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H.251

Introduced by Representative Canfield of Fair Haven

Referred to Committee on

Date:

Subject: Health; health insurance; bone marrow testing

Statement of purpose of bill as introduced: This bill proposes to require health insurers to provide coverage for expenses related to bone marrow testing.

An act relating to health insurance coverage for bone marrow testing

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. 8 V.S.A. chapter 107, subchapter 15 is added to read:

Subchapter 15. Bone Marrow Testing

§ 4100I. BONE MARROW TESTING; COVERAGE REQUIRED

(a) Each health insurance plan issued in this State shall provide coverage for expenses arising from human leukocyte antigen testing, also referred to as histocompatibility locus antigen testing, for A, B, and DR antigens for use in bone marrow transplantation.

(b) A health insurance plan shall:

(1) require that the testing provided for in subsection (a) of this section be performed in a facility:

1 (A) accredited by the American Society for Histocompatibility and
2 Immunogenetics or its successor; and

3 (B) certified under the Clinical Laboratory Improvement Act of 1967,
4 42 U.S.C. § 263a; and

5 (2) limit coverage to individuals who, at the time of the testing,
6 complete and sign an informed consent form that also authorizes the results of
7 the test to be used for participation in the National Marrow Donor Program.

8 (c) A health insurance plan shall not impose a co-payment, coinsurance,
9 deductible, or other cost-sharing requirement for human leukocyte antigen
10 testing in excess of 20 percent of the cost of such testing per year.

11 (d) A health insurance plan may limit coverage for the testing provided for
12 in subsection (a) of this section to a lifetime maximum benefit of one test.

13 (e) As used in this section, “health insurance plan” means a health
14 insurance policy or health benefit plan offered by a health insurer, as defined in
15 18 V.S.A. § 9402, that is licensed to do business in Vermont but does not
16 include:

17 (1) health benefit plans issued pursuant to 33 V.S.A. § 1811; or

18 (2) policies or plans providing coverage for specified disease or other
19 limited benefit coverage.

1 Sec. 2. APPLICABILITY AND EFFECTIVE DATE

2 This act shall take effect on October 1, 2013 and shall apply to all health
3 benefit plans on and after October 1, 2013 on such date as a health insurer
4 offers, issues, or renews the health benefit plan, but in no event later than
5 October 1, 2014.