



41 State St., Suite 900
Albany, NY 12207
518.462.2293
www.nyhpa.org

Legislative MEMORANDUM

FOR IMMEDIATE RELEASE: JANUARY 10, 2019

Re: S.659/A.585 (Salazar/Cahill) – AN ACT to amend the insurance law, the social services law, the education law and the public health law, in relation to requiring health insurance policies to include coverage of all FDA-approved contraceptive drugs, devices, and products, as well as voluntary sterilization procedures, contraceptive education and counseling, and related follow up services and prohibiting a health insurance policy from imposing any cost-sharing requirements or other restrictions or delays with respect to this coverage

This legislation, A.585, relates to coverage of contraceptive drugs, devices, and products, as well as medical service and procedures, education and counseling, and restrictions on cost-sharing. The New York Health Plan Association (HPA) and our member health plans recognize the importance of contraceptive coverage, providing a broad range of coverage options, and that the type of contraceptive a woman chooses is a personal one.

Many of the provisions included in A.585 have already been adopted as part of the Department of Financial Services' (DFS) regulations in 2017, including that health plans provide emergency contraception when prescribed through a prescription or a non-patient specific order; allow for a year's worth of contraception at no cost to the consumer; and prohibit cost-sharing for contraceptives. The legislation would add several other provisions, including requiring coverage of male contraceptives, such as condoms, without any cost-sharing or limits, sterilization without any cost-sharing, and require coverage of contraceptive drugs for reasons other than contraceptive purposes.

As part of its rulemaking process, DFS had considered the inclusion of male contraception but chose to exclude it, noting that,

*"a male contraceptive coverage requirement would constitute a new mandate for which the State would be required to defray the cost in full for small group and individual plans. Additionally, unlike in the field of female contraception, where the Department's amendment is consistent with public policy adopted by the Legislature in the Women's Health and Wellness Act and the existing Federal government's rules under the ACA, there is no similar state or federal pronouncement of public policy for the coverage of male contraception."*¹

Additionally, the bill would require coverage of sterilization procedures without patient cost-share. This would create a special class of coverage for certain medical procedures and sets a precedent that physicians or consumers could look to apply to other procedures.

If such provisions remain in the final bill, it is critical to maintain the January 1, 2020 effective date. This is essential to ensure the necessary time for DFS to provide guidance to the marketplace and for health plans to operationalize those requirements, to avoid confusion for consumers, health plans, or providers.

The New York Health Plan Association represents 26 managed care health plans that provide comprehensive health care services to nearly 8 million New Yorkers.

¹ NYS Register, June 28, 2017. Department of Financial Services, Notice of Adoption. Page 13