

HOUSE BILL NO. 222

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-SIXTH LEGISLATURE - FIRST SESSION

BY REPRESENTATIVE HOLMES

Introduced: 4/8/09

Referred:

A BILL

FOR AN ACT ENTITLED

1 **"An Act prohibiting discrimination by health care insurers based on genetic**
2 **information; requiring a health care insurer to offer coverage for the treatment of**
3 **alcoholism or drug abuse; providing continuity of coverage for college students during**
4 **medically necessary leaves of absence from college; requiring health care insurers in the**
5 **group market to provide parity in the application of mental health and substance abuse**
6 **benefits that comply with federal requirements; amending the definition of 'dentist' to**
7 **include out-of-state dentists for purposes of certain dental insurance requirements; and**
8 **providing for an effective date."**

9 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

10 * **Section 1.** AS 21.36 is amended by adding a new section to read:

11 **Sec. 21.36.093. Genetic information nondiscrimination.** (a) A health care
12 insurer that offers a health care insurance plan in the individual market shall comply

1 with the genetic information nondiscrimination requirements established under 42
2 U.S.C. 300gg-53.

3 (b) A health care insurer that offers a health care insurance plan in the group
4 market shall comply with the genetic information nondiscrimination requirements
5 established under 42 U.S.C. 300gg-1(b)(3), 42 U.S.C. 300gg-1(c) - (f), and 42 U.S.C.
6 300gg-91.

7 (c) In this section,

8 (1) "group market" has the meaning given in AS 21.54.500;

9 (2) "health care insurance plan" has the meaning given in
10 AS 21.54.500;

11 (3) "health care insurer" has the meaning given in AS 21.54.500;

12 (4) "individual market" has the meaning given in AS 21.51.500.

13 * **Sec. 2.** AS 21.42.365 is repealed and reenacted to read:

14 **Sec. 21.42.365. Coverage for treatment of alcoholism or drug abuse.** (a)

15 Except for a fraternal benefit society, a health care insurer that offers, issues for
16 delivery, delivers, or renews in this state a health care insurance plan providing
17 coverage for five or more employees of an employer in the group market shall offer a
18 covered employee or the employee's dependent coverage for the treatment of
19 alcoholism or drug abuse.

20 (b) In this section, "alcoholism or drug abuse" means an illness characterized
21 by

22 (1) a physiological or psychological dependency, or both, on alcoholic
23 beverages or controlled substances as defined in AS 11.71.900; or

24 (2) habitual lack of self-control in using alcoholic beverages or
25 controlled substances to the extent that the person's health is substantially impaired or
26 the person's social or economic function is substantially disrupted.

27 * **Sec. 3.** AS 21.42.392(g)(2) is amended to read:

28 (2) "dentist" means a person licensed [IN THIS STATE] to practice
29 dentistry;

30 * **Sec. 4.** AS 21.42 is amended by adding a new section to read:

31 **Sec. 21.42.410. Coverage of dependent students on medically necessary**

1 **leave of absence.** A health care insurer that offers a health care insurance plan in the
 2 individual or group market shall comply with the coverage requirements for dependent
 3 students on medically necessary leaves of absence under 42 U.S.C. 300gg-54.

4 * **Sec. 5.** AS 21.54 is amended by adding a new section to read:

5 **Sec. 21.54.105. Special enrollment requirements related to Medicaid and**
 6 **state child health plan coverage.** A health care insurer that offers, issues, delivers, or
 7 renews a health care insurance plan in the group market shall allow an eligible
 8 employee or dependent of an employee to enroll for coverage under the terms of the
 9 plan if the employee or dependent

10 (1) is covered by Medicaid under 42 U.S.C. 1396 – 1396u (Title XIX
 11 of the Social Security Act) or under a state child health plan under 42 U.S.C. 1397aa -
 12 1397mm (Title XXI of the Social Security Act), coverage is terminated because of
 13 loss of eligibility, and the employee requests coverage under the health care insurance
 14 plan not later than 60 days after the date of termination; or

15 (2) becomes eligible for assistance under Medicaid under 42 U.S.C.
 16 1396 – 1396u (Title XIX of the Social Security Act) or under a state child health plan
 17 under 42 U.S.C. 1397aa - 1397mm (Title XXI of the Social Security Act), with respect
 18 to coverage under a health care insurance plan, including under any waiver or
 19 demonstration project conducted under or in relation to the Medicaid or state child
 20 health plan, and the employee requests coverage under the health care insurance plan
 21 not later than 60 days after the date the employee or dependent is determined to be
 22 eligible for assistance.

23 * **Sec. 6.** AS 21.54.151 is repealed and reenacted to read:

24 **Sec. 21.54.151. Mental health or substance use disorder benefits.** A health
 25 care insurer that offers a health care insurance plan in the group market shall comply
 26 with the mental health or substance use disorder benefit requirements established
 27 under 42 U.S.C. 300gg-5.

28 * **Sec. 7.** AS 21.36.093, enacted by sec. 1 of this Act, takes effect May 21, 2009.

29 * **Sec. 8.** AS 21.42.410, enacted by sec. 4 of this Act, and AS 21.54.151, as repealed and
 30 reenacted by sec. 6 of this Act, take effect October 3, 2009.