HOUSE BILL No. 1080

DIGEST OF INTRODUCED BILL

Citations Affected: IC 5-10-8; IC 27-1-1.5-9; IC 27-8-14.8-3; IC 27-13-7-17.

Synopsis: Colorectal cancer screening. Amends the laws concerning group insurance for public employees, health insurance, and health maintenance organizations: (1) to eliminate provisions limiting mandatory coverage for colorectal cancer examinations to individuals who are at least 50 years of age or who are at high risk for colorectal cancer; and (2) to mandate coverage for colorectal cancer examinations according to the guidelines of the American Cancer Society that are in effect on January 1, 2020.

Effective: July 1, 2020.

Barrett

January 7, 2020, read first time and referred to Committee on Insurance.



Introduced

Second Regular Session of the 121st General Assembly (2020)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2019 Regular Session of the General Assembly.

HOUSE BILL No. 1080

A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

1	SECTION 1. IC 5-10-8-1, AS AMENDED BY P.L.108-2019,
2	SECTION 83, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2020]: Sec. 1. The following definitions apply in this chapter:
4	(1) "Employee" means:
5	(A) an elected or appointed officer or official, or a full-time
6	employee;
7	(B) if the individual is employed by a school corporation, a
8	full-time or part-time employee;
9	(C) for a local unit public employer, a full-time or part-time
10	employee or a person who provides personal services to the
11	unit under contract during the contract period; or
12	(D) a senior judge appointed under IC 33-24-3-7;
13	whose services have continued without interruption at least thirty
14	(30) days.
15	(2) "Group insurance" means any of the kinds of insurance
16	fulfilling the definitions and requirements of group insurance
17	contained in IC 27-1.



1 (3) "INPRS" refers to the Indiana public retirement system 2 established by IC 5-10.5-2-1. 3 (4) "Insurance" means insurance upon or in relation to human life 4 in all its forms, including life insurance, health insurance, 5 disability insurance, accident insurance, hospitalization insurance, 6 surgery insurance, medical insurance, and supplemental medical 7 insurance. 8 (5) "Local unit" includes a city, town, county, township, public 9 library, municipal corporation (as defined in IC 5-10-9-1), school 10 corporation, or charter school. (6) "New traditional plan" means a self-insurance program 11 12 established under section 7(b) of this chapter to provide health 13 care coverage. 14 (7) "Public employer" means the state or a local unit, including 15 any board, commission, department, division, authority, 16 institution, establishment, facility, or governmental unit under the 17 supervision of either, having a payroll in relation to persons it 18 immediately employs, even if it is not a separate taxing unit. With 19 respect to the legislative branch of government, "public employer" 20 or "employer" refers to the following: 21 (A) The president pro tempore of the senate, with respect to 22 former members or employees of the senate. 23 (B) The speaker of the house, with respect to former members 24 or employees of the house of representatives. 25 (C) The legislative council, with respect to former employees 26 of the legislative services agency. 27 (8) "Public employer" does not include a state educational 28 institution. 29 (9) "Retired employee" means: 30 (A) in the case of a public employer that participates in the 31 public employees' retirement fund, a former employee who 32 qualifies for a benefit under IC 5-10.3-8 or IC 5-10.2-4; 33 (B) in the case of a public employer that participates in the 34 teachers' retirement fund under IC 5-10.4, a former employee 35 who qualifies for a benefit under IC 5-10.4-5; and 36 (C) in the case of any other public employer, a former 37 employee who meets the requirements established by the 38 public employer for participation in a group insurance plan for 39 retired employees. 40 (10) "Retirement date" means the date that the employee has 41 chosen to receive retirement benefits from the employees' 42 retirement fund.

