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## Health Care & Wellness Committee

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### HB 1939

**Brief Description:** Requiring health plans to cover, with no cost sharing, colonoscopies performed as a result of a positive screening.

**Sponsors:** Representatives Rude, Bronoske, Valdez, Riccelli, Ormsby, Pollet and Kloba.

#### Brief Summary of Bill

- Prohibits a health carrier from imposing cost sharing for colonoscopies performed following a positive result on a non-colonoscopy preventive colorectal cancer screening test.

**Hearing Date:** 1/26/22

**Staff:** Jim Morishima (786-7191).

#### Background:

There are two main types of colorectal cancer screenings: stool tests (such as the fecal occult blood test and the fecal immunochemical test) and visualization tests (via colonoscopy). The United States Preventive Services Task Force gives both types of colorectal cancer screenings an "A" rating for adults aged 50 to 75 years and a "B" rating for adults aged 45 to 49 years.

Under the federal Affordable Care Act, most health carriers must cover preventive care services given an A or B rating by the United States Preventive Services Task Force, including colorectal cancer screenings. Health carriers must cover these services with no out-of-pocket costs to the enrollees. On January 10, 2022, the federal government released guidance prohibiting health carriers and other issuers from imposing cost sharing with respect to colonoscopies conducted after positive, non-invasive, stool-based screening tests or direct visualization screening tests. According to the guidance, the follow-up colonoscopy is considered part of the screening, so

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should be treated like the screening test for purposes of cost sharing.

State law also requires health plans to cover colorectal cancer examinations and laboratory tests consistent with guidelines or recommendations of the United States Preventive Services Task Force for individuals at least 50 years old and individuals who are under age 50 if they are at high risk or very high risk for colorectal cancer. State law allows patients to be subject to out-of-pocket costs, but at a rate no greater than the rate established for similar benefits.

**Summary of Bill:**

A health carrier offering a health plan issued on or after January 1, 2023, may not impose enrollee cost sharing on colonoscopies performed as a result of a positive result on a non-colonoscopy preventive colorectal cancer screening test assigned either a grade of A or B by the United States Preventive Services Task Force.

**Appropriation:** None.

**Fiscal Note:** Requested on January 20, 2022.

**Effective Date:** The bill takes effect 90 days after adjournment of the session in which the bill is passed.