

## 103RD GENERAL ASSEMBLY State of Illinois 2023 and 2024 HB2350

Introduced 2/14/2023, by Rep. Kelly M. Cassidy

## SYNOPSIS AS INTRODUCED:

215 ILCS 5/356u

Amends the Accident and Health Article of the Illinois Insurance Code. In provisions concerning pap tests and prostate cancer screenings, provides that required coverage includes an annual cervical smear or Pap smear test for all (rather than female) insureds. Provides that required coverage includes an annual prostate cancer screening for insureds (rather than male insureds) upon the recommendation of a physician licensed to practice medicine in all of its branches for specified individuals. Provides that required coverage includes an annual prostate cancer screening for insureds who are age 40 and over with a genetic predisposition to prostate cancer.

LRB103 26427 BMS 52790 b

1 AN ACT	concerning	regulation.
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## Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Illinois Insurance Code is amended by changing Section 356u as follows:
- 6 (215 ILCS 5/356u)

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- 7 Sec. 356u. Pap tests and prostate cancer screenings.
- 8 (a) A group policy of accident and health insurance that
  9 provides coverage for hospital or medical treatment or
  10 services for illness on an expense-incurred basis and is
  11 amended, delivered, issued, or renewed after January 1, 2024
  12 shall provide coverage, without imposing a deductible,
  13 coinsurance, copayment, or any other cost-sharing requirement,
  14 for all of the following:
- 15 (1) An annual cervical smear or Pap smear test for <u>all</u>
  16 <del>female</del> insureds.
- 17 (2) An annual prostate cancer screening for male
  18 insureds upon the recommendation of a physician licensed
  19 to practice medicine in all its branches for:
  - (A) asymptomatic individuals men age 50 and over;
- 21 (B) African-American <u>individuals</u> men age 40 and over; and
- (C) individuals men age 40 and over with a family

1	history	of	or	genetic	predisposition	to	prostate
0							
∠	cancer.						

- 3 (3) Surveillance tests for ovarian cancer for <del>female</del> 4 insureds who are at risk for ovarian cancer.
  - (b) This Section shall not apply to agreements, contracts, or policies that provide coverage for a specified disease or other limited benefit coverage.
  - (c) This Section does not apply to coverage of prostate cancer screenings to the extent such coverage would disqualify a high-deductible health plan from eligibility for a health savings account pursuant to Section 223 of the Internal Revenue Code.
    - (d) For the purposes of this Section:
- "At risk for ovarian cancer" means:
  - (1) having a family history (i) with one or more first-degree relatives with ovarian cancer, (ii) of clusters of women relatives with breast cancer, or (iii) of nonpolyposis colorectal cancer; or
- 19 (2) testing positive for BRCA1 or BRCA2 mutations.

"Prostate cancer screening" means medically viable methods for the detection and diagnosis of prostate cancer, including a digital rectal exam and the prostate-specific antigen test and associated laboratory work. "Prostate cancer screening" includes medically necessary subsequent follow-up testing as directed by a health care provider, including, but not limited to:

- 1 (1) urinary analysis;
- 2 (2) serum biomarkers; and
- 3 (3) medical imaging, including, but not limited to,
- 4 magnetic resonance imaging.
- 5 "Surveillance tests for ovarian cancer" means annual
- 6 screening using (i) CA-125 serum tumor marker testing, (ii)
- 7 transvaginal ultrasound, (iii) pelvic examination.
- 8 (Source: P.A. 102-1073, eff. 1-1-23.)