
Health Care & Wellness Committee

ESSB 5039

Brief Description: Concerning insurance coverage of tobacco cessation treatment in the preventative benefit required under the federal law.

Sponsors: Senate Committee on Health & Long-Term Care (originally sponsored by Senators Murray, Keiser, Hatfield, Pridemore, Conway and Chase).

<p style="text-align: center;">Brief Summary of Engrossed Substitute Bill</p> <ul style="list-style-type: none">• Requires health carriers to provide the preventive services mandated by the federal Patient Protection and Affordable Care Act.• Requires health carriers to provide coverage for tobacco cessation treatment.
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Hearing Date: 3/14/11

Staff: Jim Morishima (786-7191).

Background:

Under the federal Patient Protection and Affordable Care Act (PPACA), group or individual health insurers must provide coverage with no cost sharing requirements for a variety of preventive health services, including:

- immunizations recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention;
- with respect to infants, children, and adolescents, evidence-informed preventive care and screening provided in the comprehensive guidelines supported by the Health Resources and Services Administration;
- with respect to women, additional preventive care and screenings provided in the comprehensive guidelines supported by the Health Resources and Services Administration; and
- evidence-based recommendations rated "A" or "B" in the current recommendations of the United States Preventive Services Task Force (USPSTF), which include tobacco use counseling and interventions.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Summary of Bill:

For health plans issued, amended, renewed, or delivered on or after September 23, 2010, each group or individual health plan must comply with the requirements of the PPACA with respect to covering preventive health services without imposing cost sharing.

For health plans issued, amended, renewed, or delivered on or after January 1, 2012, each group or individual plan must cover a minimum of two courses of treatment in a 12-month period for all tobacco cessation treatments rated "A" or "B" by the USPSTF. The treatments must include counseling and over-the-counter medication and prescription pharmacotherapy approved by the federal Food and Drug Administration (FDA) available in the plan's formulary or preferred drug list. The coverage is only available upon the order of an authorized provider, but does not preclude a health plan from allowing enrollees to access tobacco services on a self-referral basis. A course of treatment means: (a) at least four sessions of counseling, which may be telephonic, group, or individual, with each session lasting at least 10 minutes; or (b) the duration of treatment with prescription or over-the-counter medications approved by the FDA.

The requirements related to tobacco cessation expire on December 31, 2013, or the date the state determines that the requirements will result in the state assuming additional costs under the PPACA.

Appropriation: None.

Fiscal Note: Requested on March 11, 2011.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.