

# ALASKA STATE LEGISLATURE

## *Senate Health and Social Services Committee*

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### **SCS CS HB17 (HHS): CONTRACEPTIVES COVERAGE: INSURE; MED. ASSIST EXPLANATION OF CHANGES – VERSION B.A TO VERSION R**

The Senate Health and Social Services Committee Substitute for Committee Substitute for House Bill 17(HSS), version R, makes the following changes:

- The bill has a title change that adds “and providing for an effective date.”
- On page 2, lines 8 – 10, the CS deletes the language in (c) and replaces it with “Except as provided in (d) of this section, a health care insurer may not require cost sharing for contraceptives or services covered under (a) of this section when provided by a participating health care provider or pharmacy.” This change was requested by Division of Insurance Director Lori Wing-Heier.
- On page 2, lines 14 – 23, the CS deletes the language in (e) and replaces it with “A health care insurer that applies medical management techniques such as step therapy or prior authorization must provide for a simple and easy to understand exception procedure for a covered person to access covered contraceptives without delay.” This change was requested by Director Wing-Heier.
- On page 2, lines 19 – 23, the CS deletes the language in (f) and replaces it with “If the covered therapeutically equivalent version of a prescription contraceptive is not available or is considered medically inadvisable by the health care provider of the insured, a health care insurer shall provide coverage without cost sharing for an alternative therapeutically equivalent version of the prescription contraceptive that is prescribed for the insured when provided by a participating health care provider.” This change was requested by Director Wing-Heier.
- In version B.A. on page 3, lines 7 – 14, the CS deletes the language under (h) “A religious employer that opposes coverage under this subsection shall provide a list of the contraceptives or services described in (a) of this section for which the religious employer opposes coverage

- 1) to each prospective enrollee in the religious employer's health care insurance plan before the enrollee's enrollment in the plan; and
- 2) annually to all insureds enrolled in the religious employer's health care insurance plan.”

This change was requested by Director Wing-Heier.

- In version B.A. on page 3, lines 19 - 26, under newly added Section 2, language was added to clarify religious exemptions. In version R on page 3, lines 2 - 9, this language is included under Section 1 and removes the reference to “state law concerning a person’s health care” and focuses the legislation on health care insurance coverage regarding contraceptive methods. This change was requested by the bill’s sponsor per a legal memorandum received dated March 28, 2024.
- On page 7, line 9, the CS changes the conditional effective date under Section 8 as it pertains to Medicaid from January 1, 2025, to January 1, 2026. This technical fix was requested by the Department of Health.
- On page 7, line 20, a new Section 9 is added to include an effective date of January 1, 2025. This change was requested by Director Wing-Heier.