

2013 DRAFTING REQUEST

Bill

Received: 2/26/2013 Received By: tdodge
Wanted: As time permits Same as LRB:
For: Chris Taylor (608) 266-5342 By/Representing: Grace Colas
May Contact: Drafter: tdodge
Subject: Insurance - health Addl. Drafters:
Extra Copies:

Submit via email: YES
Requester's email: Rep.Taylor@legis.wisconsin.gov
Carbon copy (CC) to: tamara.dodge@legis.wisconsin.gov
pam.kahler@legis.wisconsin.gov

Pre Topic:

No specific pre topic given

Topic:

Mandate coverage of all services provided under the Birth to Three program by all insurance.

Instructions:

See attached

Drafting History:

| <u>Vers.</u> | <u>Drafted</u> | <u>Reviewed</u> | <u>Typed</u> | <u>Proofed</u> | <u>Submitted</u> | <u>Jacketed</u> | <u>Required</u> |
|--------------|---------------------|----------------------|-----------------------|----------------|----------------------|----------------------|-----------------|
| /? | tdodge 8/21/2013 | | | _____ | | | |
| /P1 | tdodge 2/4/2014 | scalvin 8/30/2013 | jfrantze 8/30/2013 | _____ | lparisi 8/30/2013 | | State S&L |
| /1 | | scalvin 2/10/2014 | rschluet 2/10/2014 | _____ | lparisi 2/10/2014 | mbarman 2/27/2014 | State S&L |

FE Sent For:

At
Intro.

<END>

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FE Sent For: 1 SAC 02/10/2014 1 SAC 02/10/2014

<END>


2/10/14

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|--------------|----------------|-----------------------|---|----------------|------------------|-----------------|-----------------|
| /? | tdodge | /?1 sac 08/30/2013 |  | 8/30 | | | |

FE Sent For:

<END>

Dodge, Tamara

From: Colas, Grace
Sent: Monday, February 25, 2013 5:05 PM
To: Dodge, Tamara
Subject: Birth to Three Program

Hi Tamara,
Representative Chris Taylor would like a bill that mandates that all services under the Birth to Three program be covered by all insurance.

Thank you!
Grace Colas
Legislative Intern
Office of Representative Chris Taylor
76th Assembly District

Phone conference with Craig Trost
- cover the copays made by
parents (don't name all
in the services)
Program
- Note PPACA requirements
of payment for state
mandates



State of Wisconsin
2013 - 2014 LEGISLATURE



LRB-17390-00-PI
TJD:(.....
RMR^{sae}

In: 8/21/13

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

1 **AN ACT** ^{general} **relating to:** health insurance coverage of early intervention services.

Analysis by the Legislative Reference Bureau

This is a preliminary draft. An analysis will be provided in a subsequent version of this draft.

For further information see the **state and local** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

2 **SECTION 1.** 609.865 of the statutes is created to read:

3 **609.865 Early intervention services.** Defined network plans are subject
4 to s. 632.895 (12g).[✓]

5 **SECTION 2.** 632.895 (12g) of the statutes is created to read:

6 **632.895 (12g) EARLY INTERVENTION SERVICES.** (a) Every disability insurance
7 policy, and every self-insured health plan of the state or of a county, city, town,
8 village, or school district, that provides coverage of a child's outpatient health care

1 services, preventive treatments and services, or mental health services shall provide
2 coverage for any cost sharing or other payments that are the responsibility of a
3 parent or legal guardian for services provided through the program of early
4 intervention services under s. 51.44.

****NOTE: By my numbering of this subsection in s. 632.895, this requirement applies to every health care coverage plan offered by the state or the group insurance board; self-insured health plans of a city, village, town, county, and school district; and every voluntary nonprofit health care plan operated by a cooperative association as well as private health insurance policies.

5 (b) This subsection does not apply to any of the following:

6 1. A disability insurance policy that covers only certain specified diseases other
7 than mental health conditions.

8 2. A disability insurance policy, or self-insured health plan of the state or a
9 county, city, town, village, or school district, that provides only limited-scope dental
10 or vision benefits.

11 3. A Medicare replacement policy or a Medicare supplement policy.

12 **SECTION 3. Initial applicability.**

13 (1) This act first applies to all of the following:

14 (a) Except as provided in paragraphs (b) and (c), disability insurance policies
15 that are newly issued or renewed, and self-insured governmental health plans that
16 are newly established, extended, modified, or renewed, on the effective date of this
17 paragraph.

18 (b) Disability insurance policies covering employees who are affected by a
19 collective bargaining agreement containing provisions inconsistent with this act
20 that are newly issued or renewed on the earlier of the following:

21 1. The day on which the collective bargaining agreement expires.

**DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU**

LRB-1739/0dn

TJD:~)....

PI
changed
already

see

Date

To Representative Taylor:

Please note that under the Patient Protection and Affordable Care Act the state must pay for any state-mandated benefits covered in excess of those required to be covered by any plan offered through a health benefit exchange. If this requirement to cover the copayments for the Birth to Three services is in excess of the coverage required by the federal government, the state would be responsible for paying consumers and the federal government for the cost of this benefit. Should you have any questions about this or the draft, please contact me.

Tamara J. Dodge
Legislative Attorney
Phone: (608) 267-7380
E-mail: tamara.dodge@legis.wisconsin.gov

**DRAFTER'S NOTE
FROM THE
LEGISLATIVE REFERENCE BUREAU**

LRB-1739/P1dn
TJD:sac:jf

August 30, 2013

To Representative Taylor:

Please note that under the Patient Protection and Affordable Care Act the state must pay for any state-mandated benefits covered in excess of those required to be covered by any plan offered through a health benefit exchange. If this requirement to cover the copayments for the Birth to Three services is in excess of the coverage required by the federal government, the state would be responsible for paying consumers and the federal government for the cost of this benefit. Should you have any questions about this or the draft, please contact me.

Tamara J. Dodge
Legislative Attorney
Phone: (608) 267-7380
E-mail: tamara.dodge@legis.wisconsin.gov



State of Wisconsin
2013 - 2014 LEGISLATURE



LRB-1739/P1
TJD:sac:ff

In: 214

Due soon

RMR

PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION

gen act

1 **AN ACT to create** 609.865 and 632.895 (12g) of the statutes; **relating to:** health
2 insurance coverage of early intervention services.

Analysis by the Legislative Reference Bureau

Insert Analysis

This is a preliminary draft. An analysis will be provided in a subsequent version of this draft.

For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

3 **SECTION 1.** 609.865 of the statutes is created to read:
4 **609.865 Early intervention services.** Defined network plans are subject to
5 s. 632.895 (12g).

6 **SECTION 2.** 632.895 (12g) of the statutes is created to read:
7 **632.895 (12g) EARLY INTERVENTION SERVICES.** (a) Every disability insurance
8 policy, and every self-insured health plan of the state or of a county, city, town,

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 2 services, preventive treatments and services, or mental health services shall provide
 3 coverage for any cost sharing or other payments that are the responsibility of a
 4 parent or legal guardian for services provided through the program of early
 5 intervention services under s. 51.44.

****NOTE: By my numbering of this subsection in s. 632.895, this requirement applies to every health care coverage plan offered by the state or the group insurance board; self-insured health plans of a city, village, town, county, and school district; and every voluntary nonprofit health care plan operated by a cooperative association as well as private health insurance policies.

6 (b) This subsection does not apply to any of the following:

7 1. A disability insurance policy that covers only certain specified diseases other
 8 than mental health conditions.

9 2. A disability insurance policy, or self-insured health plan of the state or a
 10 county, city, town, village, or school district, that provides only limited-scope dental
 11 or vision benefits.

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 16 that are newly issued or renewed, and self-insured governmental health plans that
 17 are newly established, extended, modified, or renewed, on the effective date of this
 18 paragraph.

19 (b) Disability insurance policies covering employees who are affected by a
 20 collective bargaining agreement containing provisions inconsistent with this act
 21 that are newly issued or renewed on the earlier of the following:

22 1. The day on which the collective bargaining agreement expires.

1

INSERT ANALYSIS

This bill requires health insurance policies, known as disability insurance policies in the statutes, and health plans that provide coverage of a child's outpatient health care services, preventive treatments and services, or mental health services to cover any cost sharing or other payments that are the responsibility of a parent or legal guardian for services provided through the program of early intervention services. The coverage requirement under the bill applies to individual and group health insurance policies and plans, including defined network plans and voluntary nonprofit health care plans operated by cooperative associations, and to health care plans, including self-insured health plans offered by the state, cities, villages, towns, counties, and school districts. The coverage requirement does not apply to health insurance policies that cover only certain specified diseases other than mental health conditions, health insurance policies or self-insured governmental or school district health plans that provide only limited-scope dental or vision benefits, or Medicare replacement or supplement policies.

(END INSERT ANALYSIS)

Barman, Mike

From: Rep.Taylor
Sent: Thursday, February 27, 2014 11:18 AM
To: LRB.Legal
Subject: Draft Review: LRB -1739/1 Topic: Mandate coverage of all services provided under the Birth to Three program by all insurance.

Please Jacket LRB -1739/1 for the ASSEMBLY.