[Second Reprint]

SENATE, No. 526

STATE OF NEW JERSEY

219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator NELLIE POU

District 35 (Bergen and Passaic) Senator STEPHEN M. SWEENEY

District 3 (Cumberland, Gloucester and Salem)

Co-Sponsored by:

Senators Turner, Ruiz, Madden, Lagana and Gopal

SYNOPSIS

Provides that purchase of insulin is not subject to deductible and requires health insurers to limit copayments and coinsurance for insulin.

CURRENT VERSION OF TEXT

As reported by the Senate Budget and Appropriations Committee on November 9, 2020, with amendments.



(Sponsorship Updated As Of: 4/9/2020)

1	AN ACT concerning [copayments] cost sharing for insuling
2	amending P.L.1995, c.331, and supplementing various parts of
3	the statutory law.

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

- ¹1. (New section) The Legislature finds and declares that:
- a. The rising cost of insulin has created an affordability crisis that threatens the health and financial well-being of many diabetes patients.
- b. Research by the non-partisan Health Care Cost Institute found that prices for insulin nearly doubled over the five year period from 2012 to 2016 and other studies show that prices for insulin have increased by 700% over the past two decades.
- c. The lack of competition, transparency, and accountability in the prescription drug market has allowed manufacturers of insulin to exert extraordinary pricing power.
- d. While insulin products have been on the market for almost a century, there is limited competition from lower-cost generics, in part due to aggressive efforts by brand name drug manufacturers to block the entry of generic insulin products into the market.
- e. Even consumers with health insurance may face a lack of access to insulin due to the plan design of some health insurance policies.
- f. For consumers without insurance, or with insurance coverage not subject to New Jersey State law, access to current and reliable cost information may be helpful to consumers and researchers trying to better understand the true cost of insulin.
- g. It is, therefore, in the public interest to protect consumers by mandating insurance coverage cost sharing maximums in New Jersey to improve consumer access to insulin, and to provide for transparency and publication of drug company pricing of insulin.¹

- ¹[1.] <u>2.</u> Section 1 of P.L.1995, c.331 (C.17:48-6n) is amended to read as follows:
- 1. a. Every individual or group hospital service corporation contract providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to P.L.1938, c.366 (C.17:48-1 et seq.) or approved for issuance or renewal in this State by the Commissioner of <u>Banking and Insurance</u> on or after the effective date of this act shall provide benefits to any subscriber or other person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician or nurse

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 <u>thus</u> is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SCM committee amendments adopted January 27, 2020.

²Senate SBA committee amendments adopted November 9, 2020.

practitioner/clinical nurse specialist: blood glucose monitors and 1 2 blood glucose monitors for the legally blind; test strips for glucose 3 monitors and visual reading and urine testing strips; insulin; injection 4 aids; cartridges for the legally blind; syringes; insulin pumps and 5 appurtenances thereto; insulin infusion devices; and oral agents for 6 controlling blood sugar. ¹[No] Coverage for the purchase of insulin shall not be subject to any deductible, and no copayment or 7 coinsurance¹ for the purchase of insulin shall exceed ¹[\$100] \$50¹ per 8 9 30 day supply.

- b. Each individual or group hospital service corporation contract shall also provide benefits for expenses incurred for diabetes selfmanagement education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician or nurse practitioner/clinical nurse specialist of a significant change in the subscriber's or other covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician or nurse practitioner/clinical nurse specialist that reeducation or refresher education is necessary. Diabetes self-management education shall be provided by a dietitian registered by a nationally recognized professional association of dietitians or a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators or a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey.
- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.
- d. This section shall apply to all hospital service corporation contracts in which the hospital service corporation has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of <u>Banking and</u> Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 45 (cf: P.L.1995, c.331, s.1)

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¹[2.] 3.¹ Section 2 of P.L.1995, c.331 (C.17:48A-71) is amended to read as follows:

