ASSEMBLY, No. 5508

STATE OF NEW JERSEY

218th LEGISLATURE

INTRODUCED JUNE 6, 2019

Sponsored by:

Assemblyman ANDREW ZWICKER
District 16 (Hunterdon, Mercer, Middlesex and Somerset)
Assemblywoman CAROL A. MURPHY
District 7 (Burlington)
Assemblywoman SHAVONDA E. SUMTER
District 35 (Bergen and Passaic)

Co-Sponsored by:

Assemblywomen Vainieri Huttle and Lampitt

SYNOPSIS

Revises law requiring health benefits coverage for certain contraceptives.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/11/2019)

AN ACT concerning health benefits coverage for 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. <u>a.</u> 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.] (1) a three-month period for the first dispensing of the contraceptive; and
 - **[b.]** (2) 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 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 the purposes of this section, "religious employer" means an

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

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).

- <u>b.</u> The benefits shall be provided to the same extent as for any other outpatient prescription drug under the contract, except no deductible, coinsurance, copayment, or any other cost-sharing requirement on the coverage shall be imposed.
- <u>c.</u> This section shall apply to those contracts in which the hospital service corporation has reserved the right to change the premium.

13 (cf: P.L.2017, c.241, s.1)

- 2. Section 2 of P.L.2005, c.251 (C.17:48A-7bb) is amended to read as follows:
- 2. <u>a.</u> 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.] (1) a three-month period for the first dispensing of the contraceptive; and
- **[b.]** (2) 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 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

1 authorizing a medical service corporation to exclude coverage for 2 prescription drugs that are prescribed for reasons other than 3 contraceptive purposes or for prescription female contraceptives 4 that are necessary to preserve the life or health of a subscriber. For 5 the purposes of this section, "religious employer" means an 6 employer that is a church, convention or association of churches or 7 an elementary or secondary school that is controlled, operated or 8 principally supported by a church or by a convention or association 9 of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that 10 qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).

- <u>b.</u> The benefits shall be provided to the same extent as for any other outpatient prescription drug under the contract, except no deductible, coinsurance, copayment, or any other cost-sharing requirement on the coverage shall be imposed.
- <u>c.</u> This section shall apply to those contracts in which the medical service corporation has reserved the right to change the premium.

(cf: P.L.2017, c.241, s.2)

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- 3. Section 3 of P.L.2005, c.251 (C.17:48E-35.29) is amended to read as follows:
- 3. <u>a.</u> 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.**]** (1) a three-month period for the first dispensing of the contraceptive; and
- **[b.]** (2) 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 health service corporation shall grant, an exclusion under the contract for the

1 coverage required by this section if the required coverage conflicts 2 with the religious employer's bona fide religious beliefs and 3 practices. A religious employer that obtains such an exclusion shall 4 provide written notice thereof to prospective subscribers and 5 subscribers. The provisions of this section shall not be construed as 6 authorizing a health service corporation to exclude coverage for 7 prescription drugs that are prescribed for reasons other than 8 contraceptive purposes or for prescription female contraceptives 9 that are necessary to preserve the life or health of a subscriber. For 10 the purposes of this section, "religious employer" means an 11 employer that is a church, convention or association of churches or 12 an elementary or secondary school that is controlled, operated or 13 principally supported by a church or by a convention or association 14 of churches as defined in 26 U.S.C.s.3121(w)(3)(A), and that 15 qualifies as a tax-exempt organization under 26 U.S.C.s.501(c)(3).

- <u>b.</u> The benefits shall be provided to the same extent as for any other outpatient prescription drug under the contract, except no deductible, coinsurance, copayment, or any other cost-sharing requirement on the coverage shall be imposed.
- <u>c.</u> This section shall apply to those contracts in which the health service corporation has reserved the right to change the premium.

(cf: P.L.2017, c.241, s.3)

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- 4. Section 4 of P.L. 2005, c.251 (C.17B:27-46.1ee) is amended to read as follows:
- 4. a. 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.**]** (1) a three-month period for the first dispensing of the contraceptive; and
- **[b.]** (2) 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 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).

- <u>b.</u> The benefits shall be provided to the same extent as for any other outpatient prescription drug under the policy, except no deductible, coinsurance, copayment, or any other cost-sharing requirement on the coverage shall be imposed.
- <u>c.</u> This section shall apply to those policies in which the insurer has reserved the right to change the premium.

(cf: P.L.2017, c.241, s.4)

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- 5. Section 5 of P.L.2005, c.251 (C.17B:26-2.1y) is amended to read as follows:
- 5. a. 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.] (1) a three-month period for the first dispensing of the contraceptive; and

[b.] (2) 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 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).

