes of this section, "religious employer" means an employer that is a church, convention or association of churches or an elementary or secondary school that is controlled, operated or principally supported by a church or by a convention or association of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).

The benefits shall be provided to the same extent as for any other outpatient prescription drug under the contract.

This section shall apply to those contracts in which the hospital service corporation has reserved the right to change the premium.

(cf: P.L.2005, c.251, s.1)

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

2. A medical service corporation that provides hospital or medical expense benefits for expenses incurred in the purchase of outpatient prescription drugs under a contract shall provide coverage under every such contract delivered, issued, executed or renewed in this State or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, for expenses incurred in the purchase of prescription female contraceptives. For the purposes of this section, "prescription female contraceptives" means any drug or device used for contraception by a female, which is approved by the federal Food and Drug Administration for that purpose, that can only be purchased in this State with a prescription written by a health care professional licensed or authorized to write prescriptions, and includes, but is not limited to, birth control pills and diaphragms. The coverage provided shall include prescriptions for dispensing contraceptives for:

a. a three-month period for the first dispensing of the contraceptive; and

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

A religious employer may request, and a medical service corporation shall grant, an exclusion under the contract for the coverage required by this section if the required coverage conflicts with the religious employer's bona fide religious beliefs and practices. A religious employer that obtains such an exclusion shall provide written notice thereof to prospective subscribers and subscribers. The provisions of this section shall not be construed as authorizing a medical service corporation to exclude coverage for prescription drugs that are prescribed for reasons other than
contraceptive purposes or for prescription female contraceptives
that are necessary to preserve the life or health of a subscriber. For
the purposes of this section, "religious employer" means an
employer that is a church, convention or association of churches or
an elementary or secondary school that is controlled, operated or
principally supported by a church or by a convention or association
of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that
qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).
The benefits shall be provided to the same extent as for any other
outpatient prescription drug under the contract.
This section shall apply to those contracts in which the medical
service corporation has reserved the right to change the premium.
(cf: P.L.2005, c.251, s.2)

3. Section 3 of P.L.2005, c.251 (C.17:48E-35.29) is amended
to read as follows:
3. A health service corporation that provides hospital or
medical expense benefits for expenses incurred in the purchase of
outpatient prescription drugs under a contract shall provide
coverage under every such contract delivered, issued, executed or
renewed in this State or approved for issuance or renewal in this
State by the Commissioner of Banking and Insurance, on or after
the effective date of this act, for expenses incurred in the purchase
of prescription female contraceptives. For the purposes of this
section, "prescription female contraceptives" means any drug or
device used for contraception by a female, which is approved by the
federal Food and Drug Administration for that purpose, that can
only be purchased in this State with a prescription written by a
health care professional licensed or authorized to write
prescriptions, and includes, but is not limited to, birth control pills
and diaphragms. The coverage provided shall include prescriptions
for dispensing contraceptives for:
   a. a three-month period for the first dispensing of the
      contraceptive; and
   b. a twelve-month period for any subsequent
      dispensing of the same contraceptive, regardless of whether
      coverage under the contract was in effect at the time of the first
      dispensing, except that an entity subject to this section may
      provide coverage for a supply of contraceptives that is for less than
      a six-month period, if a six-month period would extend beyond the
      term of the contract.
A religious employer may request, and a health service
corporation shall grant, an exclusion under the contract for the
coverage required by this section if the required coverage conflicts
with the religious employer's bona fide religious beliefs and
practices. A religious employer that obtains such an exclusion shall
provide written notice thereof to prospective subscribers and
subscribers. The provisions of this section shall not be construed as
authorizing a health service corporation to exclude coverage for prescription drugs that are prescribed for reasons other than contraceptive purposes or for prescription female contraceptives that are necessary to preserve the life or health of a subscriber. For the purposes of this section, "religious employer" means an employer that is a church, convention or association of churches or an elementary or secondary school that is controlled, operated or principally supported by a church or by a convention or association of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).

The benefits shall be provided to the same extent as for any other outpatient prescription drug under the contract.

This section shall apply to those contracts in which the health service corporation has reserved the right to change the premium.

(cf: P.L.2005, c.251, s.3)

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

4. A group health insurer that provides hospital or medical expense benefits for expenses incurred in the purchase of outpatient prescription drugs under a policy shall provide coverage under every such policy delivered, issued, executed or renewed in this State or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, for expenses incurred in the purchase of prescription female contraceptives. For the purposes of this section, "prescription female contraceptives" means any drug or device used for contraception by a female, which is approved by the federal Food and Drug Administration for that purpose, that can only be purchased in this State with a prescription written by a health care professional licensed or authorized to write prescriptions, and includes, but is not limited to, birth control pills and diaphragms. The coverage provided shall include prescriptions for dispensing contraceptives for:

a. a three-month period for the first dispensing of the contraceptive; and

b. a six-month period for any subsequent dispensing of the same contraceptive, regardless of whether coverage under the policy was in effect at the time of the first dispensing, except that an entity subject to this section may provide coverage for a supply of contraceptives that is for less than a six-month period, if a six-month period would extend beyond the term of the contract;

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

The benefits shall be provided to the same extent as for any other outpatient prescription drug under the policy.

