2017 ASSEMBLY BILL 1018

March 12, 2018 - Introduced by Representatives ANDERSON, STUCK, BERCEAU, ZAMARRIPA, SARGENT, SPREITZER, SINICKI, SUBECK, BROSTOFF and POPE, cosponsored by Senators ERPENBACH, VINEHOUT, RISSER and LARSON. Referred to Committee on Insurance.

AN ACT to create 609.896 and 632.895 (16w) of the statutes; relating to:

coverage of tests and ancillary procedures for services for which health insurance coverage is mandated.

Analysis by the Legislative Reference Bureau

This bill requires health insurance policies, known in the bill as disability insurance policies, and governmental self-insured health plans to cover tests and ancillary procedures needed to provide a product or service that the policy or plan is required to cover under state law. Examples of products or services that policies and plans are required to cover under current state law include home care, skilled nursing care, kidney disease treatment, equipment and supplies for diabetes treatment, mammograms, maternity coverage, lead poisoning screening, temporomandibular disorder treatment, autism spectrum disorder treatment, breast reconstruction, immunizations, hearing aids and cochlear implants, colorectal cancer screening, and contraceptives.

This proposal may contain a health insurance mandate requiring a social and financial impact report under s. 601.423, stats.

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

SECTION 1. 609.896 of the statutes is created to read:
609.896 Tests and ancillary procedures. Defined network plans and preferred provider plans are subject to s. 632.895 (16w).

SECTION 2. 632.895 (16w) of the statutes is created to read:

632.895 (16w) Tests and ancillary procedures. (a) Every disability insurance policy and every self-insured health plan of the state or a county, city, village, town, or school district that is required to cover a product or service under this section shall provide coverage of any tests or ancillary procedures necessary to provide that product or service under this section.

(b) The coverage required under this subsection may be subject to any limitations, exclusions, or cost-sharing provisions that apply generally under the disability insurance policy or self-insured health plan.

(END)