

LAWS OF ALASKA

2006

Source SCS CSHB 393(HES) Chapter No.

## AN ACT

Requiring that certain health care insurance plans provide coverage for the costs of colorectal cancer screening examinations and laboratory tests; and providing for an effective date.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

THE ACT FOLLOWS ON PAGE 1

## AN ACT

1	Requiring that certain health care insurance plans provide coverage for the costs of colorectal
2	cancer screening examinations and laboratory tests; and providing for an effective date.
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4	* Section 1. The uncodified law of the State of Alaska is amended by adding a new section
5	to read:
6	SHORT TITLE. This Act may be known as the Colorectal Cancer Screening Coverage
7	Act of 2006.
8	* Sec. 2. AS 21.42 is amended by adding a new section to read:
9	Sec. 21.42.377. Coverage for colorectal cancer screening. (a) Except for a
10	fraternal benefit society, a health care insurer that offers, issues for delivery, delivers,
11	or renews in this state a health care insurance plan shall provide coverage for the costs
12	of colorectal cancer screening examinations and laboratory tests under the schedule
13	described in (b) of this section. The coverage required by this section is subject to

standard policy provisions applicable to other benefits, including deductible or copayment provisions.

(b) The minimum coverage required under (a) of this section for colorectal cancer screening includes coverage for colorectal cancer examinations and laboratory tests specified in American Cancer Society guidelines for colorectal cancer screening of asymptomatic individuals. Coverage shall be provided for all colorectal screening examinations and tests that are administered at a frequency identified in the American Cancer Society guidelines for colorectal cancer.

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(1) at least 50 years of age; or

(2) less than 50 years of age and at high risk for colorectal cancer.

(c) Coverage provided under this section applies to a covered individual who

(d) All screening options identified in (b) of this section shall be covered by the insurer, with the choice of option determined by the covered individual in consultation with a health care provider.

16 (e) For individuals considered at average risk for colorectal cancer, coverage 17 or benefits shall be provided for the choice of screening, so long as it is conducted in 18 accordance with the specified frequency. For individuals considered at high risk for 19 colorectal cancer, screening shall be provided at a frequency determined necessary by 20 a health care provider.

21 (f) An employer that provides a health care insurance plan under this section 22 shall notify each covered individual of the coverage for colorectal cancer screenings 23 unless coverage for colorectal cancer screening previously exists. The notice shall be 24 included in the health benefit handbook or be provided by written or electronic 25 communication between an employer or health plan administrator and a covered 26 individual. However, if the covered individual purchases the health care insurance 27 plan from the insurer issuing the policy, the insurer is responsible for notifying the 28 covered individual of the coverage for colorectal cancer screening under this section.

(g) In this section, "individual considered at high risk for colorectal cancer"
means an individual who faces a high risk for colorectal cancer because of

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(1) family history;

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1	(2) prior experience of cancer or precursor neoplastic polyps;
2	(3) a history of a chronic digestive disease condition, including
3	inflammatory bowel disease, Crohn's Disease, or ulcerative colitis;
4	(4) the presence of any appropriate recognized gene markers for
5	colorectal cancer; or
6	(5) other predisposing factors.
7	* Sec. 3. This Act takes effect January 1, 2007.