

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from scanned originals with text recognition applied
(searchable text may contain some errors and/or omissions)

RepC

SMC
H

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35

Date: 3/27/14

L.D. 1600
(Filing No. H-756)

Report C

INSURANCE AND FINANCIAL SERVICES

Reproduced and distributed under the direction of the Clerk of the House.

**STATE OF MAINE
HOUSE OF REPRESENTATIVES
126TH LEGISLATURE
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT "B" to H.P. 1172, L.D. 1600, Bill, "An Act To Require Health Insurers To Provide Coverage for Human Leukocyte Antigen Testing To Establish Bone Marrow Donor Transplantation Suitability"

Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:

Sec. 1. 24-A MRSA §4320-I is enacted to read:

§4320-I. Coverage for the cost of testing for bone marrow donation suitability

1. Required coverage. A carrier offering a health plan in this State shall provide coverage for laboratory fees up to \$150 arising from human leukocyte antigen testing performed to establish bone marrow transplantation suitability in accordance with the following requirements:

A. The enrollee covered under the health plan must meet the criteria for testing established by the National Marrow Donor Program, or its successor organization;

B. The testing must be performed in a facility that is accredited by a national accrediting body with requirements that are substantially equivalent to or more stringent than those of the College of American Pathologists and is certified under the federal Clinical Laboratories Improvement Act of 1967, 42 United States Code, Section 263a;

C. At the time of the testing, the enrollee covered under the health plan must complete and sign an informed consent form that authorizes the results of the test to be used for participation in the National Marrow Donor Program, or its successor organization, and acknowledges a willingness to be a bone marrow donor if a suitable match is found;

D. The carrier may limit each enrollee to one test per lifetime; and

E. The carrier may limit the scope of coverage to an enrollee who is an immediate family member of an individual for whom a bone marrow transplant has been determined medically necessary or who becomes a donor as part of a donor drive

COMMITTEE AMENDMENT

1 conducted on behalf of an individual for whom a bone marrow transplant has been
2 determined medically necessary.

3 2. Prohibition on cost-sharing. A carrier may not impose any deductible,
4 copayment, coinsurance or other cost-sharing requirement on an enrollee for the coverage
5 required under this section.

6 **Sec. 2. Application.** The requirements of this Act apply to all policies, contracts
7 and certificates subject to this Act that are executed, delivered, issued for delivery,
8 continued or renewed in this State on or after January 1, 2015. For purposes of this Act,
9 all contracts are deemed to be renewed no later than the next yearly anniversary of the
10 contract date.'

11 **SUMMARY**

12 This amendment is a minority report of the committee and replaces the bill. This
13 amendment requires carriers offering health plans in this State to provide coverage for
14 laboratory fees up to \$150 arising from human leukocyte antigen testing performed to
15 establish bone marrow transplantation suitability and prohibits carriers from imposing
16 any cost-sharing requirement on enrollees for the test. The amendment specifies that
17 enrollees in a health plan must meet the criteria for testing established by the National
18 Marrow Donor Program and sign an informed consent form at the time of testing along
19 with an acknowledgment that the enrollee is willing to be a donor if a suitable match is
20 found. Testing is limited to once per lifetime. Unlike the majority report, this amendment
21 limits the scope of coverage to immediate family members and donor drives conducted
22 for a specified individual donee.

23 The amendment applies to all health plan policies and contracts issued or renewed on
24 or after January 1, 2015.

FISCAL NOTE REQUIRED
(See Attached)



126th MAINE LEGISLATURE

LD 1600

LR 2402(03)

An Act To Require Health Insurers To Provide Coverage for Human Leukocyte Antigen Testing To Establish Bone Marrow Donor Transplantation Suitability

Fiscal Note for Bill as Amended by Committee Amendment 'B' (H-756)
Committee: Insurance and Financial Services

Fiscal Note Required: Yes

Fiscal Note

Potential future biennium cost increase - General Fund

Fiscal Detail and Notes

Any additional costs to the State Employee Health Insurance Program are expected to be minor and can be absorbed within existing budgeted resources. The Patient Protection and Affordable Care Act (ACA) requires States to defray the cost of mandated benefits not included in the ACA's Essential Health Benefits. The Bureau of Insurance's report on LD 1600 to the Joint Standing Committee on Insurance and Financial Services estimated the cost of increased coverage due to LD 1600 to be approximately \$48,000 per year. The specifics of this required State payment under the ACA to defray the costs of this mandate (i.e., how much, what program(s) and when) cannot be determined at this time.