



## 2009 ASSEMBLY BILL 946

April 12, 2010 – Introduced by Representatives BLACK, SMITH, POPE-ROBERTS, MASON, BERCEAU, MILROY, GRIGSBY, HILGENBERG, BERNARD SCHABER and PASCH, cosponsored by Senators RISSER and COGGS. Referred to Committee on Insurance.

- 1     **AN ACT** *to create* 609.785 and 632.895 (13m) of the statutes; **relating to:** health  
2           insurance coverage of smoking cessation treatment and medications.

---

### ***Analysis by the Legislative Reference Bureau***

This bill requires a health care plan to provide coverage of smoking cessation treatment that is provided in conformity with recommendations set forth in the most recent Clinical Practice Guideline for treating tobacco use and dependence sponsored by the Public Health Service of the federal Department of Health and Human Services, as well as coverage of medications that are approved by the federal food and drug administration and prescribed for smoking cessation. The coverage requirement applies to both individual and group health insurance policies and plans, including defined network plans and plans offered by cooperative sickness care associations; to health care plans offered by the state to its employees, including a self-insured plan; and to self-insured health plans of counties, cities, towns, villages, and school districts. The requirement does not apply to limited benefit health care plans, such as dental or vision plans, or to health care plans that cover only specified diseases. The requirement may be subject to any limitations, exclusions, or cost-sharing provisions that apply generally under the policy or plan.

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:***

**ASSEMBLY BILL 946**

1           **SECTION 1.** 609.785 of the statutes is created to read:

2           **609.785 Coverage of smoking cessation treatment.** Defined network  
3 plans are subject to s. 632.895 (13m).

4           **SECTION 2.** 632.895 (13m) of the statutes is created to read:

5           **632.895 (13m) SMOKING CESSATION TREATMENT AND MEDICATION.** (a) In this  
6 subsection, “self-insured health plan” means a self-insured health plan of the state  
7 or a county, city, village, town, or school district.

8           (b) 1. Subject to subd. 2. and except as provided in par. (e), every disability  
9 insurance policy and every self-insured health plan shall provide coverage of  
10 smoking cessation treatment that is provided in conformity with the  
11 recommendations set forth in the most recent Clinical Practice Guideline for treating  
12 tobacco use and dependence sponsored by the public health service of the U.S.  
13 department of health and human services.

14           2. A disability insurance policy or self-insured health plan is not required to  
15 cover smoking cessation treatment more than 3 times for any insured individual.

16           (c) Except as provided in par. (e), every disability insurance policy and every  
17 self-insured health plan shall provide coverage of medications approved for use by  
18 the federal food and drug administration and prescribed for smoking cessation,  
19 including all of the following:

- 20           1. Nicotine gum.
- 21           2. Nicotine patch.
- 22           3. Nicotine nasal spray.
- 23           4. Nicotine inhaler.
- 24           5. Bupropion or its generic equivalent.
- 25           6. Varenicline or its generic equivalent.

**ASSEMBLY BILL 946**

1 (d) The coverage required under pars. (b) and (c) may be subject to any  
2 limitations, exclusions, or cost-sharing provisions that apply generally under the  
3 disability insurance policy or self-insured health plan.

4 (e) This subsection does not apply to any of the following:

5 1. A health care plan offered by a limited service health organization, as defined  
6 in s. 609.01 (3).

7 2. A health care plan offered by a preferred provider plan, as defined in s. 609.01  
8 (4), that is not a defined network plan, as defined in s. 609.01 (1b).

9 3. A disability insurance policy that covers only certain specified diseases.

10 **SECTION 3. Initial applicability.**

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

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

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

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

20 2. The day on which the collective bargaining agreement is extended, modified,  
21 or renewed.

22 (c) Self-insured governmental or school district health plans covering  
23 employees who are affected by a collective bargaining agreement containing  
24 provisions inconsistent with this act that are established, extended, modified, or  
25 renewed on the earlier of the following:

