

Proposed Amendments to SB 576 (Ortiz)

SEC. 2. Section 1367.27 is added to the Health and Safety Code, to read:

1367.27.

(a) A health care service plan contract, except a specialized health care service plan contract, that is issued, amended, delivered, or renewed on or after July 1, 2006, that provides outpatient prescription drug benefits, shall include coverage for tobacco cessation services that include two courses of treatment in a 12-month period including personal counseling, which may be telephone or individual, and FDA-approved medication for tobacco cessation, including prescription and over-the-counter medications. Covered treatment shall comply with the Public Health Service sponsored 2000 clinical practice guideline, "Treating Tobacco Use and Dependence," or its successors.

~~(b) Copayments for prescription and over the counter medications shall not exceed \$15. No copayment or deductible shall be applied to benefits for over the counter tobacco cessation medications that are allowed in paragraph (3) of subdivision (a). Otherwise copayments shall not exceed fifteen dollars (\$15).~~

(c) A health care service plan may contract with qualified local, statewide or national providers, whether for-profit or nonprofit, for the provision of services under this section.

(d) A health care service plan shall disclose the benefits under this section in its evidence of coverage and disclosure forms and communicate the availability of coverage to all enrollees.

(e) The coverage provided pursuant to this section shall only be available upon the order of a plan authorized provider. Nothing in this subdivision shall preclude a plan from allowing enrollees to access tobacco cessation services on a self-referral basis .

SEC. 3. Section 10123.175 is added to the Insurance Code, to read:

10123.175.

(a) Every individual or group health insurance policy that is issued, amended, delivered, or renewed on or after July 1, 2006, that provides outpatient prescription drug benefits, shall include coverage for tobacco cessation services that include two courses of treatment in a 12-month period including personal counseling, which may be telephone or individual, and FDA-approved medication for tobacco cessation, including prescription and over-the-counter medications. Covered treatment shall comply with the Public Health Service sponsored 2000 clinical practice guideline, "Treating Tobacco Use and Dependence," or its successors.

~~(b) Copayments for prescription and over the counter medications shall not exceed \$15. No copayment or deductible shall be applied to benefits for over the counter tobacco cessation medications that are allowed in paragraph (3) of subdivision (a). Otherwise copayments shall not exceed fifteen dollars (\$15).~~

(c) A health insurer may contract with qualified local, statewide or national providers, whether for-profit or nonprofit, for the provision of services under this section.

(d) An insurer shall disclose the benefits under this section in its evidence of coverage and disclosure forms and communicate the availability of coverage to all insureds .

(e) The coverage provided pursuant to this section shall only be available upon the order of an authorized provider. Nothing in this subdivision shall preclude an insurer from allowing insureds to access tobacco cessation services on a self-referral basis .

(f) This section shall not apply to a Medicare supplement, short-term limited duration health insurance, vision-only, dental-only, or Champus-supplement insurance, or to hospital indemnity, hospital-only, accident-only, or specified disease insurance that does not pay benefits on a fixed benefit, cash payment only basis.