**South Carolina General Assembly**

119th Session, 2011-2012

**S. 728**

**STATUS INFORMATION**

General Bill

Sponsors: Senator Pinckney

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Introduced in the Senate on March 24, 2011

Currently residing in the Senate Committee on **Banking and Insurance**

Summary: Smoking cessation program

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

3/24/2011 Senate Introduced and read first time ([Senate Journal‑page 3](file:///h:\sj%20archive\2011\03-24-11.docx))

3/24/2011 Senate Referred to Committee on **Banking and Insurance** ([Senate Journal‑page 3](file:///h:\sj%20archive\2011\03-24-11.docx))

**VERSIONS OF THIS BILL**

[3/24/2011](file:///p:\pprever\2011-12\728_20110324.docx)

**A** **BILL**

TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 38‑71‑295 SO AS TO DEFINE THE TERM “SMOKING CESSATION PROGRAM”, TO REQUIRE THAT CERTAIN HEALTH INSURANCE POLICIES INCLUDE COVERAGE FOR SMOKING CESSATION TREATMENT, TO PERMIT A PROVIDER OF THIS INSURANCE TO IMPOSE COPAYMENTS, DEDUCTIBLES, OR BOTH, AND TO PROVIDE EXCEPTIONS.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Article 1, Chapter 71, Title 38 of the 1976 Code is amended by adding:

“Section 38‑71‑295. (A) As used in this section, ‘smoking cessation treatment’ includes the use of an over‑the‑counter (OTC) or prescription smoking cessation medication approved by the United States Food and Drug Administration (FDA), when used in accordance with FDA approval, for not more than two courses ofr medication of up to fourteen weeks each, annually, when recommended and prescribed by a person who holds prescriptive privileges in the state in which he is licensed, and used in combination with an annual outpatient benefit of sixteen one‑half hour evidence‑based smoking cessation counseling sessions provided by a qualified practitioner for a covered individual. Smoking cessation treatment may be redefined through regulation promulgated by the Director the Department of Insurance in accordance with the most current clinical practice guidelines sponsored by the United States Department of Health and Human Services or its component agencies.

(B) An individual or group health insurance contract, plan, or policy delivered, issued for delivery, or renewed in this State on or after January 1, 2012, which provides medical coverage that includes coverage for physician services in a physician’s office, and every policy which provides major medical or similar comprehensive‑type coverage, shall include coverage for smoking cessation treatment, provided that if this medical coverage does not include prescription drug coverage, the contract, plan, or policy is not required to include coverage for FDA‑approved smoking cessation medications.

(C) A health insurance contract, plan, or policy to which this section applies may impose a copayment, deductible, or both, for the benefits mandated by this section consistent with a copayment, deductible, or both, of the contract, plan, or policy for a physician service and medication. Nothing in this section may impact the reimbursement, medical necessity, or utilization review, managed care, or case management practices of these health insurance contracts, plans, or policies.

(D) This section does not apply to insurance coverage providing benefits for:

(1) hospital confinement indemnity;

(2) disability income;

(3) accident only;

(4) long‑term care;

(5) Medicare supplement;

(6) limited benefit health;

(7) specified disease indemnity;

(8) sickness or bodily injury or death by accident or both; or

(9) other limited benefit policies.”

SECTION 2. This act takes effect upon approval by the Governor.

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