

16104698D

SENATE BILL NO. 404

AMENDMENT IN THE NATURE OF A SUBSTITUTE  
(Proposed by the Senate Committee on Education and Health  
on February 4, 2016)

(Patron Prior to Substitute—Senator Locke)

A BILL to amend and reenact § 2.2-2818.2 of the Code of Virginia and to amend the Code of Virginia by adding a section numbered 38.2-3407.5:2, relating to reimbursements to dispensers of generic prescription oral contraceptives.

Be it enacted by the General Assembly of Virginia:

1. That § 2.2-2818.2 of the Code of Virginia is amended and reenacted and that the Code of Virginia is amended by adding a section numbered 38.2-3407.5:2 as follows:

§ 2.2-2818.2. Application of mandates to the state employee health insurance plan.

A. As used in this section, "insurance mandate" means a mandatory obligation with respect to coverage, benefits, or the number or types of providers imposed on policies of accident and health insurance under Title 38.2. "Insurance mandate" does not include (i) an administrative rule or regulation imposing a mandatory obligation with respect to coverage, benefits, or providers unless that mandatory obligation was specifically imposed on policies of accident and health insurance by statute or (ii) any obligation imposed on a health carrier by § 38.2-3407.5:2.

B. Notwithstanding the provisions of § 2.2-2818, any law imposed under Title 38.2 that becomes effective on or after July 1, 2009, that provides for an insurance mandate for policies of accident and health insurance shall also apply to health coverage offered to state employees pursuant to § 2.2-2818.

C. If health coverage offered to state employees under § 2.2-2818 offers coverage in the same manner and to the same extent as the coverage required by an insurance mandate imposed under Title 38.2 or coverage that is greater than an insurance mandate imposed under Title 38.2, the coverage offered to state employees under § 2.2-2818 shall be considered in compliance with the insurance mandate.

§ 38.2-3407.5:2. Reimbursements to dispensers of generic prescription oral contraceptives.

A. As used in this section:

"Covered person," "health benefit plan," and "health carrier" have the same meaning ascribed to such terms in § 38.2-3438.

"Generic prescription oral contraceptive" means a prescription oral contraceptive for which an application under § 505(j) of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. § 355(j), is approved.

"Prescription oral contraceptive" means a medication taken to prevent pregnancy, including pills containing estrogen or progesterone, that is taken by mouth, requires a prescription, and is approved by the U.S. Food and Drug Administration for such purpose.

B. Any coverage for generic prescription oral contraceptives provided under a health benefit plan shall provide that the health carrier shall reimburse the health care provider or other dispensing entity for a dispensing of the generic prescribed oral contraceptives intended to last for a 12-month period for the first and subsequent dispensings of the generic prescription oral contraceptive to a covered person.

C. The provisions of this section shall be applicable to health benefit plans delivered, issued for delivery, or renewed in the Commonwealth on and after July 1, 2016.