

SENATE BILL NO. 313
IN THE LEGISLATURE OF THE STATE OF ALASKA
SEVENTEENTH LEGISLATURE - FIRST SESSION

BY SENATOR STURGULEWSKI

Introduced: 5/21/91
Referred: HES, Finance

A BILL
FOR AN ACT ENTITLED

1 **"An Act relating to insurance coverage for the treatment of phenylketonuria."**

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

3 *** Section 1. AS 21.42 is amended by adding a new section to read:**

4 Sec. 21.42.375. **COVERAGE FOR TREATMENT OF PHENYLKETONURIA. (a) An**
5 insurer authorized under AS 21.09 to offer, issue for delivery, deliver, or renew an individual or
6 a group disability insurance policy for major medical coverage on an expense-incurred basis in
7 the state, or a hospital or medical service corporation authorized under AS 21.87 to offer or
8 renew a group contract for major medical coverage in the state, must provide coverage for the
9 formulas necessary for the treatment of phenylketonuria. This subsection does not apply to

- 10 (1) a Medicare supplement insurance policy;
- 11 (2) long-term care insurance;
- 12 (3) an insurance policy regulated under 5 U.S.C. 89 or 42 U.S.C. 1395mm;
- 13 (4) an insurance policy that provides services or reimbursement exclusively for
- 14 optometric or vision care, dental or orthodontic care, podiatric, ambulance, mental health, or

1 chiropractic care;

2 (5) an insurance policy that the director has, in writing, determined should be
3 excluded from this subsection.

4 (b) The insurer or service corporation providing coverage under this section may impose
5 reasonable contract limitations but may not refuse coverage based on a preexisting condition of
6 phenylketonuria or require that the insured or subscriber pay a higher deductible or copayment
7 for the cost of treating phenylketonuria than for the cost of treating another condition or illness.

8 (c) In this section

9 (1) "copayment" means the portion of the cost to be paid by the insured or
10 subscriber in excess of the deductible;

11 (2) "cost" means the lowest of the following:

12 (A) the actual charge for the treatment received for phenylketonuria;

13 (B) the usual, customary, and reasonable charge for the treatment as
14 determined by the contract of coverage; or

15 (C) the charge agreed to by contract between the provider and the insurer,
16 hospital service corporation, or medical service corporation;

17 (3) "deductible" means the portion of covered costs that must be incurred before
18 benefits become payable;

19 (4) "long-term care insurance" has the meaning given in AS 21.53.200;

20 (5) "major medical coverage" means a disability insurance contract, or a
21 subscriber contract, that provides benefits for hospital and medical care with potential lifetime
22 maximum benefits for the insured or subscriber of at least \$10,000.

23 * Sec. 2. AS 21.87.340 is amended to read:

24 Sec. 21.87.340. OTHER PROVISIONS APPLICABLE. In addition to the provisions
25 contained or referred to previously in this chapter, the following chapters and provisions of this
26 title also apply with respect to service corporations to the extent applicable and not in conflict
27 with the express provisions of this chapter and the reasonable implications of the express
28 provisions, and for the purposes of the application the corporations shall be considered to be
29 mutual "insurers":

30 (1) AS 21.03

31 (2) AS 21.06

- 1 (3) AS 21.09, except AS 21.09.090
- 2 (4) AS 21.18.010
- 3 (5) AS 21.18.030
- 4 (6) AS 21.18.040
- 5 (7) AS 21.18.120
- 6 (8) AS 21.21.321
- 7 (9) AS 21.36
- 8 (10) AS 21.69.400
- 9 (11) AS 21.69.520
- 10 (12) AS 21.69.600, 21.69.620, and 21.69.630
- 11 (13) AS 21.78
- 12 (14) AS 21.90
- 13 (15) AS 21.42.345 - 21.42.365, and 21.42.375
- 14 (16) AS 21.89.040
- 15 (17) AS 21.89.060.

16 * Sec. 3. AS 21.42.375, enacted by sec. 1 of this Act, applies to individual and group disability
17 insurance policies and hospital or medical service subscriber contracts entered into or renewed on or after
18 the effective date of this Act.