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- 3 2. a. Every individual or group medical service corporation 4 contract providing hospital or medical expense benefits that is 5 delivered, issued, executed or renewed in this State pursuant to 6 P.L.1940, c.74 (C.17:48A-1 et seq.) or approved for issuance or 7 renewal in this State by the Commissioner of Banking and Insurance 8 on or after the effective date of this act shall provide benefits to any 9 subscriber or other person covered thereunder for expenses incurred 10 for the following equipment and supplies for the treatment of diabetes, 11 recommended or prescribed by a physician or nurse 12 practitioner/clinical nurse specialist: blood glucose monitors and 13 blood glucose monitors for the legally blind; test strips for glucose 14 monitors and visual reading and urine testing strips; insulin; injection 15 aids; cartridges for the legally blind; syringes; insulin pumps and 16 appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar. ¹[No] Coverage for the purchase of insulin 17 shall not be subject to any deductible, and no copayment or 18 coinsurance¹ for the purchase of insulin shall exceed ¹[\$100] \$50¹ per 19 20 30 day supply.
 - b. Each individual or group medical service corporation contract shall also provide benefits for expenses incurred for diabetes selfmanagement education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician or nurse practitioner/clinical nurse specialist of a significant change in the subscriber's or other covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician or nurse practitioner/clinical nurse specialist that reeducation or refresher education is necessary. Diabetes self-management education shall be provided by a dietitian registered by a nationally recognized professional association of dietitians or a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators or a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey.
 - c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.
 - d. This section shall apply to all medical service corporation contracts in which the medical service corporation has reserved the right to change the premium.

- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
 - f. The Commissioner of <u>Banking and</u> Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.

11 (cf: P.L.1995, c.331, s.2)

- ¹[3.] <u>4.</u>¹ Section 3 of P.L.1995, c.331 (C.17:48E-35.11) is amended to read as follows:
- Every individual or group health service corporation 3. a. contract providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to P.L.1985, c.236 (C.17:48E-1 et seq.) 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 shall provide benefits to any subscriber or other person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, recommended or prescribed by a physician or nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar. ¹[No] Coverage for the purchase of insulin shall not be subject to any deductible, and no¹ copayment ¹or coinsurance¹ for the purchase of insulin shall exceed ¹[\$100] \$50¹ per 30 day supply.
- b. Each individual or group health service corporation contract shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon the diagnosis by a physician or nurse practitioner/clinical nurse specialist of a significant change in the subscriber's or other covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician or nurse practitioner/clinical nurse specialist that reeducation or refresher education is necessary.

- Diabetes self-management education shall be provided by a dietitian 1
- 2 registered by a nationally recognized professional association of
- 3 dietitians or a health care professional recognized as a Certified
- 4 Diabetes Educator by the American Association of Diabetes Educators
- 5 or a registered pharmacist in the State qualified with regard to
- 6 management education for diabetes by any institution recognized by 7
 - the board of pharmacy of the State of New Jersey.
 - c. The benefits required by this section shall be provided to the same extent as for any other sickness under the contract.
 - d. This section shall apply to all health service corporation contracts in which the health service corporation has reserved the right to change the premium.
 - e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
 - f. The Commissioner of Banking and Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.
- 23 (cf: P.L.1995, c.331, s.3)

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- ¹[4.] <u>5.</u> Section 4 of P.L.1995, c.331 (C.17B:26-2.11) is amended to read as follows:
- 4. a. Every individual health insurance policy providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to Chapter 26 of Title 17B of the New Jersey Statutes 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 shall provide benefits to any person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician or nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; test strips for glucose monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar. ¹[No] Coverage for the purchase of insulin shall not be subject to any deductible, and no copayment or coinsurance¹ for the purchase of insulin shall exceed ¹[\$100] \$50¹ per
- b. Each individual health insurance policy shall also provide benefits for expenses incurred for diabetes self-management education

to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician or nurse practitioner/clinical nurse specialist of a significant change in the covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician or nurse practitioner/clinical nurse specialist that reeducation or refresher education is necessary. Diabetes self-management education shall be provided by a dietitian registered by a nationally recognized professional association of dietitians or a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators or a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey.

- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the policy.
- d. This section shall apply to all individual health insurance policies in which the insurer has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of <u>Banking and</u> Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.

(cf: P.L.1995, c.331, s.4)

- 1 [5.] <u>6.</u> Section 5 of P.L.1995, c.331 (C.17B:27-46.1m) is amended to read as follows:
- 5. a. Every group health insurance policy providing hospital or medical expense benefits that is delivered, issued, executed or renewed in this State pursuant to Chapter 27 of Title 17B of the New Jersey Statutes 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 shall provide benefits to any person covered thereunder for expenses incurred for the following equipment and supplies for the treatment of diabetes, if recommended or prescribed by a physician or nurse practitioner/clinical nurse specialist: blood glucose monitors and blood glucose monitors for the legally blind; test strips for glucose

monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and appurtenances thereto; insulin infusion devices; and oral agents for controlling blood sugar.

