

1 VIRGINIA ACTS OF ASSEMBLY — CHAPTER

2 *An Act to amend and reenact § 2.1-20.1 of the Code of Virginia, as it is currently effective and as it*
3 *may become effective, relating to health and related insurance for state employees; coverage for*
4 *early intervention services.*

5 [H 2716]

6 Approved

7 **Be it enacted by the General Assembly of Virginia:**

8 **1. That § 2.1-20.1 of the Code of Virginia, as it is currently effective and as it may become**
9 **effective, is amended and reenacted as follows:**

10 § 2.1-20.1. Health and related insurance for state employees.

11 A. 1. The Governor shall establish a plan for providing health insurance coverage, including
12 chiropractic treatment, hospitalization, medical, surgical and major medical coverage, for state employees
13 and retired state employees with the Commonwealth paying the cost thereof to the extent of the
14 coverage included in such plan. The Department of Personnel and Training shall administer this section.
15 The plan chosen shall provide means whereby coverage for the families or dependents of state
16 employees may be purchased. The Commonwealth may pay all or a portion of the cost thereof, and for
17 such portion as the Commonwealth does not pay, the employee may purchase the coverage by paying
18 the additional cost over the cost of coverage for an employee.

19 2. Such contribution shall be financed through appropriations provided by law.

20 B. 1. The plan shall include coverage for low-dose screening mammograms for determining the
21 presence of occult breast cancer. Such coverage shall make available one screening mammogram to
22 persons age thirty-five through thirty-nine, one such mammogram biennially to persons age forty
23 through forty-nine, one such mammogram annually to persons age fifty and over and may be limited to
24 a benefit of fifty dollars per mammogram subject to such dollar limits, deductibles, and coinsurance
25 factors as are no less favorable than for physical illness generally. The term "mammogram" shall mean
26 an X-ray examination of the breast using equipment dedicated specifically for mammography, including
27 but not limited to the X-ray tube, filter, compression device, screens, film, and cassettes, with an
28 average radiation exposure of less than one rad mid-breast, two views of each breast.

29 2. The plan shall include coverage for the treatment of breast cancer by dose-intensive chemotherapy
30 with autologous bone marrow transplants or stem cell support when performed at a clinical program
31 authorized to provide such therapies as a part of clinical trials sponsored by the National Cancer
32 Institute. For persons previously covered under the plan, there shall be no denial of coverage due to the
33 existence of a preexisting condition.

34 3. The plan shall include coverage for postpartum services providing inpatient care and a home visit
35 or visits which shall be in accordance with the medical criteria, outlined in the most current version of
36 or an official update to the "Guidelines for Perinatal Care" prepared by the American Academy of
37 Pediatrics and the American College of Obstetricians and Gynecologists or the "Standards for
38 Obstetric-Gynecologic Services" prepared by the American College of Obstetricians and Gynecologists.
39 Such coverage shall be provided incorporating any changes in such Guidelines or Standards within six
40 months of the publication of such Guidelines or Standards or any official amendment thereto.

41 4. *The plan shall include coverage for early intervention services. For purposes of this section,*
42 *"early intervention services" means medically necessary speech and language therapy, occupational*
43 *therapy, physical therapy and assistive technology services and devices for dependents from birth to age*
44 *three who are certified by the Department of Mental Health, Mental Retardation, and Substance Abuse*
45 *Services as eligible for services under Part H of the Individuals with Disabilities Education Act (20*
46 *U.S.C. § 1471 et seq.). Medically necessary early intervention services for the population certified by*
47 *the Department of Mental Health, Mental Retardation, and Substance Abuse Services shall mean those*
48 *services designed to help an individual attain or retain the capability to function age-appropriately*
49 *within his environment, and shall include services which enhance functional ability without effecting a*
50 *cure.*

51 *For persons previously covered under the plan, there shall be no denial of coverage due to the*
52 *existence of a preexisting condition. The cost of early intervention services shall not be applied to any*
53 *contractual provision limiting the total amount of coverage paid by the insurer to or on behalf of the*
54 *insured during the insured's lifetime.*

55 C. Claims incurred during a fiscal year but not reported during that fiscal year shall be paid from
56 such funds as shall be appropriated by law. Appropriations, premiums and other payments shall be

57 deposited in the employee health insurance fund, from which payments for claims, premiums, cost
 58 containment programs and administrative expenses shall be withdrawn from time to time. The assets of
 59 the fund shall be held for the sole benefit of the employee health insurance program. The fund shall be
 60 held in the state treasury. Any interest on unused balances in the fund shall revert back to the credit of
 61 the fund.

62 D. For the purposes of this section, the term "state employee" means state employee as defined in
 63 § 51.1-124.3, employee as defined in § 51.1-201, the Governor, Lieutenant Governor and Attorney
 64 General, judge as defined in § 51.1-301 and judges, clerks and deputy clerks of regional juvenile and
 65 domestic relations, county juvenile and domestic relations, and district courts of the Commonwealth,
 66 interns and residents employed by the School of Medicine and Hospital of the University of Virginia,
 67 and interns, residents, and employees of the Medical College of Virginia Hospitals Authority as provided
 68 in § 23-50.16:24.

69 E. Provisions shall be made for retired employees to obtain coverage under the above plan. The
 70 Commonwealth may, but shall not be obligated to, pay all or any portion of the cost thereof.

71 F. Any self-insured group health insurance plan established by the Department of Personnel and
 72 Training which utilizes a network of preferred providers shall not exclude any physician solely on the
 73 basis of a reprimand or censure from the Board of Medicine, so long as the physician otherwise meets
 74 the plan criteria established by the Department.

75 § 2.1-20.1. (Delayed effective date) Health and related insurance for state employees.

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 117 *existence of a preexisting condition. The cost of early intervention services shall not be applied to any*

contractual provision limiting the total amount of coverage paid by the insurer to or on behalf of the insured during the insured's lifetime.

C. Claims incurred during a fiscal year but not reported during that fiscal year shall be paid from such funds as shall be appropriated by law. Appropriations, premiums and other payments shall be deposited in the employee health insurance fund, from which payments for claims, premiums, cost containment programs and administrative expenses shall be withdrawn from time to time. The assets of the fund shall be held for the sole benefit of the employee health insurance program. The fund shall be held in the state treasury. Any interest on unused balances in the fund shall revert back to the credit of the fund.

D. For the purposes of this section, the term "state employee" means state employee as defined in § 51.1-124.3, employee as defined in § 51.1-201, the Governor, Lieutenant Governor and Attorney General, judge as defined in § 51.1-301 and judges, clerks and deputy clerks of district courts of the Commonwealth, interns and residents employed by the School of Medicine and Hospital of the University of Virginia, and interns, residents, and employees of the Medical College of Virginia Hospitals Authority as provided in § 23-50.15:25.

E. Provisions shall be made for retired employees to obtain coverage under the above plan. The Commonwealth may, but shall not be obligated to, pay all or any portion of the cost thereof.

F. Any self-insured group health insurance plan established by the Department of Personnel and Training which utilizes a network of preferred providers shall not exclude any physician solely on the basis of a reprimand or censure from the Board of Medicine, so long as the physician otherwise meets the plan criteria established by the Department.