

Enrolled House Bill 2560

Sponsored by Representative GREENLICK; Representatives BARNHART, BUCKLEY, DOHERTY, FREDERICK, GORSEK, KENY-GUYER, NOSSE, REARDON, VEGA PEDERSON, WILLIAMSON, Senator GELSER (Presession filed.)

CHAPTER

AN ACT

Relating to colorectal cancer screening; creating new provisions; and amending ORS 743A.124.

Be It Enacted by the People of the State of Oregon:

SECTION 1. ORS 743A.124, as amended by section 1, chapter 9, Oregon Laws 2014, is amended to read:

743A.124. (1) *[An insurer offering a health insurance policy that covers hospital, medical or surgical expenses, other than coverage limited to expenses from accidents or specific diseases,]* **A health benefit plan, as defined in ORS 743.730,** shall provide coverage for all colorectal cancer screening examinations and laboratory tests assigned either a grade of A or a grade of B by the United States Preventive Services Task Force.

(2) If an insured is 50 years of age or older, an insurer may not impose cost sharing on the coverage required by subsection (1) of this section and the coverage shall include, at a minimum:

- (a)(A) Fecal occult blood tests;
- [(b)]* (B) Colonoscopies, including the removal of polyps during a screening procedure; or
- [(c)]* (C) Double contrast barium enemas[.]; **and**

(b) A colonoscopy, including the removal of polyps during the procedure, if the insured has a positive result on any fecal test assigned either a grade of A or a grade of B by the United States Preventive Services Task Force.

(3) If an insured is at high risk for colorectal cancer, the coverage required by subsection (1) of this section shall include colorectal cancer screening examinations and laboratory tests as recommended by the treating physician.

(4) For the purposes of subsection (3) of this section, an individual is at high risk for colorectal cancer if the individual has:

- (a) A family medical history of colorectal cancer;
- (b) A prior occurrence of cancer or precursor neoplastic polyps;
- (c) A prior occurrence of a chronic digestive disease condition such as inflammatory bowel disease, Crohn's disease or ulcerative colitis; or
- (d) Other predisposing factors.

[(5) Health care service contractors, as defined in ORS 750.005, and trusts carrying out a multiple employer welfare arrangement, as defined in ORS 750.301, are also subject to this section.]

(5) Subsection (2)(b) of this section does not apply to a high deductible health plan described in 26 U.S.C. 223.

SECTION 2. The amendments to ORS 743A.124 by section 1 of this 2015 Act apply to:

- (1) A plan issued on or after January 1, 2017;
- (2) A plan renewed on or after January 1, 2017, beginning on the date of renewal; and
- (3) A plan that, according to its terms, would renew on or after January 1, 2017, but is renewed prior to January 1, 2017, beginning on January 1, 2017.

Passed by House March 12, 2015

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 Timothy G. Sekerak, Chief Clerk of House

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 Tina Kotek, Speaker of House

Passed by Senate May 20, 2015

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 Peter Courtney, President of Senate

Received by Governor:

.....M.,....., 2015

Approved:

.....M.,....., 2015

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 Kate Brown, Governor

Filed in Office of Secretary of State:

.....M.,....., 2015

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 Jeanne P. Atkins, Secretary of State