



**SENATE AMENDMENT 2,  
TO SENATE BILL 648**

March 18, 2014 – Offered by Senator ERPENBACH.

1 At the locations indicated, amend the bill as follows:

2 **1.** Page 1, line 4: after “state” insert “and copayments, deductibles, or  
3 coinsurance for oral chemotherapy and injected or intravenous chemotherapy”.

4 **2.** Page 2, line 1: before that line insert:

5 “SECTION 1g. 40.51 (8) of the statutes is amended to read:

6 40.51 (8) Every health care coverage plan offered by the state under sub. (6)  
7 shall comply with ss. 631.89, 631.90, 631.93 (2), 631.95, 632.72 (2), 632.746 (1) to (8)  
8 and (10), 632.747, 632.748, 632.798, 632.83, 632.835, 632.85, 632.853, 632.855,  
9 632.867, 632.87 (3) to (6), 632.885, 632.89, 632.895 (5m) and (8) to (17), and 632.896.

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

11 40.51 (8m) Every health care coverage plan offered by the group insurance  
12 board under sub. (7) shall comply with ss. 631.95, 632.746 (1) to (8) and (10), 632.747,

1 632.748, 632.798, 632.83, 632.835, 632.85, 632.853, 632.855, 632.867, 632.885,  
2 632.89, and 632.895 (11) to (17).

3 **SECTION 1j.** 66.0137 (4) of the statutes is amended to read:

4 66.0137 (4) SELF-INSURED HEALTH PLANS. If a city, including a 1st class city, or  
5 a village provides health care benefits under its home rule power, or if a town  
6 provides health care benefits, to its officers and employees on a self-insured basis,  
7 the self-insured plan shall comply with ss. 49.493 (3) (d), 631.89, 631.90, 631.93 (2),  
8 632.746 (10) (a) 2. and (b) 2., 632.747 (3), 632.798, 632.85, 632.853, 632.855, 632.867,  
9 632.87 (4), (5), and (6), 632.885, 632.89, 632.895 (9) to (17), 632.896, and 767.513 (4).

10 **SECTION 1k.** 120.13 (2) (g) of the statutes is amended to read:

11 120.13 (2) (g) Every self-insured plan under par. (b) shall comply with ss.  
12 49.493 (3) (d), 631.89, 631.90, 631.93 (2), 632.746 (10) (a) 2. and (b) 2., 632.747 (3),  
13 632.798, 632.85, 632.853, 632.855, 632.867, 632.87 (4), (5), and (6), 632.885, 632.89,  
14 632.895 (9) to (17), 632.896, and 767.513 (4).

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

16 185.983 (1) (intro.) Every voluntary nonprofit health care plan operated by a  
17 cooperative association organized under s. 185.981 shall be exempt from chs. 600 to  
18 646, with the exception of ss. 601.04, 601.13, 601.31, 601.41, 601.42, 601.43, 601.44,  
19 601.45, 611.26, 611.67, 619.04, 623.11, 623.12, 628.34 (10), 631.17, 631.89, 631.93,  
20 631.95, 632.72 (2), 632.745 to 632.749, 632.775, 632.79, 632.795, 632.798, 632.85,  
21 632.853, 632.855, 632.867, 632.87 (2), (2m), (3), (4), (5), and (6), 632.885, 632.89,  
22 632.895 (5) and (8) to (17), 632.896, and 632.897 (10) and chs. 609, 620, 630, 635, 645,  
23 and 646, but the sponsoring association shall.”.

24 **3.** Page 2, line 1: delete “**SECTION 1**” and substitute “**SECTION 1p**”.

1           **4.** Page 4, line 21: after that line insert:

2           “**SECTION 2n.** 609.837 of the statutes is created to read:

3           **609.837 Copayment equality for oral and injected chemotherapy.**

4           Limited service health organizations, preferred provider plans, and defined network  
5           plans are subject to s. 632.867.

6           **SECTION 2p.** 632.867 of the statutes is created to read:

7           **632.867 Oral and injected chemotherapy. (1) DEFINITIONS.** In this section:

8           (a) “Chemotherapy” means drugs and biologics that kill cancer cells directly,  
9           including antineoplastics, biologic response modifiers, hormone therapy, and  
10           monoclonal antibodies, and that are used to do any of the following:

- 11           1. Cure a specific cancer.
- 12           2. Control tumor growth when cure is not possible.
- 13           3. Shrink tumors before surgery or radiation therapy.
- 14           4. Destroy microscopic cancer cells that may be present after a tumor is  
15           removed by surgery to prevent a cancer recurrence.

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

17           (c) “Self-insured health plan” has the meaning given in s. 632.85 (1) (c).

18           **(2) COPAYMENT, DEDUCTIBLE, OR COINSURANCE REQUIREMENTS; LIMITATIONS.** (a) A  
19           disability insurance policy that covers injected or intravenous chemotherapy and  
20           oral chemotherapy, or a self-insured health plan that covers injected or intravenous  
21           chemotherapy and oral chemotherapy, may not require a higher copayment,  
22           deductible, or coinsurance amount for oral chemotherapy than it requires for  
23           injected or intravenous chemotherapy, regardless of the formulation or benefit  
24           category determination by the policy or plan.

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

5 **5.** Page 5, line 13: after that line insert:

6 **“SECTION 5n. Initial applicability.**

7 (1c) The treatment of sections 40.51 (8) and (8m), 66.0137 (4), 120.13 (2) (g),  
8 185.983 (1) (intro.), 609.837, and 632.867 of the statutes first applies to all of the  
9 following:

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

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

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

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

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

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

