



## 2023 State Action to Protect No-Cost Access to Preventive Services

State	Bill	Status	Overview
Arizona	<a href="#">SB 1292</a>	Failed – awaiting hearing in Senate Finance Committee (2/2/23)	<ul style="list-style-type: none"> <li>Requires every insurer that offers an individual health care plan, short-term limited duration insurance, or a small employer group health care plan to provide coverage without cost sharing for preventive services recommended by the USPSTF, ACIP, and HRSA.</li> </ul>
California	<a href="#">AB 1645</a>	Awaiting Governor's signature (9/13/23)	<ul style="list-style-type: none"> <li>Requires coverage of all preventive services recommended by the USPSTF with an “A” or “B” rating, HRSA, and ACIP without cost-sharing under any group or individual health policy issued, amended or renewed as of January 1, 2024.</li> </ul>
Colorado	<a href="#">SB-189</a>	Signed by the Governor	<ul style="list-style-type: none"> <li>Protects coverage of preventive services of all service recommendations from the USPSTF with “A” or “B” rating, HRSA, and ACIP without cost-sharing by large employer plans.</li> <li>Specifically mandates coverage for HIV prevention (PrEP), including counseling and screening if counseling, treatment, or screenings for other STIs are covered in the plan.</li> </ul>
Hawaii	<a href="#">HB1180</a> <a href="#">SB893</a>	Failed – awaiting initial hearing in several House and Senate Committees (1/31/23)	<ul style="list-style-type: none"> <li>All individual accident, health, or sickness policies shall cover with no-cost sharing any preventive services recommended under title 42 USC section 300gg-13, as identified by the USPSTF or HRSA on January 1, 2019.</li> </ul>
Illinois	<a href="#">HB 0579</a>	Signed by the Governor	<ul style="list-style-type: none"> <li>Requires plans offered on the newly authorized State-Based Exchange to cover all USPSTF Grade A and B preventive services without cost sharing.</li> </ul>

<b>Massachusetts</b>	<a href="#">H. 4040</a> (formerly <a href="#">H-1081/S.647</a> )	<b>Signed by the Governor</b>	<ul style="list-style-type: none"> <li>• Included in the state budget</li> <li>• Health plans must provide coverage without any cost-sharing for recommended services with a rating of “A” or “B” by the USPSTF, ACIP, and HRSA on or before July 1, 2023.</li> </ul>
<b>Michigan</b>	<a href="#">HB 4623</a>	Passed out of the House, awaiting hearing in Senate Health Policy committee (6/28/23)	<ul style="list-style-type: none"> <li>• An insurer that delivers, issues for delivery, or renews a health insurance policy in the individual or small group market must provide coverage without cost-sharing for recommended services with a rating of “A” or “B” by the USPSTF, ACIP, and HRSA.</li> </ul>
<b>Minnesota</b>	<a href="#">SF 2995</a> *Amended into state budget*	<b>Signed by the Governor</b>	<ul style="list-style-type: none"> <li>• Included in the omnibus health and human services package</li> <li>• Requires non-grandfathered health plans to provide all preventive services recommended with a rating “A” or “B” by the USPSTF, ACIP, and HRSA with no-cost sharing beginning on January 1, 2024.</li> </ul>
<b>New York</b>	<a href="#">S 825</a> / <a href="#">A1326</a>	<b>Signed by the Governor</b>	<ul style="list-style-type: none"> <li>• Requires every large group insurer that provides medical, major medical, or comprehensive-type coverage for prescription drugs to include <b>coverage of PrEP</b>, with no cost-sharing, as long as it maintains an “A” or “B” rating from the USPSTF.</li> <li>• Applies to all policies in effect on or after March 3, 2023.</li> </ul>
<b>Oregon</b>	<a href="#">HB 2282</a>	<b>Signed by the Governor</b>	<ul style="list-style-type: none"> <li>• Health benefit plans must provide coverage of preventive services in 42 U.S.C. 300gg-13 in rules adopted and in effect on January 1, 2023, with no cost sharing.</li> </ul>
<b>Pennsylvania</b>	<a href="#">HB 1050</a>	Passed out of the House, awaiting hearing in Senate Committee on Banking and Insurance (6/30/23).	<ul style="list-style-type: none"> <li>• Requires coverage of all service recommendations from the USPSTF with an “A” or “B” rating, HRSA, and ACIP without cost-sharing by any insurer that provides medical or health care coverage.</li> <li>• Insurers are required to cover preventive services for free out-of-network if there are no in-network providers offering that service.</li> <li>• The Insurance Department may add or exempt one or more preventive services following updated clinical guidance from the preventive services required to be covered without cost-sharing under this section.</li> </ul>

<b>Rhode Island</b>	<a href="#">S 23 / H 5426</a>	Signed by the Governor	<ul style="list-style-type: none"> <li>Amends Rhode Island’s essential health benefits (EHB) to include in the definition of preventive services those outlined in "42 U.S.C. § 300gg-13" in effect January 1, 2023, and requires that health insurers on the individual market provide coverage for those services with no cost sharing.</li> <li>Gives the insurance commissioner authority to clarify that any services that USPSTF changes/adds after January 1, 2023, also qualify under the definition.</li> </ul>
<b>Texas</b>	<a href="#">SB 2247</a>	Failed – awaiting initial hearing in House Health and Human Services Committee (3/22/23)	<ul style="list-style-type: none"> <li>Health plans must provide coverage without any cost-sharing for recommended services with a rating of “A” or “B” by the USPSTF, ACIP, and HRSA for all policies delivered, issued, or renewed on or after January 1, 2024.</li> <li>Gives the insurance commissioner authority to adopt rules as necessary to implement this section. These rules must be consistent with the requirements outlined in the Affordable Care Act on January 1, 2017.</li> </ul>
<b>Washington</b>	<a href="#">HB 1855</a>	Failed – awaiting initial hearing in House committee on Health Care and Wellness (4/11/23)	<ul style="list-style-type: none"> <li>A health plan issued on or after June 7, 2018 must provide coverage without cost-sharing for all preventive services under 42 U.S.C. § 300gg-13 in effect on January 31, 2023.</li> </ul>

See [this map](#) maintained by the Commonwealth Fund for states that currently require **individual market insurers** to cover, without cost sharing, the same categories of preventive services as Section 2713 of the Affordable Care Act (ACA).