General Assembly **Substitute Bill No. 879**

January Session, 2011 *____SB00879INS__021811___*

AN ACT CONCERNING PRESCRIPTION EYE DROPS AND DEPENDENTS' DENTAL COVERAGE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Section 38a-492m of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2012*):

Each individual health insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 delivered, issued for delivery, amended, renewed or continued in this state **[**on or after January 1, 2010,**]** that provides coverage for prescription eye drops, shall not deny coverage for: **[**a**]**

(1) A renewal of prescription eye drops when **[**(1)**]** (A) the renewal is requested by the insured less than thirty days from the later of **[**(A)**]** (i) the date the original prescription was distributed to the insured, or **[**(B)**]** (ii) the date the last renewal of such prescription was distributed to the insured, and **[**(2)**]** (B) the prescribing physician indicates on the original prescription that additional quantities are needed and the renewal requested by the insured does not exceed the number of additional quantities needed; and

(2) One additional bottle of prescription eye drops when (A) such bottle is requested by the insured or the prescribing physician at the time the original prescription is filled, and (B) the prescribing

19 physician indicates on the original prescription that such additional
20 bottle is needed by the insured for use in a day care center or school.
21 Such additional bottle shall be limited to one every three months.

22 Sec. 2. Section 38a-518*l* of the general statutes is repealed and the
23 following is substituted in lieu thereof (*Effective January 1, 2012*):

24 Each group health insurance policy providing coverage of the type
25 specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469
26 delivered, issued for delivery, amended, renewed or continued in this
27 state **[**on or after January 1, 2010,**]** that provides coverage for
28 prescription eye drops, shall not deny coverage for: **[**a**]**

29 (1) A renewal of prescription eye drops when **[**(1)**]** (A) the renewal is
30 requested by the insured less than thirty days from the later of **[**(A)**]** (i)
31 the date the original prescription was distributed to the insured, or
32 **[**(B)**]** (ii) the date the last renewal of such prescription was distributed
33 to the insured, and **[**(2)**]** (B) the prescribing physician indicates on the
34 original prescription that additional quantities are needed and the
35 renewal requested by the insured does not exceed the number of
36 additional quantities needed; and

37 (2) One additional bottle of prescription eye drops when (A) such
38 bottle is requested by the insured or the prescribing physician at the
39 time the original prescription is filled, and (B) the prescribing
40 physician indicates on the original prescription that such additional
41 bottle is needed by the insured for use in a day care center or school.
42 Such additional bottle shall be limited to one every three months.

43 Sec. 3. (NEW) (*Effective January 1, 2012*) Each individual health
44 insurance policy providing coverage of the type specified in
45 subdivisions (1), (2), (4), (11), (12) and (16) of section 38a-469 of the
46 general statutes delivered, issued for delivery, amended, renewed or
47 continued in this state that includes coverage for dental care services
48 shall provide that coverage of a child for dental care services shall
49 terminate no earlier than the policy anniversary date on or after the
50 date on which the child attains the age of twenty-six. Each such policy

51 shall cover a stepchild on the same basis as a biological child.

52 Sec. 4. (NEW) (*Effective January 1, 2012*) Each group health insurance
53 policy providing coverage of the type specified in subdivisions (1), (2),
54 (4), (11), (12) and (16) of section 38a-469 of the general statutes
55 delivered, issued for delivery, amended, renewed or continued in this
56 state that includes coverage for dental care services shall provide that
57 coverage of a child for dental care services shall terminate no earlier
58 than the policy anniversary date on or after the date on which the child
59 attains the age of twenty-six. Each such policy shall cover a stepchild
60 on the same basis as a biological child.

This act shall take effect as follows and shall amend the following sections:		
Section 1	*January 1, 2012*	38a-492m
Sec. 2	*January 1, 2012*	38a-518*l*
Sec. 3	*January 1, 2012*	New section
Sec. 4	*January 1, 2012*	New section

INS *Joint Favorable Subst.*