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:

- Section 1. Subsection (i) of section 3216 of the insurance law is 1 amended by adding a new paragraph 11-b to read as follows:
- 3 (11-b) (A) Every policy that provides coverage for hospital, surgical or medical care shall provide the following coverage for screening for 5 ovarian cancer:
- (i) upon the recommendation of a physician, a pelvic exam, genetic 7 testing, ultrasound and blood testing at any age for covered persons having a high risk of developing ovarian cancer or who have a first 8 degree relative with a prior history of ovarian cancer; 9
- 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 paragraph may be subject to annual deductibles and coinsurance as may be 14 deemed appropriate by the superintendent and as are consistent with 15
- 16 those established for other benefits within a given policy.

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- 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
- person is believed to be at increased risk for ovarian cancer due to 20
- 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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genetic testing or other indications as determined by such person's 1 2 physician or nurse practitioner.

- (ii) Such additional coverage may be subject to annual deductibles and coinsurance as may be deemed appropriate by the superintendent and as are consistent with those established for other benefits within a given policy.
- § 2. Subsection (1) of section 3221 of the insurance law is amended by adding a new paragraph 11-b to read as follows:
- (11-b) (A) Every insurer delivering a group or blanket policy or issuing a group or blanket policy for delivery in this state that provides coverage for hospital, surgical or medical care shall provide the following coverage for screening for ovarian cancer:
- (i) upon the recommendation of a physician, a pelvic exam, genetic testing, ultrasound and blood testing at any age for covered persons having a high risk of developing ovarian cancer or who have a first 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
 - (iii) an annual ultrasound for covered persons aged forty and older.
 - (B) Such coverage required pursuant to subparagraph (A) of this paragraph may be subject to annual deductibles and coinsurance as may be deemed appropriate by the superintendent and as are consistent with those established for other benefits within a given policy.
 - (C) (i) Such policy shall provide for additional coverage for computed tomography, barium enema X-rays, magnetic resonance imaging (MRI), positron emission tomography, laparoscopy, colonoscopy and biopsy if a person is believed to be at increased risk for ovarian cancer due to family history or prior personal history of ovarian cancer, positive genetic testing or other indications as determined by such person's physician or nurse practitioner.
- (ii) Such additional coverage may be subject to annual deductibles and 32 coinsurance as may be deemed appropriate by the superintendent and as are consistent with those established for other benefits within a given 33 34 policy.
- Section 4303 of the insurance law is amended by adding a new 35 subsection (p-1) to read as follows: 36
 - (p-1) (1) A medical expense indemnity corporation, a hospital service corporation or a health service corporation that provides coverage for hospital, surgical or medical care shall provide the following coverage for screening for ovarian cancer:
 - (A) upon the recommendation of a physician, a pelvic exam, genetic testing, ultrasound and blood testing at any age for covered persons having a high risk of developing ovarian cancer or who have a first 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
 - (C) an annual ultrasound for covered persons aged forty and older.
 - (2) Such coverage required pursuant to subparagraph (A) of this paragraph may be subject to annual deductibles and coinsurance as may be deemed appropriate by the superintendent and as are consistent with those established for other benefits within a given policy.
- (3) (A) Such policy shall provide for additional coverage for computed tomography, barium enema X-rays, magnetic resonance imaging (MRI), posi-53 tron emission tomography, laparoscopy, colonoscopy and biopsy if a 54 person is believed to be at increased risk for ovarian cancer due to 55 family history or prior personal history of ovarian cancer, positive

A. 5651 3

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.