



General Assembly

February Session, 2012

Raised Bill No. 98

LCO No. 799

00799_____INS

Referred to Committee on Insurance and Real Estate

Introduced by:
(INS)

AN ACT CONCERNING DEDUCTIBLES AND GUIDELINES FOR COLONOSCOPIES.

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

1 Section 1. Section 38a-492k of the 2012 supplement to the general
2 statutes is repealed and the following is substituted in lieu thereof
3 (*Effective January 1, 2013*):

4 (a) Each individual health insurance policy providing coverage of
5 the type specified in subdivisions (1), (2), (4), (11) and (12) of section
6 38a-469 delivered, issued for delivery, amended, renewed or continued
7 in this state shall provide coverage for colorectal cancer screening,
8 including, but not limited to, (1) an annual fecal occult blood test, and
9 (2) colonoscopy, flexible sigmoidoscopy or radiologic imaging, in
10 accordance with the recommendations established by the American
11 College of Gastroenterology, [after consultation with] the American
12 Cancer Society [and] or the American College of Radiology, based on
13 the ages, family histories and frequencies provided in the
14 recommendations. Except as specified in subsection (b) of this section,
15 benefits under this section shall be subject to the same terms and
16 conditions applicable to all other benefits under such policies.

17 (b) No such policy shall impose; [a]

18 (1) A deductible for a procedure that a physician initially
19 undertakes as a screening colonoscopy or a screening sigmoidoscopy;
20 or

21 (2) A coinsurance, copayment, deductible or other out-of-pocket
22 expense for any additional colonoscopy ordered in a policy year by a
23 physician for an insured. The provisions of this [subsection]
24 subdivision shall not apply to a high deductible health plan as that
25 term is used in subsection (f) of section 38a-493.

26 Sec. 2. Section 38a-518k of the 2012 supplement to the general
27 statutes is repealed and the following is substituted in lieu thereof
28 (*Effective January 1, 2013*):

29 (a) Each group health insurance policy providing coverage of the
30 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-
31 469 delivered, issued for delivery, amended, renewed or continued in
32 this state shall provide coverage for colorectal cancer screening,
33 including, but not limited to, (1) an annual fecal occult blood test, and
34 (2) colonoscopy, flexible sigmoidoscopy or radiologic imaging, in
35 accordance with the recommendations established by the American
36 College of Gastroenterology, [after consultation with] the American
37 Cancer Society [and] or the American College of Radiology, based on
38 the ages, family histories and frequencies provided in the
39 recommendations. Except as specified in subsection (b) of this section,
40 benefits under this section shall be subject to the same terms and
41 conditions applicable to all other benefits under such policies.

42 (b) No such policy shall impose; [a]

43 (1) A deductible for a procedure that a physician initially
44 undertakes as a screening colonoscopy or a screening sigmoidoscopy;
45 or

46 (2) A coinsurance, copayment, deductible or other out-of-pocket

47 expense for any additional colonoscopy ordered in a policy year by a
48 physician for an insured. The provisions of this subsection shall not
49 apply to a high deductible health plan as that term is used in
50 subsection (f) of section 38a-520.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>January 1, 2013</i>	38a-492k
Sec. 2	<i>January 1, 2013</i>	38a-518k

Statement of Purpose:

To prohibit insurers from imposing a deductible for a procedure that is initially undertaken as a screening colonoscopy or a screening sigmoidoscopy.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]