[No] Coverage for the purchase of insulin shall not be subject to any deductible, and no¹ copayment ¹or coinsurance¹ for the purchase of insulin shall exceed ¹[\$100] \$50¹ per 30 day supply.

- b. Each group health insurance policy shall also provide benefits for expenses incurred for diabetes self-management education to ensure that a person with diabetes is educated as to the proper selfmanagement and treatment of their diabetic condition, including information on proper diet. Benefits provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a physician or nurse practitioner/clinical nurse specialist of a significant change in the covered person's symptoms or conditions which necessitate changes in that person's self-management; and upon determination of a physician or nurse practitioner/clinical nurse specialist that reeducation or refresher education is necessary. Diabetes self-management education shall be provided by a dietitian registered by a nationally recognized professional association of dietitians or a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators or a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey.
- c. The benefits required by this section shall be provided to the same extent as for any other sickness under the policy.
- d. This section shall apply to all group health insurance policies in which the insurer has reserved the right to change the premium.
- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
- f. The Commissioner of <u>Banking and</u> Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.

41 (cf: P.L.1995, c.331, s.5)

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¹[6.] <u>7.</u>¹ Section 6 of P.L.1995, c.331 (C.26:2J-4.11) is amended to read as follows:

1 6. a. Every contract for health care services that is delivered, 2 issued, executed or renewed in this State pursuant to P.L.1973, c.337 3 (C.26:2J-1 et seq.) or approved for issuance or renewal in this State on 4 or after the effective date of this act shall provide health care services 5 to any enrollee or other person covered thereunder for the following 6 equipment and supplies for the treatment of diabetes, if recommended 7 or prescribed by a participating physician or participating nurse 8 practitioner/clinical nurse specialist: blood glucose monitors and 9 blood glucose monitors for the legally blind; test strips for glucose 10 monitors and visual reading and urine testing strips; insulin; injection aids; cartridges for the legally blind; syringes; insulin pumps and 11 12 appurtenances thereto; insulin infusion devices; and oral agents for 13 controlling blood sugar. ¹[No] Coverage for the purchase of insulin shall not be subject to any deductible, and no copayment or 14 coinsurance¹ for the purchase of insulin shall exceed ¹[\$100] \$50¹ per 15 16 30 day supply.

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- b. Each contract shall also provide health care services for diabetes self-management education to ensure that a person with diabetes is educated as to the proper self-management and treatment of their diabetic condition, including information on proper diet. Health care services provided for self-management education and education relating to diet shall be limited to visits medically necessary upon the diagnosis of diabetes; upon diagnosis by a participating physician or participating nurse practitioner/clinical nurse specialist of a significant change in the enrollee's or other covered person's symptoms or conditions which necessitate changes in that person's selfmanagement; and upon determination of a participating physician or participating nurse practitioner/clinical nurse specialist reeducation or refresher education is necessary. Diabetes selfmanagement education shall be provided by a participating dietitian registered by a nationally recognized professional association of dietitians or a health care professional recognized as a Certified Diabetes Educator by the American Association of Diabetes Educators or, pursuant to section 6 of P.L.1993, c.378 (C.26:2J-4.7), a registered pharmacist in the State qualified with regard to management education for diabetes by any institution recognized by the board of pharmacy of the State of New Jersey.
- c. The health care services required by this section shall be provided to the same extent as for any other sickness under the contract.
- d. This section shall apply to all contracts in which the health maintenance organization has reserved the right to change the schedule of charges.

- e. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).
 - f. The Commissioner of <u>Banking and</u> Insurance may, in consultation with the Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), promulgate and periodically update a list of additional diabetes equipment and related supplies that are medically necessary for the treatment of diabetes and for which benefits shall be provided according to the provisions of this section.

