

WISCONSIN – STATE REQUIRED BENEFITS

A Name of Possilind Possilit	B Manufack Amelian kiliku	C Vaca of Facatoment	D Citation Number
Name of Required Benefit Hospital and Ambulatory Surgery Center Charges and	Market Applicability Individual, Group, HMOs	Year of Enactment Before 2012	Citation Number 609.79
Anesthetics for Dental Care	individual, Group, Hivios	Before 2012	632.895 (12)
Home Health Care	Individual, Group	Before 2012	632.895(12)
Kidney Disease		Before 2012	632.895(4)
Skilled Nursing Facility services	Individual	Before 2012	632.895(3)
Autism Spectrum Disorder	All disability insurance policies and self-insured health	Before 2012	40.51 (8)
natism speed am bisorael	plans of the state or of a county, city, town, village, or	Before 2012	66.0137 (4)
	school district, except for disability policies that cover only		120.13 (2) (g)
	certain specified diseases, a health care plan offered by a		185.981 (4t)
	limited service health organization or by a preferred		185.983 (1) (intro.)
	provider plan that is not a defined network plan, a long-		632.855 (2) (intro.)
	term care insurance policy, or a Medicare replacement or		632.855 (3)
	a Medicare supplement policy		632.855 (3) (bm)
			632.87 (1)
			632.87 (6)
Cochlear Implants	Individual and group disability policies, except for disability	Before 2012	632.895(16)
	policies that cover only certain specified diseases, a		
	disability policy or self-insured health care plan that		
	provides only limited-scope dental or vision benefits, a		
	health care plan offered by a limited service health		
	organization, or by a preferred provider plan that is not a		
	defined network plan		
Child Immunizations	Individual, Group	Before 2012	632.895 (14)
Lead Screening	, , , ,	Before 2012	609.85
	limited service health organization	D (2042	632.895 (10)
Mammography	Individual, Group	Before 2012	632.895(8)
Colorectal Cancer Screening	All disability insurance policies, except for disability	Before 2012	632.895 (16m)
	policies that cover only certain specified diseases other than cancer, a disability policy or self-insured		
	health care plan that provides only limited-scope dental or		
	vision benefits, or a health care plan offered by a limited		
	service health organization or by a preferred provider plan		
	that is not a defined network plan		
TMJ Disorders	Group and individual policies, except dental-only and	Before 2012	609.78
	Medicare supplement policies, including HMOs, PPOs, and		632.895 (11)
	LSHOs		, ,
Breast Reconstruction	Group and individual policies, including HMOs, PPOs, and	Before 2012	609.77
	LSHOs		632.895 (13)
Coverage of Certain Health Care Costs in Cancer Clinical	All health insurance policies	Before 2012	40.51 (8)
Trials			66.0137 (4)
			120.13 (2) (g)
			185.981 (4t)
			185.983 (1) (intro.)
			632.855 (2) (intro.)
			632.855 (3)
			632.855 (3) (bm)
			632.87 (1)
Dish stee and seed on the	Consumer and in dividual malitates (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	D-f 2042	632.87 (6)
Diabetes equipment and supplies	Group and individual policies, including HMOs, PPOs, and LSHOs	RELOLE SOITS	632.895(6)
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Name of Required Benefit	Market Applicability	Year of Enactment	Citation Number
Hospital and Ambulatory Surgery Center Charges and	Group and individual policies, including HMOs, PPOs, and	Before 2012	609.79
Anesthetics for Dental Care	LSHOs		632.895 (12)
Mental Health Parity	Group health benefit plans and self-insured health plans;	Before 2012	632.89
	individual health plans are not required to cover mental		
	health or substance use disorder services; however, if		
	coverage is provided, it must be at a parity level.		
Drugs for Treatment of HIV Infection	All health insurance policies, except for those issued by a	Before 2012	632.895(9)
	limited service health organization		
Contraceptive Coverage	Individual and group disability policies, except for disability	Before 2012	632.895 (17)
	policies that cover only certain specified diseases, a		
	disability policy or self-insured health care plan that		
	provides only limited-scope dental or vision benefits, a		
	health care plan offered by a limited service health		
	organization or by a preferred provider plan that is not a		
	defined network plan, a long-term care insurance policy, a		
	Medicare replacement or a Medicare supplement policy,		
	or a short-term individual health benefit plan		
Congenital Defects & Birth Abnormalities	Group, Individual	Before 2012	632.895(5)