

## FINANCIAL INSTITUTIONS AND INSURANCE

### Health Insurance Mandates in Kansas

Melissa Renick  
Assistant Director for Research  
[Melissa.Renick@klrd.ks.gov](mailto:Melissa.Renick@klrd.ks.gov)  
785-296-4138

Iraida Orr  
Principal Research Analyst  
[Iraida.Orr@klrd.ks.gov](mailto:Iraida.Orr@klrd.ks.gov)  
785-296-4408

Leighann Thone  
Research Analyst  
[Leighann.Thone@klrd.ks.gov](mailto:Leighann.Thone@klrd.ks.gov)  
785-296-4181

This article examines required insurance benefits in Kansas law, the “test track” requirements for the Legislature’s consideration of proposed mandates, and pending legislation.

**What is a mandate?** Statutes added in Kansas insurance law require certain health care providers be paid for services rendered (provider mandates) or be paid for certain types of prescribed coverage or benefits (benefit mandates). For example, Kansas has a benefit mandate for osteoporosis:

- a) Any individual or group health insurance policy. . . which [is] 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 (KSA 40-2,166a)

**Which health insurance plans are affected when a new mandate becomes law?** Generally, the new law would apply to individual health insurance policies and group health insurance policies issued. The legislation would likely also specify policies issued by Health Maintenance Organizations (HMOs), municipal-group funded pools, and the State Employee Health Plan (SEHP).

**Which health plans and policies would not be required to incorporate new mandate requirements in their policies?**

- Self-insured health plans, including Association Health Plans (Employee Retirement Income Security Act of 1974 [ERISA] plans). Self-insured plans are governed by federal laws and are enforced by the U.S. Department of Labor. (States cannot regulate these self-insured plans.);
- Supplemental benefit policies (e.g., dental care and vision plans); and
- Short-term limited duration plans.

**How do proposed new mandates become law?** The following chart illustrates the statutory process and associated timing for the Legislature’s consideration of a proposal during the 2022 Session.

## Kansas Health Insurance Mandates Prescribed Path – Kansas Law

<b>1</b> Requirements on proponents (KSA 40-2248, KSA 40-2249)	Prior to legislative consideration, proponents must complete a social and financial impact report.	2022 (if law is passed)
<b>2</b> Study in the SEHP (KSA 40-2249)	Before being implemented statewide, the coverage mandate must be studied for at least one year in the SEHP.	Study completed in Plan Year 2023.
<b>3</b> Report to the Legislature (KSA 40-2249)	<p>The SEHP study report is submitted to the Legislature.</p> <p>The Legislature could allow the coverage mandate to apply statewide by not taking action.</p> <p>Or, the Legislature could pass a new law to continue the SEHP study only or make the mandate effective statewide beginning at a later date.</p>	<p>By March 1, 2024</p> <p>Effective after March 1, 2024</p> <p>As early as July 1, 2024</p>

**What proposed mandates are pending before the 2022 Legislature?** Among pending legislation, statewide coverage is being sought for breast cancer examinations\* (SB 48 and HB 2241), contraceptives (HB 2343), and mental illness and substance use disorders [expansion of existing mandate] (SB 82 and HB 2073). Additionally, certain proposed mandates would only apply to insurance coverage within the State Employee Health Plan for specific conditions and require reporting to the Legislature the following session. These include HB 2110 (treatment of PANS/PANDAS — autoimmune conditions that affect children) and HB 2129 (tobacco cessation benefits).

\*Exempted from the requirements of KSA 40-2248 and KSA 40-2249a

*Note:* Prior law has excepted one or more of the prescribed steps (e.g., 2010 Senate Sub. for HB 2160 required the Health Care Commission to provide coverage for certain autism spectrum disorder coverages and required all individual or group insurance policies that provide coverage for prescription drugs to cover orally administered anticancer medications).

# KLRD

**For more information, please contact:**

Kansas Legislative Research Department  
300 SW 10th Ave., Room 68-West, Statehouse  
Topeka, KS 66612  
Phone: (785) 296-3181