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(11) "American Cancer Society guidelines" refers to the 1 2 guidelines for colorectal cancer screening published by the 3 American Cancer Society that are in effect on January 1, 4 2020. 5 SECTION 2. IC 5-10-8-7.8 IS AMENDED TO READ AS 6 FOLLOWS [EFFECTIVE JULY 1, 2020]: Sec. 7.8. (a) As used in this 7 section, "covered individual" means an individual who is: 8 (1) covered under a self-insurance program established under 9 section 7(b) of this chapter to provide group health coverage; or 10 (2) entitled to services under a contract with a health maintenance 11 organization (as defined in IC 27-13-1-19) that is entered into or 12 renewed under section 7(c) of this chapter. 13 (b) A: 14 (1) self-insurance program established under section 7(b) of this 15 chapter to provide health care coverage; or (2) contract with a health maintenance organization that is entered 16 17 into or renewed under section 7(c) of this chapter; 18 must provide coverage for colorectal cancer examinations and 19 laboratory tests for cancer for any nonsymptomatic covered individual, 20 in accordance with the current American Cancer Society guidelines. 21 (c) For a covered individual who is: 22 (1) at least fifty (50) years of age; or 23 (2) less than fifty (50) years of age and at high risk for colorectal 24 cancer according to the most recent published guidelines of the 25 American Cancer Society; 26 the coverage required under this section must meet the requirements set 27 forth in subsection (d). 28 (d) (c) A covered individual may not be required to pay an 29 additional deductible or coinsurance for the colorectal cancer 30 examination and laboratory testing benefit required by this section 31 that is greater than an annual deductible or coinsurance established for 32 similar benefits under a the self-insurance program or contract with a 33 health maintenance organization under which the covered individual 34 is covered or entitled to services. If the program or contract does not 35 cover a similar benefit, a deductible or coinsurance for the colorectal 36 cancer examination and laboratory testing benefit may not be set at 37 a level that materially diminishes the value of the colorectal cancer 38 examination and laboratory testing benefit. required under this section. 39 SECTION 3. IC 27-1-1.5-9, AS ADDED BY P.L.124-2018, 40 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 41 JULY 1, 2020]: Sec. 9. "American Cancer Society guidelines" refers to 42 the guidelines published by the American Cancer Society that are in



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1 effect on January 1, 2018. 2020.

2 SECTION 4. IC 27-8-14.8-3, AS AMENDED BY P.L.124-2018, 3 SECTION 82, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 4 JULY 1, 2020]: Sec. 3. (a) Except as provided in subsection (d), (c), an 5 insurer shall provide coverage for colorectal cancer examinations and 6 laboratory tests for cancer for any nonsymptomatic insured, in 7 accordance with the American Cancer Society guidelines, in any 8 accident and sickness insurance policy that the insurer issues in Indiana 9 or issues for delivery in Indiana. 10 (b) For an insured who is: 11 (1) at least fifty (50) years of age; or (2) less than fifty (50) years of age and at high risk for colorectal 12 13 cancer according to the American Cancer Society guidelines; 14 the coverage required under this section must meet the requirements set 15 forth in subsection (c). 16 (c) (b) An insured may not be required to pay an additional annual 17 deductible or coinsurance for the colorectal cancer examination and 18 laboratory testing benefit required by this section that is greater than 19 an annual deductible or coinsurance established for similar benefits 20 under an the accident and sickness insurance policy under which the 21 insured is covered. If the accident and sickness insurance policy does 22 not cover a similar benefit, a deductible or coinsurance for the 23 colorectal cancer examination and laboratory testing benefit may 24 not be set at a level that materially diminishes the value of the 25 colorectal cancer examination and laboratory testing benefit. required 26 under this section. 27 (d) (c) In the case of an accident and sickness insurance policy that 28 is not employer based, the insurer shall offer to provide the coverage 29 described in this section. subsection (a). 30 SECTION 5. IC 27-13-7-17, AS AMENDED BY P.L.124-2018, 31 SECTION 90, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE 32 JULY 1, 2020]: Sec. 17. (a) As used in this section, "colorectal cancer 33 testing" means examinations and laboratory tests for cancer for any 34 nonsymptomatic enrollee provided in accordance with the American 35 Cancer Society guidelines that are in effect on January 1, 2020. 36 (b) Except as provided in subsection (e), (d), a health maintenance 37 organization issued a certificate of authority in Indiana shall provide 38 colorectal cancer testing as a covered service under every group 39 contract that provides coverage for basic health care services. 40

- (c) For an enrollee who is:
 - (1) at least fifty (50) years of age; or

(2) less than fifty (50) years of age and at high risk for colorectal



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cancer according to the American Cancer Society guidelines; the colorectal cancer testing required under this section must meet the requirements set forth in subsection (d). (d) (c) An enrollee may not be required to pay a copayment for the

5 colorectal cancer examination and laboratory testing benefit required 6 by this section that is greater than a copayment established for similar 7 benefits under a the group contract under which the enrollee is 8 entitled to services. If the group contract does not cover a similar 9 covered service, the copayment for the colorectal cancer 10 examination and laboratory testing benefit may not be set at a level that materially diminishes the value of the colorectal cancer 11 12 examination and laboratory testing benefit. required under this section. 13 (e) (d) In the case of coverage that is not employer based, the health 14 maintenance organization is required only to offer to provide the 15 colorectal cancer testing described in subsections (b) through (d) as a 16 covered service under a proposed group contract providing coverage 17 for basic health care services.



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