

2021 Regular Session

SENATE BILL NO. 84

BY SENATOR TALBOT

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

INSURANCE POLICIES. Provides for health insurance coverage of genetic testing for various cancer mutations. (1/1/22)

1 AN ACT

2 To enact R.S. 22:1028.3, relative to health insurance coverage; to require health insurance
3 coverage for genetic testing for various cancer mutations; to provide for the
4 definition of health coverage plan; to provide for definitions; and to provide for
5 related matters.

6 Be it enacted by the Legislature of Louisiana:

7 Section 1. R.S. 22:1028.3 is hereby enacted to read as follows:

8 **§1028.3. Required coverage for genetic testing for cancer**

9 **A. The legislature hereby finds that cancer is a leading cause of death in**
10 **this state. Medical advances in genetic testing for various types of cancer**
11 **including but not limited to breast, ovarian, colon, thyroid, prostate, pancreatic,**
12 **lung, melanoma, sarcoma, kidney, and stomach cancers greatly assist in**
13 **estimating the chance of developing cancer in an individual's lifetime. Genetic**
14 **testing can help predict the risk of a particular cancer and assist in determining**
15 **if a patient has genes that may pass increased cancer risks to their children.**

16 **B.(1) Any health coverage plan renewed, delivered, or issued for delivery**
17 **in this state shall include coverage for genetic or molecular testing for cancer**

1 including but not limited to tumor mutation testing, next generation sequencing,
2 hereditary germline mutation testing, pharmacogenomic testing, whole exome
3 and genome sequencing, and biomarker testing.

4 (2) The coverage provided in this Section may be subject to annual
5 deductibles, coinsurance, and copayment provisions as are consistent with those
6 established under the health coverage plan. The coverage provided under this
7 Section may be subject to applicable evidence-based medical necessity criteria
8 under the plan.

9 C. For purposes of this Section, "health coverage plan" means any
10 hospital, health, or medical expense insurance policy, hospital or medical
11 service contract, employee welfare benefit plan, contract, or other agreement
12 with a health maintenance organization or a preferred provider organization,
13 health and accident insurance policy, or any other insurance contract of this
14 type in this state, including group insurance plan, a self-insurance plan, and the
15 office of group benefits programs. "Health coverage plan" shall not include a
16 plan providing coverage for excepted benefits defined in R.S. 22:1061, limited
17 benefit health insurance plans, and short-term policies that have a term of less
18 than twelve months.

19 D. As used in this Section, the following definitions shall apply unless the
20 context indicates otherwise:

21 (1) "Biomarker" means a characteristic that is objectively measured and
22 evaluated as an indicator of normal biological processes, pathogenic processes,
23 or pharmacologic responses to a specific therapeutic intervention. Biomarkers
24 include but are not limited to gene mutations or protein expression.

25 (2) "Biomarker testing" is the analysis of a patient's tissue, blood, or
26 fluid biospecimen for the presences of a biomarker. Biomarker testing includes
27 but is not limited to single-analyte tests, multi-plex panel tests, and partial or
28 whole genome sequencing.

29 Section 2. This Act shall become effective on January 1, 2022 and shall apply to any

- 1 health coverage plan as defined in this Act that is renewed, delivered, or issued for delivery,
 2 in this state on or after January 1, 2022.

The original instrument was prepared by Cheryl Cooper. The following digest, which does not constitute a part of the legislative instrument, was prepared by Thomas L. Tyler.

DIGEST

SB 84 Engrossed

2021 Regular Session

Talbot

Proposed law requires any health coverage plan renewed, delivered, or issued for delivery, in this state to include coverage for genetic or molecular cancer testing including but not limited to tumor mutation testing, next generation sequencing, hereditary germline mutation testing, pharmacogenomic testing, whole exome, genome sequencing and biomarker testing. Provides that coverage may be subject to annual deductibles, coinsurance, copayment provisions consistent with that established under the health coverage plan and that this coverage may be subject to applicable evidence-based medical necessity criteria under the health plan.

Proposed law defines health coverage plan as any hospital, health, or medical expense insurance policy, hospital or medical service contract, employee welfare benefit plan, contract, or other agreement with a health maintenance organization or a preferred provider organization, health and accident insurance policy, or any other insurance contract of this type in the state, including group insurance plans, self-insurance plans, and the office of group benefits programs. Excludes a plan providing coverage for excepted benefits in present law, limited benefit health insurance plans, and short-term policies that have a term of less than 12 months.

Proposed law defines a biomarker and biomarker testing.

Proposed law applies to health coverage plans renewed, delivered, or issued for delivery in their state on or after January 1, 2022.

Effective January 1, 2022.

(Adds R.S. 22:1028.3)

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the original bill

1. Removes provisions that the health plan include coverage for the cost of genetic or molecular testing.
2. Adds biomarker testing to provisions regarding genetic or molecular testing for cancer.
3. Provides that coverage may be subject to applicable evidence-based medical necessity criteria.
4. Defines "biomarker" and ""biomarker testing".