

PROPOSED AMENDMENT

HB 1238 # 5

DIGEST

Colorectal cancer screening. Adds language specifying services to be included as part of a covered colorectal cancer screening for policies of accident and sickness insurance and health maintenance organization contracts.

- 1 Page 9, after line 21, begin a new paragraph and insert:
2 "SECTION 8. IC 27-8-14.8-3, AS AMENDED BY P.L.36-2020,
3 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
4 JULY 1, 2022]: Sec. 3. **(a) As used in this section, "follow-up
5 colonoscopy" means a colonoscopy that is performed as a
6 follow-up to a colorectal cancer screening test, other than a
7 colonoscopy, that is assigned a grade of "A" or "B" by the United
8 States Preventive Services Task Force and for which the result was
9 positive.**
10 ~~(a)~~ **(b)** Except as provided in subsection ~~(d)~~, **(e)**, an insurer shall
11 provide coverage for colorectal cancer examinations and laboratory
12 tests for cancer for any nonsymptomatic insured in any accident and
13 sickness insurance policy that the insurer issues in Indiana or issues for
14 delivery in Indiana. **Except as provided in subsection (f), covered
15 services must include:**
16 **(1) a colorectal cancer screening test assigned either an "A"
17 or "B" grade by the United States Preventive Services Task
18 Force; and**
19 **(2) a follow-up colonoscopy.**
20 ~~(b)~~ **(c)** For an insured who is:
21 (1) at least forty-five (45) years of age; or
22 (2) less than forty-five (45) years of age and at high risk for
23 colorectal cancer;
24 the coverage required under this section must meet the requirements set
25 forth in subsection ~~(c)~~, **(d)**, except as provided in subsection ~~(e)~~: **(f)**.
26 ~~(e)~~ **(d)** An insured may not be required to pay an additional annual

deductible or coinsurance for the colorectal cancer examination and laboratory testing benefit required by this section that is greater than an annual deductible or coinsurance established for similar benefits under the accident and sickness insurance policy under which the insured is covered. If the accident and sickness insurance policy does not cover a similar benefit, a deductible or coinsurance for the colorectal cancer examination and laboratory testing benefit may not be set at a level that materially diminishes the value of the colorectal cancer examination and laboratory testing benefit.

~~(d)~~ (e) In the case of an accident and sickness insurance policy that is not employer based, the insurer shall offer to provide the coverage described in this section.

~~(e)~~ (f) ~~The requirements imposed under this section do not apply to A high deductible health plan, as defined by Section 223 of the Internal Revenue Code, High deductible health plans described in this subsection may not excuse~~ **may impose a deductible requirement with respect to colorectal cancer screening in a manner for a follow-up colonoscopy if the requirements imposed under subsection (b)(2) would be** inconsistent with Section 223(c)(2)(C) of the Internal Revenue Code.

SECTION 9. IC 27-13-7-17, AS AMENDED BY P.L.36-2020, SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2022]: Sec. 17. (a) As used in this section, "colorectal cancer testing" means examinations and laboratory tests for cancer for any nonsymptomatic enrollee.

(b) As used in this section, "follow-up colonoscopy" means a colonoscopy that is performed as a follow-up to a colorectal cancer screening test, other than a colonoscopy, that is assigned a grade of "A" or "B" by the United States Preventive Services Task Force and for which the result was positive.

~~(b)~~ (c) Except as provided in subsection ~~(e)~~; (f), a health maintenance organization issued a certificate of authority in Indiana shall provide colorectal cancer testing, **including:**

- (1) a colorectal cancer screening test assigned either an "A" or "B" grade by the United States Preventive Services Task Force; and**
- (2) a follow-up colonoscopy.**

as a covered service under every group contract that provides coverage for basic health care services.

~~(e)~~ (d) For an enrollee who is:

1 (1) at least forty-five (45) years of age; or

2 (2) less than forty-five (45) years of age and at high risk for
3 colorectal cancer;

4 the colorectal cancer testing required under this section must meet the
5 requirements set forth in subsection ~~(d)~~; **(e)**, except as provided in
6 subsection ~~(f)~~; **(g)**.

7 ~~(d)~~ **(e)** An enrollee may not be required to pay a copayment for the
8 colorectal cancer testing benefit required by this section that is greater
9 than a copayment established for similar benefits under the group
10 contract under which the enrollee is entitled to services. If the group
11 contract does not cover a similar covered service, the copayment for the
12 colorectal cancer testing benefit may not be set at a level that materially
13 diminishes the value of the colorectal cancer testing benefit.

14 ~~(e)~~ **(f)** In the case of coverage that is not employer based, the health
15 maintenance organization is required only to offer to provide colorectal
16 cancer testing as a covered service under a proposed group contract
17 providing coverage for basic health care services.

18 ~~(f)~~ **(g)** ~~The requirements imposed under this section do not apply to~~
19 ~~A high deductible health plan, as defined by Section 223 of the Internal~~
20 ~~Revenue Code, High deductible health plans described in this~~
21 ~~subsection may not excuse may impose a deductible requirement with~~
22 ~~respect to colorectal cancer screening in a manner for a follow-up~~
23 ~~colonoscopy if the requirements imposed under subsection (c)(2)~~
24 ~~would be~~ inconsistent with Section 223(c)(2)(C) of the Internal
25 Revenue Code."

26 Renumber all SECTIONS consecutively.

(Reference is to HB 1238 as introduced.)