Fiscal:	Fiscal impact issued
Revenue:	No Revenue Impact
Action Date:	05/11/15
Action:	Do Pass The A-Eng Bill.
Meeting Dates:	05/11
Vote:	

	Yeas**:**	4 **-** Knopp, Kruse, Monnes Anderson, Steiner Hayward
	Exc**:**	1 **-** Shields

Prepared By: Zena Rockowitz, Committee Administrator

WHAT THE MEASURE DOES:

Requires health benefit plan to cover cost of a colonoscopy for an insured who is 50 years of age or older and who has had a positive fecal immunochemical test result. Directs insurers to include coverage for the removal of polyps during a colonoscopy. Excludes health savings accounts from the coverage directive. Specifies effective date of January 1, 2017. Specifies that any patient with a positive fecal test with a grade A or B result using the criteria established by the U.S. Preventive Services Task Force have a follow-up colonoscopy.

ISSUES DISCUSSED:

- Colon cancer as leading cause of cancer death but preventable
- Compliance of patients with getting recommended colon cancer screenings
- Benefits of fecal immunochemical tests
- Expensive cost sharing on follow-up colonoscopies

EFFECT OF COMMITTEE AMENDMENT:

No amendment.

BACKGROUND:

Colonoscopy is a test that allows a doctor to examine the inner lining of the large intestine (rectum and colon). Currently, Oregon requires private insurance plans to cover colorectal cancer screening for adults 50-75 years of age, with no cost sharing to the patient. Fecal occult blood testing, sigmoidoscopy, and colonoscopy (and polyp removal) are included in the coverage. The American Cancer Society Cancer Action Network states that a positive fecal occult blood test or fecal immunochemical test indicates that cancerous cells may be present in the colon and that the proper follow-up is a colonoscopy. Such follow-up services are not currently covered in Oregon's colorectal cancer screening coverage; House Bill 2560-A addresses such services.

This summary has not been adopted or officially endorsed by action of the Committee.

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