

# STATE OF NEW YORK

9519

## IN ASSEMBLY

January 14, 2026

Introduced by M. of A. McDONALD -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to requiring certain health insurance policies include coverage services provided by pharmacists related to contraceptives

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Item (v) of subparagraph (E) of paragraph 17 of subsection  
2 (i) of section 3216 of the insurance law, as amended by section 3 of  
3 part M of chapter 57 of the laws of 2019, is amended to read as follows:  
4 (v) all FDA-approved contraceptive drugs, devices, and other products,  
5 including all over-the-counter contraceptive drugs, devices, and  
6 products as prescribed or as otherwise authorized under state or federal  
7 law; voluntary sterilization procedures pursuant to 42 U.S.C. 18022 and  
8 identified in the comprehensive guidelines supported by the health  
9 resources and services administration and thereby incorporated in the  
10 essential health benefits benchmark plan; patient education and coun-  
11 seling on contraception; and follow-up services related to the drugs,  
12 devices, products, and procedures covered under this clause, including,  
13 but not limited to, management of side effects, counseling for continued  
14 adherence, and device insertion and removal. Except as otherwise author-  
15 ized under this [~~clause~~] item, a contract shall not impose any  
16 restrictions or delays on the coverage required under this [~~clause~~]  
17 item. However, where the FDA has approved one or more therapeutic and  
18 pharmaceutical equivalent, as defined by the FDA, versions of a contra-  
19 ceptive drug, device, or product, a contract is not required to include  
20 all such therapeutic and pharmaceutical equivalent versions in its  
21 formulary, so long as at least one is included and covered without cost-  
22 sharing and in accordance with this [~~clause~~] item. If the covered ther-  
23 apeutic and pharmaceutical equivalent versions of a drug, device, or  
24 product are not available or are deemed medically inadvisable a contract  
25 shall provide coverage for an alternate therapeutic and pharmaceutical  
26 equivalent version of the contraceptive drug, device, or product without  
27 cost-sharing.

EXPLANATION--Matter in italics (underscored) is new; matter in brackets  
[-] is old law to be omitted.

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1 (a) This coverage shall include emergency contraception without cost  
2 sharing when provided pursuant to a prescription, or order under section  
3 sixty-eight hundred thirty-one of the education law or when lawfully  
4 provided over-the-counter.

5 (b) If the attending health care provider, in ~~[his or her]~~ **their**  
6 reasonable professional judgment, determines that the use of a non-cov-  
7 ered therapeutic or pharmaceutical equivalent of a drug, device, or  
8 product is warranted, the health care provider's determination shall be  
9 final. The superintendent shall promulgate regulations establishing a  
10 process, including timeframes, for an insured, an insured's designee or  
11 an insured's health care provider to request coverage of a non-covered  
12 contraceptive drug, device, or product. Such regulations shall include a  
13 requirement that insurers use an exception form that shall meet criteria  
14 established by the superintendent.

15 (c) This coverage must allow for the dispensing of up to twelve months  
16 worth of a contraceptive at one time.

17 (d) This coverage shall provide for an administrative fee to a pharma-  
18 cist who dispenses self-administered hormonal contraceptives pursuant to  
19 section sixty-eight hundred one of the education law and provides  
20 related services no less than the current Medicaid rate for the same  
21 services.

22 (e) For the purposes of this ~~[clause]~~ **item**, "over-the-counter contra-  
23 ceptive products" shall mean those products provided for in comprehen-  
24 sive guidelines supported by the health resources and services adminis-  
25 tration as of January twenty-first, two thousand nineteen.

26 § 2. Subparagraph (A) of paragraph 16 of subsection (1) of section  
27 3221 of the insurance law, as amended by section 1 of part M of chapter  
28 57 of the laws of 2019, is amended to read as follows:

29 (A) Every group or blanket policy that provides medical, major  
30 medical, or similar comprehensive type coverage ~~[that is issued,~~  
31 ~~amended, renewed, effective or delivered on or after January first, two~~  
32 ~~thousand twenty,]~~ shall provide coverage for all of the following  
33 services and contraceptive methods:

34 (1) All FDA-approved contraceptive drugs, devices, and other products.  
35 This includes all FDA-approved over-the-counter contraceptive drugs,  
36 devices, and products as prescribed or as otherwise authorized under  
37 state or federal law. The following applies to this coverage:

38 (a) where the FDA has approved one or more therapeutic and pharmaceu-  
39 tical equivalent, as defined by the FDA, versions of a contraceptive  
40 drug, device, or product, a group or blanket policy is not required to  
41 include all such therapeutic and pharmaceutical equivalent versions in  
42 its formulary, so long as at least one is included and covered without  
43 cost-sharing and in accordance with this paragraph;

