



House of Representatives

General Assembly

File No. 758

January Session, 2011

Substitute House Bill No. 5032

House of Representatives, May 5, 2011

The Committee on Appropriations reported through REP. WALKER of the 93rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR BONE MARROW TESTING.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective January 1, 2012*) (a) Subject to the
2 provisions of subsection (b) of this section, each individual health
3 insurance policy providing coverage of the type specified in
4 subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general
5 statutes delivered, issued for delivery, amended, renewed or
6 continued in this state shall provide coverage for expenses arising
7 from medically necessary human leukocyte antigen testing, also
8 referred to as histocompatibility locus antigen testing, for A, B and DR
9 antigens for utilization in bone marrow transplantation.

10 (b) No such policy shall impose a coinsurance, copayment,
11 deductible or other out-of-pocket expense for such testing in excess of
12 twenty per cent of the cost for such testing per year. The provisions of
13 this subsection shall not apply to a high deductible health plan as that
14 term is used in subsection (f) of section 38a-493 of the general statutes.

15 (c) Such policy shall:

16 (1) Require that such testing be performed in a facility (A)
17 accredited by the American Society for Histocompatibility and
18 Immunogenetics, or its successor, and (B) certified under the Clinical
19 Laboratory Improvement Act of 1967, 42 USC Section 263a, as
20 amended from time to time; and

21 (2) Limit coverage to individuals who, at the time of such testing,
22 complete and sign an informed consent form that also authorizes the
23 results of the test to be used for participation in the National Marrow
24 Donor Program.

25 (d) Such policy may limit such coverage to a lifetime maximum
26 benefit of one testing.

27 Sec. 2. (NEW) (*Effective January 1, 2012*) (a) Subject to the provisions
28 of subsection (b) of this section, each group health insurance policy
29 providing coverage of the type specified in subdivisions (1), (2), (4),
30 (11) and (12) of section 38a-469 of the general statutes delivered, issued
31 for delivery, amended, renewed or continued in this state shall provide
32 coverage for expenses arising from medically necessary human
33 leukocyte antigen testing, also referred to as histocompatibility locus
34 antigen testing, for A, B and DR antigens for utilization in bone
35 marrow transplantation.

36 (b) No such policy shall impose a coinsurance, copayment,
37 deductible or other out-of-pocket expense for such testing in excess of
38 twenty per cent of the cost for such testing per year. The provisions of
39 this subsection shall not apply to a high deductible health plan as that
40 term is used in subsection (f) of section 38a-520 of the general statutes.

41 (c) Such policy shall:

42 (1) Require that such testing be performed in a facility (A)
43 accredited by the American Society for Histocompatibility and
44 Immunogenetics, or its successor, and (B) certified under the Clinical
45 Laboratory Improvement Act of 1967, 42 USC Section 263a, as

46 amended from time to time; and

47 (2) Limit coverage to individuals who, at the time of such testing,
48 complete and sign an informed consent form that also authorizes the
49 results of the test to be used for participation in the National Marrow
50 Donor Program.

51 (d) Such policy may limit such coverage to a lifetime maximum
52 benefit of one testing.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>January 1, 2012</i>	New section
Sec. 2	<i>January 1, 2012</i>	New section

APP *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note**State Impact:** None**Municipal Impact:** None**Explanation**

The bill does not result in a fiscal impact to the state or municipalities. The bill requires health insurance policies to cover medically necessary testing to determine compatibility for bone marrow transplants. It is unlikely compatibility testing for potential bone marrow donors would be deemed medically necessary and as a result the test would not be required to be covered.

The Out Years**State Impact:** None**Municipal Impact:** None

OLR Bill Analysis**sHB 5032*****AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR BONE MARROW TESTING.*****SUMMARY:**

This bill requires health insurance policies to cover medically necessary testing to determine compatibility for bone marrow transplants, known as human leukocyte antigen testing and also referred to as histocompatibility locus antigen testing, for A, B, and DR antigens. Under the bill, a policy (1) may limit coverage to one covered test in a person's lifetime and (2) cannot impose a coinsurance, copayment, deductible, or other out-of-pocket expense for the testing that exceeds 20% of the cost for testing per year, unless it is a high-deductible policy designed to be compatible with federally qualified health savings accounts.

The bill requires a policy to (1) require bone marrow testing at a facility certified under the federal Clinical Laboratory Improvement Act and accredited by the American Society for Histocompatibility and Immunogenetics or its successor and (2) limit coverage to people who sign up for the National Marrow Donor Program when being tested.

The bill applies to individual and group health insurance policies delivered, issued, renewed, amended, or continued in Connecticut that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; and (4) hospital or medical services, including coverage under an HMO plan.

Under federal law (ERISA), state insurance benefit mandates do not apply to self-insured benefit plans.

EFFECTIVE DATE: January 1, 2012

BACKGROUND***Legislative History***

On March 16, the House referred the bill (File 40) to the Appropriations Committee, which approved a substitute that limits the coverage requirement to only “medically necessary” human leukocyte antigen testing.

Medically Necessary

The law defines “medically necessary” as health care services that a physician, exercising prudent clinical judgment, would provide to a patient to prevent, evaluate, diagnose, or treat an illness, injury, disease, or its symptoms, and that are:

1. in accordance with generally accepted standards of medical practice;
2. clinically appropriate, in terms of type, frequency, extent, site, and duration and considered effective for the patient's illness, injury, or disease;
3. not primarily for the convenience of the patient, physician, or other health care provider; and
4. not more costly than an alternative service or sequence of services at least as likely to produce equivalent therapeutic or diagnostic results.

Clinical Laboratory Improvement Act

The federal Centers for Medicare and Medicaid Services regulate all laboratory testing (except research) performed on people in the United States under the Clinical Laboratory Improvement Act.

American Society for Histocompatibility and Immunogenetics

This society is a nonprofit association of clinical and research professionals, including immunologists, geneticists, transplant physicians and surgeons, and pathologists. It is a member of the United Network for Organ Sharing and works with numerous

scientific and medical organizations, including the National Marrow Donor Program. It develops and maintains accreditation standards for laboratories.

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable

Yea 12 Nay 6 (02/17/2011)

Appropriations Committee

Joint Favorable Substitute

Yea 39 Nay 6 (04/25/2011)