This section shall apply to those policies in which the insurer has reserved the right to change the premium.

(cf: P.L.2005, c.251, s.4)

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

5. An individual health insurer that provides hospital or medical expense benefits for expenses incurred in the purchase of outpatient prescription drugs under a policy shall provide coverage under every such policy delivered, issued, executed or renewed in this State or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, for expenses incurred in the purchase of prescription female contraceptives. For the purposes of this section, "prescription female contraceptives" means any drug or device used for contraception by a female, which is approved by the federal Food and Drug Administration for that purpose, that can only be purchased in this State with a prescription written by a health care professional licensed or authorized to write prescriptions, and includes, but is not limited to, birth control pills and diaphragms. The coverage provided shall include prescriptions for dispensing contraceptives for:

a. a three-month period for the first dispensing of the contraceptive; and

b. a twelve-month period for any subsequent dispensing of the same contraceptive, regardless of whether coverage under the policy was in effect at the time of the first dispensing, except that an entity subject to this section may provide coverage for a supply of contraceptives that is for less than a six-month period, if a six-month period would extend beyond the term of the contract.

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

The benefits shall be provided to the same extent as for any other outpatient prescription drug under the policy.

This section shall apply to those policies in which the insurer has reserved the right to change the premium.

(cf: P.L.2005, c.251, s.5)

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

6. A certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued on or after the effective date of this act for a health maintenance organization that provides health care services for outpatient prescription drugs under a contract, unless the health maintenance organization also provides health care services for prescription female contraceptives. For the purposes of this section, "prescription female contraceptives" means any drug or device used for contraception by a female, which is approved by the federal Food and Drug Administration for that purpose, that can only be purchased in this State with a prescription written by a health care professional licensed or authorized to write prescriptions, and includes, but is not limited to, birth control pills and diaphragms.

The coverage provided shall include prescriptions for dispensing contraceptives for:

a. a three-month period for the first dispensing of the contraceptive; and

b. a [twelve-month] six-month\textsuperscript{1} period for any subsequent dispensing of the same contraceptive, regardless of whether coverage under the contract was in effect at the time of the first dispensing \textsuperscript{1}, except that an entity subject to this section may provide coverage for a supply of contraceptives that is for less than a six-month period, if a six-month period would extend beyond the term of the contract\textsuperscript{1}.

A religious employer may request, and a health maintenance organization shall grant, an exclusion under the contract for the health care services required by this section if the required health care services conflict with the religious employer's bona fide
religious beliefs and practices. A religious employer that obtains such an exclusion shall provide written notice thereof to prospective enrollees and enrollees. The provisions of this section shall not be construed as authorizing a health maintenance organization to exclude health care services for prescription drugs that are prescribed for reasons other than contraceptive purposes or for prescription female contraceptives that are necessary to preserve the life or health of an enrollee. For the purposes of this section, "religious employer" means an employer that is a church, convention or association of churches or an elementary or secondary school that is controlled, operated or principally supported by a church or by a convention or association of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).

The health care services shall be provided to the same extent as for any other outpatient prescription drug under the contract.

The provisions of this section shall apply to those contracts for health care services by health maintenance organizations under which the right to change the schedule of charges for enrollee coverage is reserved.

(cf: P.L.2005, c.251, s.6)

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

7. An individual health benefits plan required pursuant to section 3 of P.L.1992, c.161 (C.17B:27A-4) that provides benefits for expenses incurred in the purchase of outpatient prescription drugs shall provide coverage for expenses incurred in the purchase of prescription female contraceptives. For the purposes of this section, "prescription female contraceptives" means any drug or device used for contraception by a female, which is approved by the federal Food and Drug Administration for that purpose, that can only be purchased in this State with a prescription written by a health care professional licensed or authorized to write prescriptions, and includes, but is not limited to, birth control pills and diaphragms. The coverage provided shall include prescriptions for dispensing contraceptives for:

a. a three-month period for the first dispensing of the contraceptive; and

b. a [twelve-month] six-month\(^1\) period for any subsequent dispensing of the same contraceptive, regardless of whether coverage under the plan was in effect at the time of the first dispensing \(^1\), except that an entity subject to this section may provide coverage for a supply of contraceptives that is for less than a six-month period, if a six-month period would extend beyond the term of the contract\(^1\).