44 (b) if the covered therapeutic and pharmaceutical equivalent versions  
45 of a drug, device, or product are not available or are deemed medically  
46 inadvisable a group or blanket policy shall provide coverage for an  
47 alternate therapeutic and pharmaceutical equivalent version of the  
48 contraceptive drug, device, or product without cost-sharing. If the  
49 attending health care provider, in ~~[his or her]~~ **their** reasonable profes-  
50 sional judgment, determines that the use of a non-covered therapeutic or  
51 pharmaceutical equivalent of a drug, device, or product is warranted,  
52 the health care provider's determination shall be final. The superinten-  
53 dent shall promulgate regulations establishing a process, including  
54 timeframes, for an insured, an insured's designee or an insured's health  
55 care provider to request coverage of a non-covered contraceptive drug,  
56 device, or product. Such regulations shall include a requirement that

1 insurers use an exception form that shall meet criteria established by  
2 the superintendent;

3 (c) this coverage shall include emergency contraception without cost-  
4 sharing when provided pursuant to a prescription or order under section  
5 sixty-eight hundred thirty-one of the education law or when lawfully  
6 provided over the counter; ~~and~~

7 (d) this coverage must allow for the dispensing of up to twelve months  
8 worth of a contraceptive at one time; ~~and~~

9 (e) this coverage shall provide for an administrative fee to a pharma-  
10 cist who dispenses self-administered hormonal contraceptives pursuant to  
11 section sixty-eight hundred one of the education law and provides  
12 related services no less than the current Medicaid rate for the same  
13 services;

14 (2) Voluntary sterilization procedures pursuant to 42 U.S.C. 18022 and  
15 identified in the comprehensive guidelines supported by the health  
16 resources and services administration and thereby incorporated in the  
17 essential health benefits benchmark plan;

18 (3) Patient education and counseling on contraception; and

19 (4) Follow-up services related to the drugs, devices, products, and  
20 procedures covered under this paragraph, including, but not limited to,  
21 management of side effects, counseling for continued adherence, and  
22 device insertion and removal.

23 § 3. The opening paragraph and subparagraph (A) of paragraph 1 of  
24 subsection (cc) of section 4303 of the insurance law, as amended by  
25 section 2 of part M of chapter 57 of the laws of 2019, are amended to  
26 read as follows:

27 Every contract that provides medical, major medical, or similar  
28 comprehensive type coverage [~~that is issued, amended, renewed, effective~~  
29 ~~or delivered on or after January first, two thousand twenty,~~] shall  
30 provide coverage for all of the following services and contraceptive  
31 methods:

32 (A) All FDA-approved contraceptive drugs, devices, and other products.  
33 This includes all FDA-approved over-the-counter contraceptive drugs,  
34 devices, and products as prescribed or as otherwise authorized under  
35 state or federal law. The following applies to this coverage:

36 (i) where the FDA has approved one or more therapeutic and pharmaceu-  
37 tical equivalent, as defined by the FDA, versions of a contraceptive  
38 drug, device, or product, a contract is not required to include all such  
39 therapeutic and pharmaceutical equivalent versions in its formulary, so  
40 long as at least one is included and covered without cost-sharing and in  
41 accordance with this subsection;

42 (ii) if the covered therapeutic and pharmaceutical equivalent versions  
43 of a drug, device, or product are not available or are deemed medically  
44 inadvisable a contract shall provide coverage for an alternate therapeu-  
45 tic and pharmaceutical equivalent version of the contraceptive drug,  
46 device, or product without cost-sharing. If the attending health care  
47 provider, in [~~his or her~~] their reasonable professional judgment, deter-  
48 mines that the use of a non-covered therapeutic or pharmaceutical equiv-  
49 alent of a drug, device, or product is warranted, the health care  
50 provider's determination shall be final. The superintendent shall  
51 promulgate regulations establishing a process, including timeframes, for  
52 an insured, an insured's designee or an insured's health care provider  
53 to request coverage of a non-covered contraceptive drug, device, or  
54 product. Such regulations shall include a requirement that insurers use  
55 an exception form that shall meet criteria established by the super-  
56 intendent;

1 (iii) this coverage shall include emergency contraception without  
2 cost-sharing when provided pursuant to a prescription or order under  
3 section sixty-eight hundred thirty-one of the education law or when  
4 lawfully provided over the counter; [~~and~~]

5 (iv) this coverage must allow for the dispensing of up to twelve  
6 months worth of a contraceptive at one time; and

7 (v) this coverage shall include an administrative fee to a pharmacist  
8 who dispenses self-administered hormonal contraceptives pursuant to  
9 section sixty-eight hundred one of the education law and provides  
10 related services no less than the current Medicaid rate for the same  
11 services;

12 § 4. This act shall take effect immediately and shall apply to poli-  
13 cies and contracts issued, renewed, modified, altered or amended on and  
14 after such date.