
SUBSTITUTE SENATE BILL 5512

State of Washington

56th Legislature

1999 Regular Session

By Senate Committee on Health & Long-Term Care (originally sponsored by Senators Costa, Winsley, Kline, Patterson, Gardner, Prentice, Long, Goings, Snyder, Fraser, Brown, Kohl-Welles, Jacobsen, Spanel, Fairley, Haugen, Wojahn, Thibaudeau, Loveland, Bauer, Eide, B. Sheldon, McAuliffe, T. Sheldon, Heavey and Shin)

Read first time 02/22/1999.

1 AN ACT Relating to contraceptive health care benefits; adding new
2 sections to chapter 48.43 RCW; and creating a new section.

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

4 NEW SECTION. **Sec. 1.** The legislature finds that: (1) Over half
5 of all pregnancies are unintended; (2) by reducing rates of unintended
6 pregnancy, contraceptives help reduce the need for abortion; (3)
7 unintended pregnancies lead to higher rates of infant mortality, low
8 birth weight, and maternal morbidity, and threaten the economic
9 viability of families; (4) contraceptive services are part of basic
10 health care, allowing families to both adequately space desired
11 pregnancies and avoid unintended pregnancy; (5) many health carriers
12 cover prescription drugs and devices but exclude prescription
13 contraceptives and contraceptive devices; (6) women of child-bearing
14 age spend significantly more than men on out-of-pocket health care
15 costs, with contraceptives and reproductive health care services
16 accounting for most of this disparity; (7) lack of contraceptive
17 coverage in health plans places many effective forms of contraceptives
18 beyond the financial reach of many women, leading to unintended
19 pregnancies; and (8) the ability to plan her childbearing is central to

1 a woman's ability to participate on an equal basis in education and
2 employment.

3 The legislature intends to reduce the number of unintended
4 pregnancies and ensure access to contraceptive services in health plans
5 that cover prescription drugs and outpatient health services. The
6 legislature also intends to further the goal of eliminating sex
7 discrimination in health benefits for women.

8 NEW SECTION. **Sec. 2.** A new section is added to chapter 48.43 RCW
9 to read as follows:

10 (1) The definitions in this subsection apply throughout this
11 section unless the context clearly requires otherwise.

12 (a) "Prescription contraceptive drugs and devices" means
13 prescription contraceptive drugs and devices approved by the federal
14 food and drug administration, including oral contraceptives,
15 intrauterine devices (IUDs), injectables, hormonal implants,
16 diaphragms, cervical caps, and emergency contraception.

17 (b) "Outpatient contraceptive services" means services necessary
18 for the effective use of contraception, including family planning
19 consultations, examinations, procedures for inserting, removing, or
20 dispensing prescription contraceptive methods, and laboratory services
21 provided on an outpatient basis and related to the use of contraceptive
22 methods, including natural family planning.

23 (2) Health carriers shall not exclude or restrict an enrollee's
24 access to:

25 (a) Prescription contraceptive drugs and devices approved by the
26 federal food and drug administration if the enrollee's health plan
27 provides benefits for prescription drugs; or

28 (b) Outpatient contraceptive services, if the enrollee's health
29 plan provides benefits for outpatient health services.

30 (3) Except as provided in subsection (4) of this section, a health
31 carrier shall not create or impose disincentives for utilization of the
32 benefits required by subsection (2) of this section.

33 (4) Nothing in this section shall be construed as:

34 (a) Preventing a health carrier from imposing deductibles,
35 coinsurance, other cost-sharing requirements, or other limitations in
36 relation to providing prescription contraceptive drugs and devices, or
37 outpatient contraceptive services, provided that such deductible,
38 coinsurance, other cost-sharing requirement, or other limitation is not

1 greater than or different from the deductible, coinsurance, other cost-
2 sharing requirement, or other limitation for other prescription drugs,
3 devices, or outpatient health care services covered under the plan;

4 (b) Requiring a health carrier to cover experimental or
5 investigative prescription contraceptive drugs and devices, or
6 outpatient contraceptive services, except to the extent that a plan
7 provides coverage for other experimental or investigative prescription
8 drugs, devices, or outpatient health care services; or

9 (c) Allowing a health carrier to limit a health care provider's
10 ability to prescribe contraceptive drugs for medical purposes such as
11 decreasing risk of ovarian cysts or eliminating symptoms of menopause.

12 (5) This section applies to health plans issued or renewed on or
13 after the effective date of this section.

14 NEW SECTION. **Sec. 3.** A new section is added to chapter 48.43 RCW
15 to read as follows:

16 (1) The legislature recognizes that every individual possesses a
17 fundamental right to exercise their religious beliefs. The legislature
18 further recognizes that in developing public policy, conflicting
19 religious beliefs must be respected. Therefore, while recognizing the
20 right of religious objection to participating in the provision of
21 contraceptive health care services, the state shall also recognize the
22 right of individuals to access the prescription contraceptive drugs and
23 devices and outpatient contraceptive health care services required by
24 this section and section 2 of this act.

25 (2)(a) No individual health care provider, religiously sponsored
26 health carrier, or health care facility may be required by law or
27 contract in any circumstances to participate in the provision of or
28 payment for prescription contraceptive drugs and devices and outpatient
29 contraceptive services if they object to doing so for reason of
30 conscience or religion. No person may be discriminated against in
31 employment or professional privileges because of such an objection.

32 (b) The provisions of (a) of this subsection are not intended to
33 result in an enrollee being denied timely access to prescription
34 contraceptive drugs and devices and outpatient contraceptive services.

35 (3)(a) Health carriers that are not religiously sponsored shall
36 allow enrollees whose health care provider or plan-designated health
37 care facility declines to participate in the provision of contraceptive
38 health care services to use another health care provider or health care

1 facility with whom the plan shall contract to ensure timely access to
2 qualified providers within the local community.

3 (b) Each religiously sponsored health carrier that invokes the
4 religious exemption provided under subsection (2)(a) of this section
5 shall: (i) Provide written notice to enrollees upon enrollment with
6 the plan, listing the contraceptive health services they refuse to
7 cover for reason of conscience or religion; (ii) provide written
8 information describing how an enrollee may directly access prescription
9 drugs and devices and outpatient contraceptive health care services in
10 an expeditious manner; and (iii) ensure that enrollees refused services
11 under this section have prompt access to the information developed
12 under (b)(ii) of this subsection.

13 (4)(a) No individual or religious organization may be required to
14 purchase coverage for contraceptive health care services if they object
15 to doing so for reason of conscience or religion. The provision of
16 this subsection shall not result in an enrollee being denied coverage
17 of, and timely access to, prescription contraceptive drugs and devices
18 and outpatient contraceptive services.

19 (b) Health carriers that are not religiously sponsored shall allow
20 religious organizations opposed to contraceptive health services to
21 refuse to pay for coverage of such benefits in a group plan. Health
22 carriers shall allow enrollees in a health plan exempted under this
23 subsection to directly purchase coverage of prescription drugs and
24 devices and outpatient contraceptive services from the carrier. The
25 enrollee's cost of purchasing such coverage shall not exceed the
26 enrollee's pro rata share of the price the group purchaser would have
27 paid for such coverage had the group plan not invoked a religious
28 exemption.

29 (5) Nothing in this section requires a health carrier, health care
30 facility, or health care provider to provide any health care services
31 without appropriate payment of premium or fee.

32 NEW SECTION. **Sec. 4.** If any provision of this act or its
33 application to any person or circumstance is held invalid, the
34 remainder of the act or the application of the provision to other
35 persons or circumstances is not affected.

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