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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2021

AN ACT

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

Introduced By: Representatives Ackerman, Chippendale, Hawkins, Baginski, and

McNamara

<u>Date Introduced:</u> February 08, 2021

Referred To: House Health & Human Services

It is enacted by the General Assembly as follows:

SECTION 1. Section 27-18-58 of the General Laws in Chapter 27-18 entitled "Accident and Sickness Insurance Policies" is hereby amended to read as follows:

27-18-58. Prostate and colorectal examinations -- Coverage mandated.

(a) Every individual or group hospital or accident and sickness insurance policy, medical expense insurance policy or individual or group hospital or medical services plan contract delivered, issued for delivery, or renewed in this state shall provide coverage for prostate and colorectal preventive screening examinations and laboratory tests for cancer for any nonsymptomatic person covered under that policy or contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal cancer screening of average risk individuals, including an initial colonoscopy or other medical test or procedure for colorectal cancer screening and a follow-up colonoscopy if the results of the initial medical test or procedure are abnormal. Provided, this section does not apply to insurance coverage providing benefits for: (1) hospital confinement indemnity; (2) disability income; (3) accident only; (4) long-term care; (5) Medicare supplement; (6) limited benefit health; (7) specific disease indemnity; (8) sickness or bodily injury or death by accident or both; and (9) other limited benefit policies.

18 (b) An insurer may not impose cost sharing on the coverage required by subsection (a) of 19 this section when the services are delivered within the health insurer's provider network.

| 1 | SECTION 2. Section 27-19-49 of the General Laws in Chapter 27-19 entitled "Nonprofit |
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| 2 | Hospital Service Corporations" is hereby amended to read as follows: |
| 3 | 27-19-49. Prostate and colorectal examinations Coverage mandated. |
| 4 | (a) Subscribers to any nonprofit hospital service corporation plan shall be afforded |
| 5 | coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for |
| 6 | any nonsymptomatic person covered under the policy or plan contract, in accordance with the |
| 7 | current American Cancer Society guidelines. The coverage required by this section shall include |
| 8 | preventive colorectal cancer screening coverage for all colorectal cancer examinations and |
| 9 | laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal |
| 10 | cancer screening of average risk individuals, including an initial colonoscopy or other medical test |
| 11 | or procedure for colorectal cancer screening and a follow-up colonoscopy if the results of the initial |
| 12 | medical test or procedure are abnormal. |
| 13 | (b) An insurer or the corporation may not impose cost sharing on the coverage required by |
| 14 | subsection (a) of this section when the services are delivered within the health insurer's provider |
| 15 | network. |
| 16 | SECTION 3. Section 27-20-44 of the General Laws in Chapter 27-20 entitled "Nonprofit |
| 17 | Medical Service Corporations" is hereby amended to read as follows: |
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| 18 | 27-20-44. Prostate and colorectal examinations Coverage mandated. |
| 18 19 | 27-20-44. Prostate and colorectal examinations Coverage mandated. (a) Subscribers to any nonprofit medical service corporation plan shall be afforded |
| | |
| 19 | (a) Subscribers to any nonprofit medical service corporation plan shall be afforded |
| 19 20 | (a) Subscribers to any nonprofit medical service <u>corporation</u> plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for |
| 19 20 21 | (a) Subscribers to any nonprofit medical service <u>corporation</u> plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or <u>plan</u> contract, in accordance with the |
| 19 20 21 22 | (a) Subscribers to any nonprofit medical service <u>corporation</u> plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or <u>plan</u> contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include |
| 19 20 21 22 23 | (a) Subscribers to any nonprofit medical service <u>corporation</u> plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or <u>plan</u> contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and |
| 19 20 21 22 23 24 | (a) Subscribers to any nonprofit medical service <u>corporation</u> plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or <u>plan</u> contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include <u>preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal</u> |
| 119 220 221 222 23 224 225 | (a) Subscribers to any nonprofit medical service <u>corporation</u> plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or <u>plan</u> contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal cancer screening of average risk individuals, including an initial colonoscopy or other medical test cancer screening of average risk individuals, including an initial colonoscopy or other medical test |
| 119 220 221 222 223 224 225 226 | (a) Subscribers to any nonprofit medical service corporation plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or plan contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal cancer screening of average risk individuals, including an initial colonoscopy or other medical test or procedure for colorectal cancer screening and a follow-up colonoscopy if the results of the initial |
| 119 220 221 222 223 224 225 226 227 | (a) Subscribers to any nonprofit medical service <u>corporation</u> plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or <u>plan</u> contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal cancer screening of average risk individuals, including an initial colonoscopy or other medical test or procedure for colorectal cancer screening and a follow-up colonoscopy if the results of the initial medical test or procedure are abnormal. |
| 119 220 221 222 223 224 225 226 227 228 | (a) Subscribers to any nonprofit medical service <u>corporation</u> plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or <u>plan</u> <u>contract</u> , in <u>accordance</u> <u>with the current American Cancer Society guidelines.</u> The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal cancer screening of average risk individuals, including an initial colonoscopy or other medical test or procedure for colorectal cancer screening and a follow-up colonoscopy if the results of the initial medical test or procedure are abnormal. (b) An insurer or the corporation may not impose cost sharing on the coverage required by |
| 19 20 21 22 23 24 25 26 27 28 | (a) Subscribers to any nonprofit medical service corporation plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or plan contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal cancer screening of average risk individuals, including an initial colonoscopy or other medical test or procedure for colorectal cancer screening and a follow-up colonoscopy if the results of the initial medical test or procedure are abnormal. (b) An insurer or the corporation may not impose cost sharing on the coverage required by subsection (a) of this section when the services are delivered within the health insurer's provider |
| 19 20 21 22 23 24 25 26 27 28 29 | (a) Subscribers to any nonprofit medical service corporation plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or plan contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal cancer screening of average risk individuals, including an initial colonoscopy or other medical test or procedure for colorectal cancer screening and a follow-up colonoscopy if the results of the initial medical test or procedure are abnormal. (b) An insurer or the corporation may not impose cost sharing on the coverage required by subsection (a) of this section when the services are delivered within the health insurer's provider network. |
| 19 20 21 22 23 24 25 26 27 28 29 30 | (a) Subscribers to any nonprofit medical service corporation plan shall be afforded coverage under the plan for prostate and colorectal examinations and laboratory tests for cancer for any nonsymptomatic person covered under the policy or plan contract, in accordance with the current American Cancer Society guidelines. The coverage required by this section shall include preventive colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in accordance with American Cancer Society Guidelines, including for colorectal cancer screening of average risk individuals, including an initial colonoscopy or other medical test or procedure for colorectal cancer screening and a follow-up colonoscopy if the results of the initial medical test or procedure are abnormal. (b) An insurer or the corporation may not impose cost sharing on the coverage required by subsection (a) of this section when the services are delivered within the health insurer's provider network. SECTION 4. Section 27-41-60 of the General Laws in Chapter 27-41 entitled "Health |

