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HOUSE BILL NO. 2611

Offered January 13, 2025

A BILL to amend the Code of Virginia by adding a section numbered 38.2-3418.7:2, relating to health insurance; coverage for cancer follow-up testing; report.

Patrons—Seibold, Clark, Convirs-Fowler, Cousins, Keys-Gamarra, Martinez, Mundon King, Rasoul and Shin; Senator: Pekarsky

Referred to Committee on Labor and Commerce

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding a section numbered 38.2-3418.7:2 as follows:

§ 38.2-3418.7:2. Coverage for cancer follow-up testing.

A. For the purposes of this section, "cancer follow-up testing" means diagnostic testing, screening, imaging, or other medically necessary procedures recommended by a licensed health care provider for monitoring patients after cancer treatment to detect recurrence or progression.

B. Notwithstanding the provisions of § 38.2-3419, subdivision A 1 of § 38.2-6506, or any other provision of law, each insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis; each corporation providing individual or group accident and sickness subscription contracts; and each health maintenance organization providing a health care plan for health services shall provide coverage for cancer follow-up testing under such policy, contract, or plan delivered, issued for delivery, or renewed in the Commonwealth.

C. Coverage for cancer follow-up testing shall include imaging services such as magnetic resonance imaging (MRI), computed tomographic (CT) scanning, positron emission tomographic (PET) scanning, and ultrasounds; laboratory tests, including blood tests, biopsies, and tumor marker screenings; and any additional follow-up tests or screenings deemed necessary by a licensed health care provider.

D. The coverage provided under this section shall not prohibit an insurer from applying a deductible, coinsurance, or any other cost-sharing requirements consistent with other medical benefits under the policy, provided that no deductible, coinsurance, or other cost-sharing requirements shall be imposed specifically for cancer follow-up testing received from participating providers under the policy, contract, or plan.

E. That provisions of this section shall not apply to (i) short-term travel, accident-only, or limited or specific disease policies, other than cancer policies; (ii) short-term nonrenewable policies of not more than six months' duration; or (iii) policies or contracts designed for issuance to persons eligible for coverage under Title XVIII of the Social Security Act, known as Medicare, or any other similar coverage under state or federal governmental plans.

2. That the State Corporation Commission's Bureau of Insurance shall submit an annual report to the General Assembly on the impacts of § 38.2-3418.7:2 of the Code of Virginia, as created by this act, including (i) the number of individuals benefiting from the removal of copayments for cancer follow-up testing; (ii) the financial impact on health insurance premiums; and (iii) recommendations for further policy adjustments, if needed. The Bureau of Insurance shall submit its first report no later than December 1, 2026, and annually thereafter.

3. That the provisions of the first enactment of this act shall apply to insurance policies, contracts, and plans delivered, issued for delivery, or extended on and after January 1, 2026.

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