11 (cf: P.L.1995, c.331, s.6)

¹[7.] <u>8.</u>¹ (New section) An individual health benefits plan that provides hospital and medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to P.L.1992, c.161 (C.17B:27A-2 et al.), on or after the effective date of P.L. , c. (C.) (pending before the Legislature as this bill), shall provide coverage to any enrollee or other person covered thereunder for insulin for the treatment of diabetes, if recommended or prescribed by a participating physician or participating nurse practitioner/clinical nurse specialist. ¹[No] Coverage for the purchase of insulin shall not be subject to any deductible, and no copayment or coinsurance for the purchase of insulin shall exceed [\$100] \$50 per 30 day supply.

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

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

1 [8.] 9.1 (New section) A small employer health benefits plan that provides hospital and medical expense benefits and is delivered, issued, executed or renewed in this State pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.), on or after the effective date of P.L., c. (C.) (pending before the Legislature as this bill), shall provide coverage to any enrollee or other person covered thereunder for insulin for the treatment of diabetes, if recommended or prescribed by a participating physician or participating nurse practitioner/clinical nurse specialist. 1 [No] Coverage for the purchase of insulin shall not be subject to any deductible, and no1 copayment 1 or coinsurance1 for the purchase of insulin shall exceed 1 [\$100] \$501 per 30 day supply.

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

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

1	¹ [9.] <u>10.</u> (New section) The State Health Benefits Commission
2	shall ensure that every contract purchased or renewed by the
3	commission on or after the effective date of P.L. , c. (C.)
4	(pending before the Legislature as this bill), shall provide coverage for
5	health care services to any enrollee or other person covered thereunder
6	for insulin for the treatment of diabetes, if recommended or prescribed
7	by a participating physician or participating nurse practitioner/clinical
8	nurse specialist. ¹ [No] Coverage for the purchase of insulin shall not
9	be subject to any deductible, and no ¹ copayment ¹ or coinsurance ¹ for
10	the purchase of insulin shall exceed ¹ [\$100] \$50 ¹ per 30 day supply.
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12	¹ [10.] 11. (New section) The School Employees' Health Benefits
13	Commission shall ensure that every contract purchased by the
14	commission on or after the effective date of P.L. , c. (C.)
15	(pending before the Legislature as this bill) that provides hospital and
16	medical expense benefits shall provide health care services to any
17	enrollee or other person covered thereunder for insulin for the
18	treatment of diabetes, if recommended or prescribed by a participating
19	physician or participating nurse practitioner/clinical nurse specialist.
20	¹ [No] Coverage for the purchase of insulin shall not be subject to any
21	deductible, and no ¹ copayment ¹ or coinsurance ¹ for the purchase of
22	insulin shall exceed ¹ [\$100] \$50 ¹ per 30 day supply.
23	<u> </u>
24	² [12. (New section) Every manufacturer of an insulin product
25	shall submit, not later than January 1, 2021, and annually thereafter, a
26	report to the Commissioner of Banking and Insurance containing the
27	following information:
28	a. name of the insulin products currently manufactured;
29	b. identification of whether the insulin products are brand name
30	or generic drug products;
31	c. total sales of insulin products to New Jersey consumers
32	quantified in total units and total revenue;
33	d. the effective date and amounts of any changes in the wholesale
34	acquisition cost or other list prices for insulin during the prior calendar
35	year;
36	e. aggregate, company-level research and development costs for
37	insulin over the prior calendar year;
38	f. the name of each of the manufacturer's insulin products that
39	were approved by the federal Food and Drug Administration in the
40	previous five calendar years;
41	g. the name of each of the manufacturer's insulin products that
42	lost patent exclusivity in the United States in the previous five

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calendar years; and

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1	h. a statement of rationale regarding the factor or factors that
2	caused the increase in the wholesale acquisition cost or list price
3	increase for insulin. ¹] ²
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5	¹ [11. This act] ² [13.] 12. Sections 2 through 4, 6, and 7 of
6	this act shall take effect on the 180th day next following the date of
7	enactment and shall apply to plans issued or renewed on or after
8	January 1 of the next calendar year; sections 5, 8, and 9 shall take
9	effect on the 270th day next following the date of enactment and
10	shall apply to plans issued or renewed after January 1 of the next
11	calendar year; sections 10 and 11 ¹ shall take effect on the 90th day
12	next following ¹ the date of ¹ enactment ¹ and shall apply to contracts
13	purchased on or after that date ² [; and section 12 shall take place
14	immediately ¹] ² .