| 1 | under that plan for prostate and colorectal examinations and laboratory tests for cancer for any |
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| 2 | nonsymptomatic person covered under the policy or plan. contract, in accordance with the current |
| 3 | American cancer society guidelines. The coverage required by this section shall include preventive |
| 4 | colorectal cancer screening coverage for all colorectal cancer examinations and laboratory tests in |
| 5 | accordance with American Cancer Society Guidelines, including for colorectal cancer screening of |
| 6 | average risk individuals, including an initial colonoscopy or other medical test or procedure for |
| 7 | colorectal cancer screening and a follow-up colonoscopy if the results of the initial medical test or |
| 8 | procedure are abnormal. |
| 9 | (b) An insurer or the organization may not impose cost sharing on the coverage required |
| 10 | by subsection (a) of this section when the services are delivered within the health insurer's provider |
| 11 | network. |
| 12 | SECTION 5. This act shall take effect upon passage and shall apply to policies or plans |
| 13 | delivered, issued for delivery or renewed in this state on and after January 1, 2022. |

LC000514

EXPLANATION

BY THE LEGISLATIVE COUNCIL

OF

AN ACT

RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES

1 This act would provide insurance coverage for certain prostate and colorectal preventive 2 screening examinations and would prohibit cost sharing for persons related to colorectal screening 3 examinations, laboratory tests, initial and follow-up colonoscopies covered by health insurance 4 policies or plans. This act would take effect upon passage and would apply to policies or plans delivered, 5 6 issued for delivery or renewed in this state on and after January 1, 2022. LC000514