DIGEST

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SB 104 Engrossed

2023 Regular Session

Stine

<u>Proposed law</u> outlines legislative findings and requires any health coverage plan renewed, delivered, or issued for delivery in this state to include coverage for biomarker testing for the purpose of the diagnosis, treatment, appropriate management, or ongoing monitoring of an individual's disease or condition when the test provides clinical utility as demonstrated by medical and scientific evidence, including any one of the following:

- (1) Labeled indications for diagnostic tests approved or cleared by the U.S. Food and Drug Administration (FDA) or indicated diagnostic tests for a drug approved by the FDA.
- (2) Warnings and precautions listed on a FDA-approved drug label.
- (3) National Coverage Determinations of the Centers for Medicare and Medicaid Services or Local Coverage Determinations of Medicare Administrative Contractors.
- (4) Nationally recognized clinical practice guidelines.

<u>Proposed law provides</u> that coverage may be subject to annual deductibles, coinsurance, and copayment provisions as are consistent with those established under the health coverage plan.

<u>Proposed law</u> requires individuals and healthcare providers to have access to a clear, readily accessible, convenient process to request exceptions to a coverage policy or adverse determination of a health coverage plan. Further requires the process to be included on a health coverage plan's website or be clearly outlined in the notification of adverse determination.

<u>Proposed law</u> requires a health coverage plan to ensure that coverage in <u>proposed law</u> is provided in a manner that limits disruptions in care, including the need for multiple biopsies or biospecimen samples.

<u>Proposed law</u> defines "biomarker", "biomarker testing", "clinical utility", "health coverage plan", and "nationally recognized clinical practice guidelines".

<u>Proposed law</u> applies to any new policy, contract, program, or health coverage plan issued on and after Jan. 1, 2024. Further requires any policy, contract, or health coverage plan in effect prior to Jan. 1, 2024, to convert to conform to <u>proposed law</u> on before the renewal date, but no later than Jan. 1, 2025.

(Adds R.S. 22:1028.5)

Summary of Amendments Adopted by Senate

$\frac{Committee\ Amendments\ Proposed\ by\ Senate\ Committee\ on\ Insurance\ to\ the\ original}{bill}$

- 1. Provides that tests are diagnostic tests.
- 2. Makes technical changes.

Summary of Amendments Adopted by House

The Committee Amendments Proposed by <u>House Committee on Insurance</u> to the <u>engrossed</u> bill:

- 1. Add that a biomarker test may identify any other medical condition.
- 2. Delete the definition of "consensus statements" and applicable references.
- 3. Define "clinical utility" and provide applicable references.
- 4. Add that <u>proposed law</u> does not require a health coverage plan to cover biomarker testing for screening purposes.
- 5. Add that the process for making exceptions to coverage may also be clearly outlined in a notification of adverse determination.
- 6. Add that <u>proposed law</u> applies to any new policy, contract, program, or health coverage plan issued on and after Jan. 1, 2024. Require any policy, contract, or health coverage plan in effect prior to Jan. 1, 2024, to convert to conform to proposed law on before the renewal date, but no later than Jan. 1, 2025.
- 7. Make technical changes.