

**2013 DRAFTING REQUEST**

**Bill**

Received: 11/28/2012 Received By: tdodge  
Wanted: As time permits Same as LRB:  
For: Alberta Darling (608) 266-5830 By/Representing: Bob Delaporte  
May Contact: Drafter: tdodge  
Subject: Insurance - health Addl. Drafters:  
Extra Copies:

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

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**Pre Topic:**

No specific pre topic given

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**Topic:**

Copayments, deductibles, or coinsurance for oral chemotherapy and injected or intravenous chemotherapy

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**Instructions:**

See attached.

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**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 12/5/2012	evinz 12/14/2012	phenry 12/14/2012	_____			
/1				_____	mbarman 12/14/2012	srose 2/4/2013	State S&L

FE Sent For:

→ At Intro.

<END>

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/?	tdodge	1 rev 12/12/12	12/12/12 ph	✓			

FE Sent For:

<END>

**Dodge, Tamara**

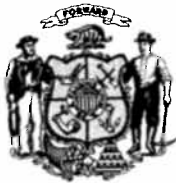
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**From:** Delaporte, Bob  
**Sent:** Tuesday, November 27, 2012 12:57 PM  
**To:** Dodge, Tamara  
**Subject:** 2011 SB 101

Senator Darling would like 2011 SB 101 redrafted for the 2013 session....the oral chemotherapy parity bill.

Thank you in advance

-Bob Delaporte  
State Senator Alberta Darling's office



State of Wisconsin  
2011 - 2012 LEGISLATURE



0647/1

LRB-1558/1

TJD:jlrs

Leev

RMNR

In 12/5/2012

2011 SENATE BILL 101

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PWF

May 24, 2011 - Introduced by Senators DABLING, WANGGAARD, CARPENTER, SCHULTZ, OLSEN, S. COGGS, C. LARSON, KAPANKE, LASSA, HARSDFORF, ERPENBACH, VINEHOUT, TAYLOR, HOLPERIN and WIRCH, cosponsored by Representatives STRACHOTA, BARCA, WYNN, STONE, RICHARDS, JACQUE, PASCH, BERNIER, SINICKI, THIESFELDT, HEBL, VRUWINK, A. OTT, CLARK, YOUNG, TRANEL, FIELDS, HINTZ, RIPP, MILROY, ZEPNICK, KAUFERT, BERCEAU, KERKMAN, BROOKS and KRUG. Referred to Committee on Health.

SADJ  
ref J

1 AN ACT <sup>repen</sup> to amend 40.51 (8), 40.51 (8m), 66.0137 (4), 120.13 (2) (g) and 185.983  
2 (1) (intro.); and to create 609.837 and 632.867 of the statutes; relating to:  
3 copayments, deductibles, or coinsurance for oral chemotherapy and injected or  
4 intravenous chemotherapy.

**Analysis by the Legislative Reference Bureau**

This bill prohibits health insurance policies, and self-insured governmental and school district health plans, that cover injected or intravenous and oral chemotherapy from requiring the insured to pay a higher copayment, deductible, or coinsurance for oral chemotherapy than is required for injected or intravenous chemotherapy, regardless of the formulation or benefit category determination by the policy or plan. A health insurance policy or self-insured governmental or school district health plan may not comply with that prohibition by increasing the copayment, deductible, or coinsurance for intravenous or injected chemotherapy that is covered under the policy or plan.

The requirements of the bill apply to individual and group health insurance policies, including limited service health organizations, preferred provider plans, defined network plans, and cooperative associations' health care plans; to health care plans, including a self-insured plan, offered by the state to its employees; and to self-insured health plans of a city, town, village, county, or school district.

**SENATE BILL 101**

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<sup>\*</sup> (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), 631.95, 632.72 (2), 632.746 (1) to (8)  
4 and (10), 632.747, 632.748, 632.798, 632.83, 632.835, 632.85, 632.853, 632.855,  
5 632.867, 632.87 (3) to (6), 632.885, 632.89, 632.895 (5m) and (8) to (17), and 632.896.

6           **SECTION 2.** 40.51<sup>\*</sup> (8m) of the statutes is amended to read:

7           40.51 (8m) Every health care coverage plan offered by the group insurance  
8 board under sub. (7) shall comply with ss. 631.95, 632.746 (1) to (8) and (10), 632.747,  
9 632.748, 632.798, 632.83, 632.835, 632.85, 632.853, 632.855, 632.867, 632.885,  
10 632.89, and 632.895 (11) to (17).

