

1 AN ACT relating to coverage for hormonal contraceptives.

2 *Be it enacted by the General Assembly of the Commonwealth of Kentucky:*

3 ➔SECTION 1. A NEW SECTION OF SUBTITLE 17A OF KRS CHAPTER 304
4 IS CREATED TO READ AS FOLLOWS:

5 *(1) For the purposes of this section, "hormonal contraceptive" means a medication*
6 *taken to prevent pregnancy by means of ingestion of hormones, including*
7 *medication containing estrogen or progesterone, that is self-administered,*
8 *requires a prescription, and is approved by the United States Food and Drug*
9 *Administration for that purpose.*

10 *(2) Any health benefit plan that is amended, renewed, or delivered on or after the*
11 *effective date of this Act that provides coverage for hormonal contraceptives:*

12 *(a) Shall cover up to a twelve (12) month supply of hormonal contraceptives*
13 *when dispensed or furnished at one (1) time for an insured by a provider or*
14 *pharmacy, or any other person or location licensed or otherwise authorized*
15 *to dispense prescription drugs; and*

16 *(b) Shall not impose utilization controls or other forms of medical management*
17 *limiting the supply of hormonal contraceptives that may be dispensed or*
18 *furnished by a provider or pharmacy, or at a location licensed or otherwise*
19 *authorized to dispense drugs or supplies, to an amount that is less than a*
20 *twelve (12) month supply.*

21 *(3) Nothing in this section shall:*

22 *(a) Require a provider to prescribe, dispense, or furnish twelve (12) months of*
23 *self-administered hormonal contraceptives at one (1) time;*

24 *(b) Exclude coverage for hormonal contraceptives as prescribed by a provider,*
25 *acting within his or her scope of practice, for reasons other than*
26 *contraceptive purposes, including but not limited to decreasing the risk of*
27 *ovarian cancer, eliminating symptoms of menopause, or for contraception*

1 that is necessary to preserve the life or health of an insured; or
2 (c) Require an insurer to cover hormonal contraceptives provided by a provider
3 or pharmacy, or at a location licensed or otherwise authorized to dispense
4 drugs or supplies, that is not within the health benefit plan's network,
5 except as may be otherwise required by state law or the health benefit plan's
6 policies governing out-of-network coverage.

7 ➔Section 2. This Act takes effect January 1, 2019.