

HOUSE BILL NO. 381

INTRODUCED BY MENAHAN, WHALEN, PAVLOVICH,  
DAILY, BRADLEY, QUILICI, DRISCOLL

IN THE HOUSE

JANUARY 24, 1989	INTRODUCED AND REFERRED TO COMMITTEE ON HUMAN SERVICES & AGING.
JANUARY 25, 1989	FIRST READING.
FEBRUARY 11, 1989	COMMITTEE RECOMMEND BILL DO PASS AS AMENDED. REPORT ADOPTED.
FEBRUARY 13, 1989	PRINTING REPORT.
FEBRUARY 14, 1989	SECOND READING, DO PASS.
FEBRUARY 15, 1989	ENGROSSING REPORT.
FEBRUARY 16, 1989	THIRD READING, PASSED. AYES, 97; NOES, 1.
	TRANSMITTED TO SENATE.

IN THE SENATE

FEBRUARY 17, 1989	INTRODUCED AND REFERRED TO COMMITTEE ON BUSINESS & INDUSTRY.
	FIRST READING.
FEBRUARY 28, 1989	COMMITTEE RECOMMEND BILL BE CONCURRED IN. REPORT ADOPTED.
MARCH 2, 1989	SECOND READING, CONCURRED IN.
MARCH 4, 1989	THIRD READING, CONCURRED IN. AYES, 45; NOES, 1.
	RETURNED TO HOUSE.

MARCH 4, 1989

IN THE HOUSE

RECEIVED FROM SENATE.

SENT TO ENROLLING.

REPORTED CORRECTLY ENROLLED.

1 *HOUSE* BILL NO. *381*  
 2 INTRODUCED BY *Merran Whalen Carboil*  
 3 *Daily Bradley Insler*  
 4 A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING INSURERS AND  
 5 HEALTH SERVICE CORPORATIONS TRANSACTING HEALTH INSURANCE  
 6 BUSINESS IN THIS STATE TO OFFER COVERAGE FOR THE FORMULA  
 7 NECESSARY IN THE TREATMENT OF PHENYLKETONURIA; AND PROVIDING  
 8 AN APPLICABILITY DATE."

9  
 10 WHEREAS, phenylketonuria is a rare, inherited genetic  
 11 disease afflicting children with the inability to metabolize  
 12 an essential amino acid that is found in most food proteins;  
 13 and

14 WHEREAS, children with this disease must ingest a  
 15 mineral- and vitamin-enriched formula; and

16 WHEREAS, without this formula children suffer severe  
 17 mental and physical difficulties; and

18 WHEREAS, because this formula is considered a food  
 19 supplement and not a medication, it is not covered by health  
 20 care insurance.

21

22 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

23 NEW SECTION. **Section 1.** Coverage for phenylketonuria  
 24 formula. Insurers and health service corporations  
 25 transacting health insurance business in this state shall

1 make available under group insurance policies and under  
 2 group hospital and medical plan contracts coverage for the  
 3 formula necessary in the treatment of phenylketonuria.

4 NEW SECTION. **Section 2.** Applicability. [This act]  
 5 applies to policies or contracts delivered or issued for  
 6 delivery or renewed in this state on or after January 1,  
 7 1990.

8 NEW SECTION. **Section 3.** Codification instruction.  
 9 [Section 1] is intended to be codified as an integral part  
 10 of Title 33, and the provisions of Title 33 apply to  
 11 [section 1].

-End-

APPROVED BY COMM. ON  
HUMAN SERVICES AND AGING

## HOUSE BILL NO. 381

INTRODUCED BY MENAHAN, WHALEN, PAVLOVICH,

DAILY, BRADLEY, QUILICI, DRISCOLL

A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING INSURERS AND HEALTH SERVICE CORPORATIONS TRANSACTING HEALTH INSURANCE BUSINESS IN THIS STATE TO OFFER--COVERASE--FOR--THE--FORMULA NECESSARY---IN PROVIDE COVERAGE FOR THE TREATMENT OF PHENYLKETONURIA; AMENDING SECTION 33-31-102, MCA; AND PROVIDING AN APPLICABILITY DATE."

