

Bill Summary
1st Session of the 58th Legislature

Bill No.:	SB 1264
Version:	CCR
Request No.:	
Author:	Sen. Stanley
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Bill Analysis

SB 1264 requires each health benefit plan offered in the state to provide coverage for clinical genetic testing when such testing provides clinical utility. Coverage shall also be provided when order by a health care provider. Such testing shall determine an individual's family or individual history of cancer as well as utilize evidence-based cancer imaging for individuals with an increased risk of cancer. Covered testing shall utilize either the most recent version of the National Comprehensive Cancer Network (NCCN) clinical practice recommendations that are level 2a or higher, the Centers for Medicare and Medicaid Services national coverage determinations or Medicare administrative contractor local coverage determinations, and nationally recognized clinical practice guidelines. Such coverage shall not be subject to any annual deductibles, copayments, or coinsurance limits. If coverage would result in health savings account ineligibility, the provisions of this measure shall only apply to health savings accounts with qualified high deductible health plans.

CCR Changes

The Conference Committee Report for SB 1264 restores the title and enacting clause.

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