SUBSTITUTE HOUSE BILL 1689

State of Washington 67th Legislature 2022 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Walen, Harris, Leavitt, Graham, Duerr, Davis, Slatter, and Tharinger)

READ FIRST TIME 01/27/22.

- 1 AN ACT Relating to exempting biomarker testing from prior 2 authorization for patients with late stage cancer; and adding a new
- 3 section to chapter 48.43 RCW.
- 4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:
- 5 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 48.43 6 RCW to read as follows:
- 7 (1) Health plans issued or renewed on or after January 1, 2023, 8 shall exempt an enrollee from prior authorization requirements for 9 coverage of biomarker testing for either of the following:
 - (a) Stage 3 or 4 cancer; or

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- (b) Recurrent, relapsed, refractory, or metastatic cancer.
- (2) For purposes of this section, "biomarker test" means a single or multigene diagnostic test of the cancer patient's biospecimen, such as tissue, blood, or other bodily fluids, for DNA, RNA, or protein alterations, including phenotypic characteristics of a malignancy, to identify an individual with a subtype of cancer, in order to guide patient treatment.
- 18 (3) For purposes of this section, biomarker testing must be:
- 19 (a) Recommended in the latest version of nationally recognized 20 guidelines or biomarker compendia, such as those published by the 21 national comprehensive cancer network;

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- (b) Approved by the United States food and drug administration or a validated clinical laboratory test performed in a clinical laboratory certified under the clinical laboratory improvement amendments or in an alternative laboratory program approved by the centers for medicare and medicaid services;
 - (c) A covered service; and

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- (d) Prescribed by an in-network provider.
- 8 (4) This section does not limit, prohibit, or modify an 9 enrollee's rights to biomarker testing as part of an approved 10 clinical trial under chapter 69.77 RCW.
- 11 (5) Nothing in this section may be construed to mandate coverage 12 of a health care service.
- 13 (6) Nothing in this section prohibits a health plan from 14 requiring a biomarker test prior to approving a drug or treatment.
- 15 (7) This section does not limit an enrollee's rights to access 16 individual gene tests.

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