11           **SECTION 3.** 66.0137<sup>\*</sup> (4) of the statutes is amended to read:

12           66.0137 (4) SELF-INSURED HEALTH PLANS. If a city, including a 1st class city, or  
13 a village provides health care benefits under its home rule power, or if a town  
14 provides health care benefits, to its officers and employees on a self-insured basis,  
15 the self-insured plan shall comply with ss. 49.493 (3) (d), 631.89, 631.90, 631.93 (2),  
16 632.746 (10) (a) 2. and (b) 2., 632.747 (3), 632.798, 632.85, 632.853, 632.855, 632.867,  
17 632.87 (4), (5), and (6), 632.885, 632.89, 632.895 (9) to (17), 632.896, and 767.513 (4).

18           **SECTION 4.** 120.13<sup>\*</sup> (2) (g) of the statutes is amended to read:

19           120.13 (2) (g) Every self-insured plan under par. (b) shall comply with ss.  
20 49.493 (3) (d), 631.89, 631.90, 631.93 (2), 632.746 (10) (a) 2. and (b) 2., 632.747 (3),

**SENATE BILL 101**

1 632.798, 632.85, 632.853, 632.855, <sup>✓</sup>632.867, 632.87 (4), (5), and (6), 632.885, 632.89,  
2 632.895 (9) to (17), 632.896, and 767.513 (4).

3 **SECTION 5.** 185.983<sup>✓</sup> (1) (intro.) of the statutes is amended to read:

4 185.983 (1) (intro.) Every voluntary nonprofit health care plan operated by a  
5 cooperative association organized under s. 185.981 shall be exempt from chs. 600 to  
6 646, with the exception of ss. 601.04, 601.13, 601.31, 601.41, 601.42, 601.43, 601.44,  
7 601.45, 611.26, 611.67, 619.04, 623.11, 623.12, 628.34 (10), 631.17, 631.89, 631.93,  
8 631.95, 632.72 (2), 632.745 to 632.749, 632.775, 632.79, 632.795, 632.798, 632.85,  
9 632.853, 632.855, ~~632.867~~<sup>✓</sup>, 632.87 (2), (2m), (3), (4), (5), and (6), 632.885, 632.89,  
10 632.895 (5) and (8) to (17), 632.896, and 632.897 (10) and chs. 609, 620, 630, 635, 645,  
11 and 646, but the sponsoring association shall:

12 **SECTION 6.** 609.837<sup>✓</sup> of the statutes is created to read:

13 **609.837 Copayment equality for oral and injected chemotherapy.**

14 Limited service health organizations, preferred provider plans, and defined network  
15 plans are subject to s. 632.867<sup>✓</sup>.

16 **SECTION 7.** 632.867<sup>✓</sup> of the statutes is created to read:

17 **632.867 Oral and injected chemotherapy. (1) DEFINITIONS.** In this section<sup>✓</sup>:

18 (a) "Chemotherapy" means drugs and biologics that kill cancer cells directly,  
19 including antineoplastics, biologic response modifiers, hormone therapy, and  
20 monoclonal antibodies, and that are used to do any of the following:

21 1. Cure a specific cancer.

22 2. Control tumor growth when cure is not possible.

23 3. Shrink tumors before surgery or radiation therapy.

24 4. Destroy microscopic cancer cells that may be present after a tumor is  
25 removed by surgery to prevent a cancer recurrence.

**SENATE BILL 101**

1 (b) "Disability insurance policy" has the meaning given in s. 632.895 (1) (a).

2 (c) "Self-insured health plan" has the meaning given in s. 632.85 (1) (c).

3 **(2) COPAYMENT, DEDUCTIBLE, OR COINSURANCE REQUIREMENTS; LIMITATIONS.** (a) A  
4 disability insurance policy that covers injected or intravenous chemotherapy and  
5 oral chemotherapy, or a self-insured health plan that covers injected or intravenous  
6 chemotherapy and oral chemotherapy, may not require a higher copayment,  
7 deductible, or coinsurance amount for oral chemotherapy than it requires for  
8 injected or intravenous chemotherapy, regardless of the formulation or benefit  
9 category determination by the policy or plan.

10 (b) A disability insurance policy or a self-insured health plan may not comply  
11 with par. (a) by increasing the copayment, deductible, or coinsurance amount  
12 required for injected or intravenous chemotherapy that is covered under the policy  
13 or plan.

14 **SECTION 8. Initial applicability.**

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

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

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

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

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





**Rose, Stefanie**

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**From:** Evenson, Andrew  
**Sent:** Monday, February 04, 2013 11:27 AM  
**To:** LRB.Legal  
**Subject:** Draft Review: LRB -0647/1 Topic: Copayments, deductibles, or coinsurance for oral chemotherapy and injected or intravenous chemotherapy

Please Jacket LRB -0647/1 for the SENATE.