

# STATE OF NEW YORK

5651

2019-2020 Regular Sessions

## IN ASSEMBLY

February 14, 2019

Introduced by M. of A. ROZIC, PEOPLES-STOKES, AUBRY, ABINANTI, BARNWELL, BLAKE, COLTON, COOK, CRESPO, D'URSO, GUNTHER, JAFFEE, JONES, OTIS, PERRY, SIMON, STECK, TITUS, WEPRIN, MONTESANO, M. G. MILLER -- read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to requiring health insurance policies to cover comprehensive tests for ovarian cancer in certain cases

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Subsection (i) of section 3216 of the insurance law is  
2 amended by adding a new paragraph 11-b to read as follows:

3 (11-b) (A) Every policy that provides coverage for hospital, surgical  
4 or medical care shall provide the following coverage for screening for  
5 ovarian cancer:

6 (i) upon the recommendation of a physician, a pelvic exam, genetic  
7 testing, ultrasound and blood testing at any age for covered persons  
8 having a high risk of developing ovarian cancer or who have a first  
9 degree relative with a prior history of ovarian cancer;

10 (ii) a single baseline ultrasound for covered persons aged thirty-five  
11 through thirty-nine, inclusive; and

12 (iii) an annual ultrasound for covered persons aged forty and older.

13 (B) Such coverage required pursuant to subparagraph (A) of this para-  
14 graph may be subject to annual deductibles and coinsurance as may be  
15 deemed appropriate by the superintendent and as are consistent with  
16 those established for other benefits within a given policy.

17 (C) (i) Such policy shall provide for additional coverage for computed  
18 tomography, barium enema X-rays, magnetic resonance imaging (MRI), posi-  
19 tron emission tomography, laparoscopy, colonoscopy and biopsy if a  
20 person is believed to be at increased risk for ovarian cancer due to  
21 family history or prior personal history of ovarian cancer, positive

EXPLANATION--Matter in italics (underscored) is new; matter in brackets  
[-] is old law to be omitted.

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1 genetic testing or other indications as determined by such person's  
2 physician or nurse practitioner.

3 (ii) Such additional coverage may be subject to annual deductibles and  
4 coinsurance as may be deemed appropriate by the superintendent and as  
5 are consistent with those established for other benefits within a given  
6 policy.

7 § 2. Subsection (1) of section 3221 of the insurance law is amended by  
8 adding a new paragraph 11-b to read as follows:

9 (11-b) (A) Every insurer delivering a group or blanket policy or issu-  
10 ing a group or blanket policy for delivery in this state that provides  
11 coverage for hospital, surgical or medical care shall provide the  
12 following coverage for screening for ovarian cancer:

13 (i) upon the recommendation of a physician, a pelvic exam, genetic  
14 testing, ultrasound and blood testing at any age for covered persons  
15 having a high risk of developing ovarian cancer or who have a first  
16 degree relative with a prior history of ovarian cancer;

17 (ii) a single baseline ultrasound for covered persons aged thirty-five  
18 through thirty-nine, inclusive; and

19 (iii) an annual ultrasound for covered persons aged forty and older.

20 (B) Such coverage required pursuant to subparagraph (A) of this para-  
21 graph may be subject to annual deductibles and coinsurance as may be  
22 deemed appropriate by the superintendent and as are consistent with  
23 those established for other benefits within a given policy.

24 (C) (i) Such policy shall provide for additional coverage for computed  
25 tomography, barium enema X-rays, magnetic resonance imaging (MRI), posi-  
26 tron emission tomography, laparoscopy, colonoscopy and biopsy if a  
27 person is believed to be at increased risk for ovarian cancer due to  
28 family history or prior personal history of ovarian cancer, positive  
29 genetic testing or other indications as determined by such person's  
30 physician or nurse practitioner.

31 (ii) Such additional coverage may be subject to annual deductibles and  
32 coinsurance as may be deemed appropriate by the superintendent and as  
33 are consistent with those established for other benefits within a given  
34 policy.

35 § 3. Section 4303 of the insurance law is amended by adding a new  
36 subsection (p-1) to read as follows:

37 (p-1) (1) A medical expense indemnity corporation, a hospital service  
38 corporation or a health service corporation that provides coverage for  
39 hospital, surgical or medical care shall provide the following coverage  
40 for screening for ovarian cancer:

41 (A) upon the recommendation of a physician, a pelvic exam, genetic  
42 testing, ultrasound and blood testing at any age for covered persons  
43 having a high risk of developing ovarian cancer or who have a first  
44 degree relative with a prior history of ovarian cancer;

45 (B) a single baseline ultrasound for covered persons aged thirty-five  
46 through thirty-nine, inclusive; and

47 (C) an annual ultrasound for covered persons aged forty and older.

48 (2) Such coverage required pursuant to subparagraph (A) of this para-  
49 graph may be subject to annual deductibles and coinsurance as may be  
50 deemed appropriate by the superintendent and as are consistent with  
51 those established for other benefits within a given policy.

52 (3) (A) Such policy shall provide for additional coverage for computed  
53 tomography, barium enema X-rays, magnetic resonance imaging (MRI), posi-  
54 tron emission tomography, laparoscopy, colonoscopy and biopsy if a  
55 person is believed to be at increased risk for ovarian cancer due to  
56 family history or prior personal history of ovarian cancer, positive

1 genetic testing or other indications as determined by such person's  
2 physician or nurse practitioner.

3 (B) Such additional coverage may be subject to annual deductibles and  
4 coinsurance as may be deemed appropriate by the superintendent and as  
5 are consistent with those established for other benefits within a given  
6 policy.

7 § 4. This act shall take effect on the sixtieth day after it shall  
8 have become a law.