- <u>b.</u> The benefits shall be provided to the same extent as for any other outpatient prescription drug under the policy, <u>except no deductible</u>, <u>coinsurance</u>, <u>copayment</u>, <u>or any other cost-sharing requirement on the coverage shall be imposed</u>.
- \underline{c} . This section shall apply to those policies in which the insurer has reserved the right to change the premium.

(cf: P.L.2017, c.241, s.5)

- 6. Section 6 of P.L.2005, c. 251 (C.26:2J-4.30) is amended to read as follows:
- 6. <u>a.</u> 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.] (1) a three-month period for the first dispensing of the contraceptive; and

[b.] (2) 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 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 taxexempt organization under 26 U.S.C.s.501(c)(3).

- <u>b.</u> The health care services shall be provided to the same extent as for any other outpatient prescription drug under the contract, except no deductible, coinsurance, copayment, or any other costsharing requirement on the coverage shall be imposed.
- <u>c.</u> 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.2017, c.241, s.6)

- 7. Section 7 of P.L.2005, c.251 (C.17B:27A-7.12) is amended to read as follows:
- 7. <u>a.</u> 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.] (1) a three-month period for the first dispensing of the contraceptive; and
- **[b.]** (2) 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 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 taxexempt organization under 26 U.S.C.s.501(c)(3).

- <u>b.</u> The benefits shall be provided to the same extent as for any other outpatient prescription drug under the health benefits plan, except no deductible, coinsurance, copayment, or any other costsharing requirement on the coverage shall be imposed.
- <u>c.</u> This section shall apply to all individual health benefits plans in which the carrier has reserved the right to change the premium.
- 37 (cf: P.L.2017, c.241, s.7)

- 39 8. Section 8 of P.L.2005, c.251 (C.17B:27A-19.15) is amended 40 to read as follows:
 - 8. <u>a.</u> 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

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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.] (1) a three-month period for the first dispensing of the contraceptive; and

[b.] (2) 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 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 taxexempt organization under 26 U.S.C.s.501(c)(3).

- <u>b.</u> The benefits shall be provided to the same extent as for any other outpatient prescription drug under the health benefits plan, except no deductible, coinsurance, copayment, or any other costsharing requirement on the coverage shall be imposed.
- <u>c.</u> 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.2017, c.241, s.8)

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

- 1 date of this act, for expenses incurred in the purchase of 2 prescription female contraceptives. For the purposes of this section, 3 "prescription female contraceptives" means any drug or device used 4 for contraception by a female, which is approved by the federal 5 Food and Drug Administration for that purpose, that can [only] be purchased in this State with a prescription written by a health care 6 7 professional licensed or authorized to write prescriptions, and 8 includes, but is not limited to, birth control pills and diaphragms. 9 The coverage provided shall include prescriptions for dispensing 10 contraceptives for:
 - [a.] (1) a three-month period for the first dispensing of the contraceptive; and
 - **[b.]** (2) 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 contraceptive purposes or for prescription 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).

- <u>b.</u> The benefits shall be provided to the same extent as for any other outpatient prescription drug under the contract, except no deductible, coinsurance, copayment, or any other cost-sharing requirement on the coverage shall be imposed.
- <u>c.</u> This section shall apply to those prepaid prescription contracts in which the prepaid prescription service organization has reserved the right to change the premium.

44 (cf: P.L.2017, c.241, s.9)

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

10. <u>a.</u> 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 <code>[only]</code> 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.] (1) a three-month period for the first dispensing of the contraceptive; and

[b.] (2) 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.

b. The contract shall specify that no deductible, coinsurance, copayment, or any other cost-sharing requirement may be imposed on the coverage required pursuant to this section.

(cf: P.L.2017, c.241, s.10)

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

STATEMENT

This bill amends P.L.2005, c.251, the statute requiring health insurance carriers and the State health benefits programs to cover prescription female contraceptives, by prohibiting insurers from imposing a deductible, coinsurance, copayment, or any other cost-sharing requirement on this coverage.

Currently, federal law requires coverage for female contraceptives to be provided without cost sharing in certain circumstances. This bill would expand State law to also require coverage for female contraceptives to be provided without cost sharing. The bill also expands coverage for female contraceptives to include all contraceptives approved by the federal Food and Drug Administration for that purpose that can be purchased in this State with a prescription written by a health care professional.

- 1 The bill also removes the exemption in current law for religious
- 2 employers to provide coverage for female contraceptives if the
- 3 required coverage conflicts with the religious employer's bona fide
- 4 religious beliefs and practices.