



## 1995 ASSEMBLY BILL 131

February 14, 1995 - Introduced by Representatives R. YOUNG, BALDWIN, L. YOUNG, BLACK, PLACHE, BOYLE, NOTESTEIN, BOCK, BELL and WASSERMAN, cosponsored by Senators MOORE, RISSER and CHVALA. Referred to Committee on Insurance, Securities and Corporate Policy.

1     **AN ACT to amend** 40.51 (8), 66.184, 120.13 (2) (g) and 185.983 (1) (intro.); and **to**  
2           **create** 185.981 (8m), 609.82 and 632.895 (11) of the statutes; **relating to:**  
3           requiring disability insurance policies to cover contraceptive articles and  
4           services.

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### *Analysis by the Legislative Reference Bureau*

This bill requires every health insurance policy (called “disability insurance policy” in the statutes), including health care plans offered by health maintenance organizations, preferred provider plans and the state, and every self-insured health plan of a school district, county, city or village, to provide coverage for contraceptive articles and services if the policy or plan covers outpatient health care services. Contraceptive articles include any drug or device that is approved by the federal food and drug administration (FDA) and prescribed by a licensed health care provider for use to prevent a pregnancy and any hormonal compound that is taken orally and approved by the FDA for use to prevent a pregnancy. A contraceptive article, however, does not include any drug or device that is prescribed for use in terminating a pregnancy of a woman who is known to be pregnant by the prescribing health care provider. Contraceptive services include physical examinations and medical counseling for the prescription or use of a contraceptive article and medical procedures performed to prevent a pregnancy. Specifically excluded from this coverage requirement are health insurance policies that cover only certain specified diseases, health care plans offered by limited service health organizations, medicare replacement and supplement policies and long-term care insurance policies. Deductibles and copayments that apply generally to the policy or plan may apply to contraceptive articles and services.

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

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

1           **SECTION 1.** 40.51 (8) of the statutes is amended to read:

2           40.51 (8) Every health care coverage plan offered by the state under sub. (6)  
3 shall comply with ss. 631.89, 631.90, 631.93 (2), 632.72 (2), 632.87 (3) to (5), 632.895  
4 (5m) and (8) to ~~(10)~~ (11) and 632.896.

5           **SECTION 2.** 66.184 of the statutes is amended to read:

6           **66.184 Self-insured health plans.** If a city, including a 1st class city, or a  
7 village provides health care benefits under its home rule power, or if a town provides  
8 health care benefits, to its officers and employes on a self-insured basis, the  
9 self-insured plan shall comply with ss. 49.493 (3) (d), 631.89, 631.90, 631.93 (2),  
10 632.87 (4) and (5), 632.895 (9) and ~~(10)~~ (11), 632.896, 767.25 (4m) (d) and 767.51  
11 (3m) (d).

12           **SECTION 3.** 120.13 (2) (g) of the statutes is amended to read:

13           120.13 (2) (g) Every self-insured plan under par. (b) shall comply with ss.  
14 49.493 (3) (d), 631.89, 631.90, 631.93 (2), 632.87 (4) and (5), 632.895 (9) and ~~(10)~~ (11),  
15 (11), 632.896, 767.25 (4m) (d) and 767.51 (3m) (d).

16           **SECTION 4.** 185.981 (8m) of the statutes is created to read:

17           185.981 (8m) A sickness care plan operated by a cooperative association is  
18 subject to s. 632.895 (11).

19           **SECTION 5.** 185.983 (1) (intro.) of the statutes is amended to read:

20           185.983 (1) (intro.) Every such voluntary nonprofit sickness care plan shall be  
21 exempt from chs. 600 to 646, with the exception of ss. 601.04, 601.13, 601.31, 601.41,

1 601.42, 601.43, 601.44, 601.45, 611.67, 619.04, 628.34 (10), 631.89, 631.93, 632.72  
2 (2), 632.775, 632.79, 632.795, 632.87 (2m), (3), (4) and (5), 632.895 (5), (9) and (10)  
3 to (11), 632.896 and 632.897 (10), subch. II of ch. 619 and chs. 609, 630, 635, 645 and  
4 646, but the sponsoring association shall:

5 **SECTION 6.** 609.82 of the statutes is created to read:

6 **609.82 Coverage of contraceptive articles and services.** Health  
7 maintenance organizations and preferred provider plans are subject to s. 632.895  
8 (11).

9 **SECTION 7.** 632.895 (11) of the statutes is created to read:

10 632.895 (11) CONTRACEPTIVE ARTICLES AND SERVICES. (a) In this subsection,  
11 “contraceptive article” means any drug, medicine, mixture, preparation, instrument,  
12 article or device of any nature that is approved by the federal food and drug  
13 administration for use to prevent a pregnancy and that is prescribed by a licensed  
14 health care provider for use to prevent a pregnancy, or any hormonal compound that  
15 is taken orally and that is approved by the federal food and drug administration for  
16 use to prevent a pregnancy. “Contraceptive article” does not include any drug,  
17 medicine, mixture, preparation, instrument, article or device of any nature  
18 prescribed for use in terminating the pregnancy of a woman who is known by the  
19 prescribing licensed health care provider to be pregnant.

20 (b) Every disability insurance policy, and every self-insured health plan of a  
21 county, city, village or school district, that provides coverage of outpatient health care  
22 services shall provide coverage for all of the following:

23 1. Contraceptive articles.

24 2. Medical services, including counseling and physical examinations, for the  
25 prescription or use of a contraceptive article or of a procedure to prevent a pregnancy.