WHEREAS, phenylketonuria is a rare, inherited genetic disease afflicting children PERSONS with the inability to metabolize an essential amino acid that is found in most food proteins; and

WHEREAS, children--with--this--disease--must--ingest--a mineral---and---vitamin-enriched---formula MAINTAINING A NORMALIZED BLOOD LEVEL OF PHENYLALANINE IS THE ONLY TREATMENT OF THE DISEASE; and

WHEREAS, without this formula--children TREATMENT PATIENTS suffer severe mental and physical difficulties; and

WHEREAS, because this--formula--is--considered--a--food supplement--and--not--a--medication--it-is-not NOT ALL COSTS OF TREATING PHENYLKETONURIA ARE covered by health care insurance.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Coverage for phenylketonuria formula TREATMENT. Insurers-and-health-service--corporations transacting--health--insurance--business-in-this-state-shall make-available-under-group--insurance--policies--and--under group--hospital--and-medical-plan-contracts-coverage-for-the formula-necessary-in-the-treatment-of-phenylketonuria: (1) EACH GROUP OR INDIVIDUAL DISABILITY POLICY, CERTIFICATE OF INSURANCE, AND MEMBERSHIP CONTRACT THAT IS DELIVERED, ISSUED FOR DELIVERY, RENEWED, EXTENDED, OR MODIFIED IN THIS STATE AND THAT PROVIDES COVERAGE FOR A FAMILY MEMBER OF THE INSURED OR SUBSCRIBER MUST PROVIDE COVERAGE FOR THE TREATMENT OF PHENYLKETONURIA.

(2) FOR THE PUPOSE OF THIS SECTION, "TREATMENT" MEANS LICENSED PROFESSIONAL MEDICAL SERVICES UNDER THE SUPERVISION OF A PHYSICIAN AND A DIETARY FORMULA PRODUCT TO ACHIEVE AND MAINTAIN NORMALIZED BLOOD LEVELS OF PHENYLALANINE AND ADEQUATE NUTRITIONAL STATUS.

(3) THESE SERVICES ARE SUBJECT TO THE TERMS OF THE APPLICABLE GROUP OR INDIVIDUAL DISABILITY POLICY, CERTIFICATE, OR MEMBERSHIP CONTRACT THAT ESTABLISHES DURATIONAL LIMITS, DOLLAR LIMITS, DEDUCTIBLES, AND COPAYMENT PROVISIONS AS LONG AS THE TERMS ARE NOT LESS FAVORABLE THAN FOR PHYSICAL ILLNESS GENERALLY.

1 **SECTION 2. SECTION 33-31-102, MCA, IS AMENDED TO READ:**

2 "33-31-102. Definitions. As used in this chapter,  
3 unless the context requires otherwise, the following  
4 definitions apply:

5 (1) "Agent" means an individual, partnership, or  
6 corporation appointed or authorized by a health maintenance  
7 organization to solicit applications for health care  
8 services agreements on its behalf.

9 (2) "Basic health care services" means:

10 (a) consultative, diagnostic, therapeutic, and  
11 referral services by a provider;

12 (b) inpatient hospital and provider care;

13 (c) outpatient medical services;

14 (d) medical treatment and referral services;

15 (e) accident and sickness services by a provider to  
16 each newborn infant of an enrollee pursuant to  
17 33-31-301(3)(e);

18 (f) care and treatment of mental illness, alcoholism,  
19 and drug addiction;

20 (g) diagnostic laboratory and diagnostic and  
21 therapeutic radiologic services; and

22 (h) preventive health services, including:

23 (i) immunizations;

24 (ii) well-child care from birth;

25 (iii) periodic health evaluations for adults;

1 (iv) voluntary family planning services;

2 (v) infertility services; and

3 (vi) children's eye and ear examinations conducted to  
4 determine the need for vision and hearing correction; AND

5 (1) TREATMENT FOR PHENYLKETONURIA. "TREATMENT" MEANS  
6 LICENSED PROFESSIONAL MEDICAL SERVICES UNDER THE SUPERVISION  
7 OF A PHYSICIAN AND A DIETARY FORMULA PRODUCT TO ACHIEVE AND  
8 MAINTAIN NORMALIZED BLOOD LEVELS OF PHENYLALANINE AND  
9 ADEQUATE NUTRITIONAL STATUS.

10 (3) "Commissioner" means the commissioner of insurance  
11 of the state of Montana.

12 (4) "Department of health" means the department of  
13 health and environmental sciences provided for in 2-15-2101.

14 (5) "Director" means the director of the department of  
15 health and environmental sciences provided for in 2-15-2102.

16 (6) "Enrollee" means a person:

17 (a) who enrolls in or contracts with a health  
18 maintenance organization;

19 (b) on whose behalf a contract is made with a health  
20 maintenance organization to receive health care services; or

21 (c) on whose behalf the health maintenance  
22 organization contracts to receive health care services.

23 (7) "Evidence of coverage" means a certificate,  
24 agreement, policy, or contract issued to an enrollee setting  
25 forth the coverage to which the enrollee is entitled.

(8) "Health care services" means:

(a) the services included in furnishing medical or dental care to a person;

(b) the services included in hospitalizing a person;

(c) the services incident to furnishing medical or dental care or hospitalization; or

(d) the services included in furnishing to a person other services for the purpose of preventing, alleviating, curing, or healing illness, injury, or physical disability.

(9) "Health care services agreement" means an agreement for health care services between a health maintenance organization and an enrollee.

