AN ACT concerning health; relating to gynecological care and the diagnosis and treatment of osteoporosis and relating to the state employees health benefits program.

Be it enacted by the Legislature of the State of Kansas:

Section 1. (a) Each health insurer and the state health care benefits program shall permit a woman insured by the health insurer or such program to visit an in-network obstetrician or gynecologist for routine gynecological care from an in-network obstetrician or gynecologist one time each calendar year without requiring such woman to first visit or receive a referral from a primary care provider, so long as the care is medically necessary, including, but not limited to, care that is routine.

(b) This section shall be part of and supplemental to the patient protection act, cited at K.S.A. 40-4601 *et seq.*, and amendments thereto.

Sec. 2. (a) Any individual or group health insurance policy, medical service plan, contract, hospital service corporation contract, hospital and medical service corporation contract, fraternal benefit society or health maintenance organization, municipal group-funded pool and the state employee health care benefits plan which provides coverage for hospital, medical and surgical services, other than medicare supplement or accident-only policies which are delivered, issued for delivery, amended or renewed on or after July 1, 2001, shall include coverage for services related to diagnosis, treatment and management of osteoporosis when such services are provided by a person licensed to practice medicine and surgery in this state, for individuals with a condition or medical history for which bone mass measurement is medically necessary for such individual. Such policy, provision, contract, plan or agreement may apply to such services the same deductibles, coinsurance and other limitations as apply to other covered services.

(b) The provisions of this section shall not apply to any policy or certificate which provides coverage for any specified disease, specified accident or accident only coverage, credit, dental, disability income, hospital indemnity, long-term care insurance as defined by K.S.A. 40-2227 and amendments thereto, vision care or any other limited supplemental benefit nor to any medicare supplement policy of insurance as defined by the commissioner of insurance by rule and regulation, any coverage issued as a supplement to liability insurance, workers compensation or similar insurance, automobile medical-payment insurance or any insurance under which benefits are payable with or without regard to fault, whether written on a group, blanket or individual basis.

Sec. 3. (a) Commencing in plan year 2002, within the limits of appropriations thereof, the Kansas state employees health care commission shall establish a pilot program which provides that, if an active employee of the state of Kansas is enrolled in a health care benefits plan administered by the Kansas state employees health care commission, pursuant to K.S.A. 75-6501 *et seq.*, and amendments thereto, the commission shall provide that a percentage determined by the commission, within the limits of appropriations for the pilot program, of the cost to cover an eligible child or children shall be paid as an employer contribution for the participation of any eligible child or children in the state health benefits program.

(b) As used in this section, "eligible child" means any child who is an eligible dependent pursuant to K.A.R. 108-1-1 and who is otherwise eligible for insurance coverage under the insurance plan authorized by K.S.A. 38-2001 and amendments thereto and under the guidelines for eligibility developed by the commission within the limits of appropriations for the pilot program but is not eligible solely because the child is a member of a family that is eligible for health benefits coverage under a state health benefits plan administered by the Kansas state employees health care commission.

(c) The Kansas state employees health care commission shall report its findings and any recommendations which the commission may have concerning the pilot program established under this section to the governor and to the legislature annually.

(d) The secretary of administration is hereby authorized to receive grants, gifts or donations from the United States government, or its agencies, the Sunflower Foundation: Healthcare for Kansas, or any other source whatsoever for the purposes of the pilot program established under this section and amendments thereto, and any moneys so received

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shall be deposited in the state treasury and credited to the cafeteria benefits fund established by K.S.A. 75-6513 and amendments thereto. All funds received pursuant to this section shall be placed in a separate account within the cafeteria benefits fund. All expenditures made from such fund for the purposes of this section shall be made in accordance with appropriation acts upon warrants of the director of accounts and reports issued by the secretary of administration or a person designated by the secretary of administration.

Sec. 4. This act shall take effect and be in force from and after its publication in the statute book.

I hereby certify that the above BILL originated in the SENATE, and passed that body

SENATE adopted Conference Committe	e Report
-	President of the Senate.
-	Secretary of the Senate.
Passed the HOUSE as amended	
HOUSE adopted Conference Committe	Report
_	Speaker of the House.
_	Chief Clerk of the House.
Approved	

Governor.