A religious employer may request, and a carrier shall grant, an exclusion under the health benefits plan for the coverage required
by this section if the required coverage conflicts with the religious
employer's bona fide religious beliefs and practices. A religious
employer that obtains such an exclusion shall provide written notice
thereof to prospective covered persons and covered persons. The
provisions of this section shall not be construed as authorizing a
carrier to exclude coverage for prescription drugs that are
prescribed for reasons other than contraceptive purposes or for
prescription female contraceptives that are necessary to preserve the
life or health of a covered person. For the purposes of this section,
"religious employer" means an employer that is a church,
convention or association of churches or an elementary or
secondary school that is controlled, operated or principally
supported by a church or by a convention or association of churches
as defined in 26 U.S.C.s.3121(w)(3)(A), and that qualifies as a tax-
 exempt organization under 26 U.S.C.s.501(c)(3).

The benefits shall be provided to the same extent as for any other
outpatient prescription drug under the health benefits plan.
This section shall apply to all individual health benefits plans in
which the carrier has reserved the right to change the premium.
(cf: P.L.2005, c.251, s.7)

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

8. A small employer health benefits plan required pursuant to
section 3 of P.L.1992, c.162 (C.17B:27A-19) that provides benefits
for expenses incurred in the purchase of outpatient prescription
drugs shall provide coverage for expenses incurred in the purchase
of prescription female contraceptives. For the purposes of this
section, "prescription female contraceptives" means any drug or
device used for contraception by a female, which is approved by the
federal Food and Drug Administration for that purpose, that can
only be purchased in this State with a prescription written by a
health care professional licensed or authorized to write
prescriptions, and includes, but is not limited to, birth control pills
and diaphragms. The coverage provided shall include prescriptions
for dispensing contraceptives for:

a. a three-month period for the first dispensing of the
contraceptive; and

b. a six-month period for any subsequent
dispensing of the same contraceptive, regardless of whether
coverage under the plan was in effect at the time of the first
dispensing, except that an entity subject to this section may
provide coverage for a supply of contraceptives that is for less than
a six-month period, if a six-month period would extend beyond the
term of the contract.

A religious employer may request, and a carrier shall grant, an
exclusion under the health benefits plan for the coverage required
by this section if the required coverage conflicts with the religious
employer’s bona fide religious beliefs and practices. A religious employer that obtains such an exclusion shall provide written notice thereof to prospective covered persons and covered persons. The provisions of this section shall not be construed as authorizing a carrier to exclude coverage for prescription drugs that are prescribed for reasons other than contraceptive purposes or for prescription female contraceptives that are necessary to preserve the life or health of a covered person. For the purposes of this section, "religious employer" means an employer that is a church, convention or association of churches or an elementary or secondary school that is controlled, operated or principally supported by a church or by a convention or association of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).

The benefits shall be provided to the same extent as for any other outpatient prescription drug under the health benefits plan.

This section shall apply to all small employer health benefits plans in which the carrier has reserved the right to change the premium.

(cf: P.L.2005, c.251, s.8)

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

9. A prepaid prescription service organization that provides benefits for expenses incurred in the purchase of outpatient prescription drugs under a contract shall provide coverage under every such contract delivered, issued, executed or renewed in this State or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act, for expenses incurred in the purchase of prescription female contraceptives. For the purposes of this section, "prescription female contraceptives" means any drug or device used for contraception by a female, which is approved by the federal Food and Drug Administration for that purpose, that can only be purchased in this State with a prescription written by a health care professional licensed or authorized to write prescriptions, and includes, but is not limited to, birth control pills and diaphragms. The coverage provided shall include prescriptions for dispensing contraceptives for:

a. a three-month period for the first dispensing of the contraceptive; and

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


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

The benefits shall be provided to the same extent as for any other outpatient prescription drug under the contract.

This section shall apply to those prepaid prescription contracts in which the prepaid prescription service organization has reserved the right to change the premium.

(cf: P.L.2005, c.251, s.9)

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

10. The State Health Benefits Commission shall ensure that every contract purchased by the commission on or after the effective date of this act that provides benefits for expenses incurred in the purchase of outpatient prescription drugs shall provide benefits for expenses incurred in the purchase of prescription female contraceptives.

For the purposes of this section, "prescription female contraceptives" means any drug or device used for contraception by a female, which is approved by the federal Food and Drug Administration for that purpose, that can only be purchased in this State with a prescription written by a health care professional licensed or authorized to write prescriptions, and includes, but is not limited to, birth control pills and diaphragms. The coverage provided shall include prescriptions for dispensing contraceptives for:

a. a three-month period for the first dispensing of the contraceptive; and

b. a [twelve-month] six-month\(^{1}\) period for any subsequent dispensing of the same contraceptive, regardless of whether coverage under the contract was in effect at the time of the first dispensing \(^{1}\), except that an entity subject to this section may
provide coverage for a supply of contraceptives that is for less than
a six-month period, if a six-month period would extend beyond the
term of the contract. (cf: P.L.2005, c.251, s.10)

11. This act shall take effect on the 90th day next following
enactment and shall apply to policies and contracts delivered,
issued, executed or renewed on or after the effective date of this act.