



Senate Fiscal Agency
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BILL ANALYSIS



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House Bill 5435 (Substitute H-1 as reported without amendment)
House Bill 5436 (Substitute H-3 as reported without amendment)
Sponsor: Representative Stephanie A. Young (H.B. 5435)
Representative Kara Hope (H.B. 5436)
House Committee: Health Policy
Senate Committee: Health Policy

CONTENT

House Bill 5435 (H-1) would amend Chapter 34 (Disability Insurance Policies) of the Insurance Code to require an insurer to cover a hormonal contraception patch, self-administered hormonal contraception, or vaginal ring hormonal contraceptive that was covered under an insured's health insurance policy and that was prescribed and dispensed by a pharmacist as provided in House Bill 5436 (H-3), at a pharmacy in the insurer's network.

House Bill 5436 (H-3) would amend Part 177 (Pharmacy Practice and Drug Control) of the Public Health Code to do the following:

- Allow a pharmacist to issue a prescription for a hormonal contraceptive patch, a self-administered hormonal contraceptive, an emergency contraceptive, or a vaginal ring hormonal contraceptive (all referred to as a contraceptive throughout the rest of the summary).
- Require the Department of Licensing and Regulatory Affairs (LARA) in consultation with the Michigan Board of Pharmacy (Board) to promulgate specified rules to implement the bill within 18 months of the bill's effective date.
- Require LARA, in consultation with the Board, to develop a self-screening risk assessment tool to be used by an individual who was seeking a prescription for a contraceptive.
- Require a pharmacist who issued a prescription for a contraceptive to furnish the purchaser a receipt with the name of the pharmacist issuing the prescription.

The bills are tie-barred. House Bill 5435 (H-1) would apply to health insurance policies delivered, executed, issued, amended, adjusted, or renewed in Michigan, or outside of Michigan if covering residents of Michigan, after December 31, 2025.

Proposed MCL 500.3406tt (H.B. 5435)
MCL 333.17703 et al. (H.B.5436)

BRIEF RATIONALE

According to testimony, Michigan is experiencing a shortage of obstetricians and gynecologists (OB/GYNs), with 1/3 of Michigan's 83 counties having no OB/GYNs at all. As a result, the availability of medical professionals who can prescribe hormonal contraceptives is insufficient to cover the whole of Michigan's residents. Authorizing pharmacists to prescribe hormonal contraceptives and requiring insurance coverage for pharmacist-prescribed hormonal contraceptives would increase the availability of medical professionals able to prescribe Michigan residents necessary medical products.

Legislative Analyst: Alex Krabill

FISCAL IMPACT

The bill would have a small negative fiscal impact on LARA and no impact on local units of government. The additional responsibilities that would be assigned to LARA by the bill likely would result in small increased administrative costs for LARA and these would likely be sufficiently funded by existing appropriations.

Date Completed: 12-13-24

Fiscal Analyst: Nathan Leaman

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.