

SHB 1638 - S AMD 223
By Senator Keiser

NOT CONSIDERED

1 On page 6, after line 13, insert the following:

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

4 (1) Except as provided in subsection (5) of this section, if a
5 health plan issued or renewed on or after January 1, 2014, provides
6 coverage for maternity care or services, the health plan must also
7 provide a covered person with substantially equivalent coverage to
8 permit the voluntary termination of a pregnancy.

9 (2)(a) Except as provided in (b) of this subsection, a health plan
10 subject to subsection (1) of this section may not limit in any way a
11 woman's access to services related to the voluntary termination of a
12 pregnancy.

13 (b)(i) Coverage for the voluntary termination of a pregnancy may be
14 subject to terms and conditions generally applicable to the health
15 plan's coverage of maternity care or services, including applicable
16 cost sharing.

17 (ii) A health plan is not required to cover abortions that would be
18 unlawful under RCW 9.02.120.

19 (3) Nothing in this section may be interpreted to limit in any way
20 a woman's constitutionally or statutorily protected right to
21 voluntarily terminate a pregnancy.

22 (4) This section does not, pursuant to 42 U.S.C. Sec. 18054(a)(6),
23 apply to a multistate plan that does not provide coverage for the
24 voluntary termination of a pregnancy.

25 (5) If the application of this section to a health plan results in
26 noncompliance with federal requirements that are a prescribed condition
27 to the allocation of federal funds to the state, this section is
28 inapplicable to the plan to the minimum extent necessary for the state
29 to be in compliance. The inapplicability of this section to a specific

1 health plan under this subsection does not affect the operation of this
2 section in other circumstances.

3 (6) The legislature recognizes that every individual possesses a
4 fundamental right to exercise their religious beliefs and conscience.
5 The legislature further recognizes that in developing public policy,
6 conflicting religious and moral beliefs must be respected. Therefore,
7 while recognizing the right of conscientious objection to participating
8 in specific health services, the state shall also recognize the right
9 of individuals enrolled with plans containing the basic health plan
10 services to receive the full range of services covered under the plan.

11 (7)(a) No individual health care provider, religiously sponsored
12 health carrier, or health care facility may be required by law or
13 contract in any circumstances to participate in the provision of or
14 payment for a specific service if they object to so doing for reason of
15 conscience or religion. No person may be discriminated against in
16 employment or professional privileges because of such objection.

17 (b) The provisions of subsections (6) through (9) of this section
18 are not intended to result in an enrollee being denied timely access to
19 any service included in the basic health plan services. Each health
20 carrier shall:

21 (i) Provide written notice to enrollees, upon enrollment with the
22 plan, listing services that the carrier refuses to cover for reason of
23 conscience or religion;

24 (ii) Provide written information describing how an enrollee may
25 directly access services in an expeditious manner; and

26 (iii) Ensure that enrollees refused services under this section
27 have prompt access to the information developed pursuant to (b)(ii) of
28 this subsection.

29 (c) The insurance commissioner shall establish by rule a mechanism
30 or mechanisms to recognize the right to exercise conscience while
31 ensuring enrollees timely access to services and to assure prompt
32 payment to service providers.

33 (8)(a) No individual or organization with a religious or moral
34 tenet opposed to a specific service may be required to purchase
35 coverage for that service or services if they object to doing so for
36 reason of conscience or religion.

37 (b) The provisions of subsections (6) through (9) of this section
38 shall not result in an enrollee being denied coverage of, and timely

1 access to, any service or services excluded from their benefits package
2 as a result of their employer's or another individual's exercise of the
3 conscience clause in (a) of this subsection.

4 (c) The insurance commissioner shall define by rule the process
5 through which health carriers may offer the basic health plan services
6 to individuals and organizations identified in (a) and (b) of this
7 subsection in accordance with the provisions of subsection (7)(c) of
8 this section.

9 (9) Nothing in subsections (6) through (8) of this section requires
10 a health carrier, health care facility, or health care provider to
11 provide any health care services without appropriate payment of premium
12 or fee."

13 Renumber the remaining sections consecutively and correct any
14 internal references accordingly.

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NOT CONSIDERED

15 On page 1, line 4 of the title, after "48.175.020;" insert "adding
16 a new section to chapter 48.43 RCW;"

EFFECT: Requires certain health plans that provide coverage for
maternity care or services to provide a covered person with
substantially equivalent coverage to permit the voluntary termination
of a pregnancy.

Provides that the coverage requirement is inapplicable to the
extent that it results in noncompliance with federal requirements that
are a prescribed condition for federal funds.

Provides that no individual health care provider, religiously
sponsored health carrier, or health care facility may be required by
law or contract to participate in the provision of or payment for a
specific service if they object based on conscience or religion.

Provides that no individual or organization with a religious or moral tenet opposed to a specific service may be required to purchase coverage for that service or services if they object to doing so for reason of conscience or religion.

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