(10) "Health maintenance organization" means a person who provides or arranges for basic health care services to enrollees on a prepaid or other financial basis, either directly through provider employees or through contractual or other arrangements with a provider or a group of providers.

(11) "Person" means:

(a) an individual;

(b) a group of individuals;

(c) an insurer, as defined in 33-1-201;

(d) a health service corporation, as defined in 33-30-101;

(e) a corporation, partnership, facility, association,

or trust; or

(f) an institution of a governmental unit of any state licensed by that state to provide health care, including but not limited to a physician, hospital, hospital-related facility, or long-term care facility.

(12) "Plan" means a health maintenance organization operated by an insurer or health service corporation as an integral part of the corporation and not as a subsidiary.

(13) "Provider" means a physician, hospital, hospital-related facility, long-term care facility, dentist, osteopath, chiropractor, optometrist, podiatrist, psychologist, licensed social worker, registered pharmacist, or nurse specialist as specifically listed in 37-8-202 who treats any illness or injury within the scope and limitations of his practice or other person who is licensed or otherwise authorized in this state to furnish health care services.

(14) "Uncovered expenditures" mean the costs of health care services that are covered by a health maintenance organization and for which an enrollee is liable if the health maintenance organization becomes insolvent."

**NEW SECTION. Section 3. Applicability.** [This act] applies to policies or contracts delivered or issued for delivery or renewed in this state on or after January 1, 1990.

HB 0381/02

1        NEW SECTION.   **Section 4.**   Codification   instruction.  
2   [Section 1] is intended to be codified as an integral part  
3   of Title 33, CHAPTER 22, PART 1, and the provisions of Title  
4   33, CHAPTER 22, PART 1, apply to [section 1].

-End-

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INTRODUCED BY MENAHAN, WHALEN, PAVLOVICH,

DAILY, BRADLEY, QUILICI, DRISCOLL

A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING INSURERS AND HEALTH SERVICE CORPORATIONS TRANSACTING HEALTH INSURANCE BUSINESS IN THIS STATE TO OFFER--COVERAGE--FOR--THE--FORMULA NECESSARY--IN PROVIDE COVERAGE FOR THE TREATMENT OF PHENYLKETONURIA; AMENDING SECTION 33-31-102, MCA; AND PROVIDING AN APPLICABILITY DATE."

WHEREAS, phenylketonuria is a rare, inherited genetic disease afflicting children PERSONS with the inability to metabolize an essential amino acid that is found in most food proteins; and

WHEREAS, children--with--this--disease--must--ingest--a mineral---and---vitamin-enriched---formula MAINTAINING A NORMALIZED BLOOD LEVEL OF PHENYLALANINE IS THE ONLY TREATMENT OF THE DISEASE; and

WHEREAS, without this formula--children TREATMENT PATIENTS suffer severe mental and physical difficulties; and

WHEREAS, because this--formula--is--considered--a--food supplement--and--not--a--medication--it-is-not NOT ALL COSTS OF TREATING PHENYLKETONURIA ARE covered by health care insurance.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

NEW SECTION. Section 1. Coverage for phenylketonuria formula TREATMENT. insurers-and-health-service--corporations transacting--health--insurance--business-in-this-state-shall make-available-under--group--insurance--policies--and--under group--hospital--and-medical-plan-contracts-coverage-for-the formula-necessary-in-the-treatment-of--phenylketonuria. (1) EACH GROUP OR INDIVIDUAL DISABILITY POLICY, CERTIFICATE OF INSURANCE, AND MEMBERSHIP CONTRACT THAT IS DELIVERED, ISSUED FOR DELIVERY, RENEWED, EXTENDED, OR MODIFIED IN THIS STATE AND THAT PROVIDES COVERAGE FOR A FAMILY MEMBER OF THE INSURED OR SUBSCRIBER MUST PROVIDE COVERAGE FOR THE TREATMENT OF PHENYLKETONURIA.

(2) FOR THE PUPOSE OF THIS SECTION, "TREATMENT" MEANS LICENSED PROFESSIONAL MEDICAL SERVICES UNDER THE SUPERVISION OF A PHYSICIAN AND A DIETARY FORMULA PRODUCT TO ACHIEVE AND MAINTAIN NORMALIZED BLOOD LEVELS OF PHENYLALANINE AND ADEQUATE NUTRITIONAL STATUS.

(3) THESE SERVICES ARE SUBJECT TO THE TERMS OF THE APPLICABLE GROUP OR INDIVIDUAL DISABILITY POLICY, CERTIFICATE, OR MEMBERSHIP CONTRACT THAT ESTABLISHES DURATIONAL LIMITS, DOLLAR LIMITS, DEDUCTIBLES, AND COPAYMENT PROVISIONS AS LONG AS THE TERMS ARE NOT LESS FAVORABLE THAN FOR PHYSICAL ILLNESS GENERALLY.



**SECTION 2. SECTION 33-31-102, MCA, IS AMENDED TO READ:**

**\*33-31-102. Definitions.** As used in this chapter, unless the context requires otherwise, the following definitions apply:

(1) "Agent" means an individual, partnership, or corporation appointed or authorized by a health maintenance organization to solicit applications for health care services agreements on its behalf.

(2) "Basic health care services" means:

(a) consultative, diagnostic, therapeutic, and referral services by a provider;

(b) inpatient hospital and provider care;

(c) outpatient medical services;

(d) medical treatment and referral services;

(e) accident and sickness services by a provider to each newborn infant of an enrollee pursuant to 33-31-301(3)(e);

(f) care and treatment of mental illness, alcoholism, and drug addiction;

(g) diagnostic laboratory and diagnostic and therapeutic radiologic services; and

(h) preventive health services, including:

(i) immunizations;

(ii) well-child care from birth;

(iii) periodic health evaluations for adults;

(iv) voluntary family planning services;

(v) infertility services; and

(vi) children's eye and ear examinations conducted to determine the need for vision and hearing correction; AND

(1) TREATMENT FOR PHENYLKETONURIA. "TREATMENT" MEANS LICENSED PROFESSIONAL MEDICAL SERVICES UNDER THE SUPERVISION OF A PHYSICIAN AND A DIETARY FORMULA PRODUCT TO ACHIEVE AND MAINTAIN NORMALIZED BLOOD LEVELS OF PHENYLALANINE AND ADEQUATE NUTRITIONAL STATUS.

(3) "Commissioner" means the commissioner of insurance of the state of Montana.

(4) "Department of health" means the department of health and environmental sciences provided for in 2-15-2101.

(5) "Director" means the director of the department of health and environmental sciences provided for in 2-15-2102.

(6) "Enrollee" means a person:

(a) who enrolls in or contracts with a health maintenance organization;

(b) on whose behalf a contract is made with a health maintenance organization to receive health care services; or

(c) on whose behalf the health maintenance organization contracts to receive health care services.

(7) "Evidence of coverage" means a certificate, agreement, policy, or contract issued to an enrollee setting forth the coverage to which the enrollee is entitled.

1 (8) "Health care services" means:

2 (a) the services included in furnishing medical or  
3 dental care to a person;

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6 dental care or hospitalization; or

7 (d) the services included in furnishing to a person  
8 other services for the purpose of preventing, alleviating,  
9 curing, or healing illness, injury, or physical disability.

10 (9) "Health care services agreement" means an  
11 agreement for health care services between a health  
12 maintenance organization and an enrollee.

13 (10) "Health maintenance organization" means a person  
14 who provides or arranges for basic health care services to  
15 enrollees on a prepaid or other financial basis, either  
16 directly through provider employees or through contractual  
17 or other arrangements with a provider or a group of  
18 providers.

19 (11) "Person" means:

20 (a) an individual;

21 (b) a group of individuals;

22 (c) an insurer, as defined in 33-1-201;

23 (d) a health service corporation, as defined in  
24 33-30-101;

25 (e) a corporation, partnership, facility, association,

1 or trust; or

2 (f) an institution of a governmental unit of any state  
3 licensed by that state to provide health care, including but  
4 not limited to a physician, hospital, hospital-related  
5 facility, or long-term care facility.

6 (12) "Plan" means a health maintenance organization  
7 operated by an insurer or health service corporation as an  
8 integral part of the corporation and not as a subsidiary.

9 (13) "Provider" means a physician, hospital,  
10 hospital-related facility, long-term care facility, dentist,  
11 osteopath, chiropractor, optometrist, podiatrist,  
12 psychologist, licensed social worker, registered pharmacist,  
13 or nurse specialist as specifically listed in 37-8-202 who  
14 treats any illness or injury within the scope and  
15 limitations of his practice or other person who is licensed  
16 or otherwise authorized in this state to furnish health care  
17 services.

18 (14) "Uncovered expenditures" mean the costs of health  
19 care services that are covered by a health maintenance  
20 organization and for which an enrollee is liable if the  
21 health maintenance organization becomes insolvent."

22 NEW SECTION. Section 3. Applicability. [This act]  
23 applies to policies or contracts delivered or issued for  
24 delivery or renewed in this state on or after January 1,  
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HB 0381/02

1        NEW SECTION.    **Section 4.**    Codification       instruction.  
2        [Section 1] is intended to be codified as an integral part  
3        of Title 33, CHAPTER 22, PART 1, and the provisions of Title  
4        33, CHAPTER 22, PART 1, apply to [section 1].

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**NEW SECTION. Section 3. Applicability.** [This act] applies to policies or contracts delivered or issued for delivery or renewed in this state on or after January 1, 1990.

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