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SENATE BILL 5074

State of Washington 68th Legislature 2023 Regular Session

By Senators L. Wilson and Cleveland

Prefiled 12/20/22.

AN ACT Relating to coverage for biomarker testing; adding a new section to chapter 48.43 RCW; adding a new section to chapter 41.05 RCW; and adding a new section to chapter 74.09 RCW.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 <u>NEW SECTION.</u> Sec. 1. A new section is added to chapter 48.43 6 RCW to read as follows:

7 (1) For health plans issued or renewed on or after January 1, 8 2024, a health carrier shall include coverage for biomarker testing 9 pursuant to the criteria established under subsection (2) of this 10 section.

11 (2) Biomarker testing must be covered for the purposes of 12 diagnosis, treatment, appropriate management, or ongoing monitoring 13 of an enrollee's disease or condition when the test is supported by 14 medical and scientific evidence including, but not limited to:

(a) Labeled indications for tests approved or cleared by the
 United States food and drug administration or indicated tests for a
 drug approved by the United States food and drug administration;

(b) Centers for medicare and medicaid services national coverage determinations or medicare administrative contractor local coverage determinations;

(c) Nationally recognized clinical practice guidelines; or

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(d) Consensus statements.

2 (3) Health carriers shall ensure coverage as required in 3 subsection (2) of this section is provided in a manner that limits disruptions in care including the need for multiple biopsies or 4 biospecimen samples. 5

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(4) For the purposes of this section:

(a) "Biomarker" means a characteristic that is objectively 7 measured and evaluated as an indicator of normal biological 8 processes, pathogenic processes, or pharmacologic responses to a 9 specific therapeutic intervention. Biomarkers include but are not 10 11 limited to gene mutations or protein expression.

12 (b) "Biomarker testing" means the analysis of a patient's tissue, blood, or other biospecimen for the presence of a biomarker. 13 Biomarker testing includes but is not limited to single-analyte 14 tests, multiplex panel tests, and whole genome sequencing. 15

(c) "Consensus statements" means statements that are:

17 (i) Developed by an independent, multidisciplinary panel of experts utilizing a transparent methodology and reporting structure 18 19 and with a conflict of interest policy;

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(ii) Aimed at specific clinical circumstances; and

(iii) Based on the best available evidence for the purpose of 21 optimizing the outcomes of clinical care. 22

23 (d) "Nationally recognized clinical practice guidelines" means evidence-based clinical practice guidelines that: 24

25 (i) Are developed by independent organizations or medical professional societies utilizing a transparent methodology and 26 reporting structure and with a conflict of interest policy; 27

28 (ii) Establish standards of care informed by a systematic review evidence and an assessment of the benefits and costs of 29 of alternative care options; and 30

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(iii) Include recommendations intended to optimize patient care.

<u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 41.05 32 RCW to read as follows: 33

(1) A health plan offered to public employees and their covered 34 35 dependents under this chapter issued or renewed on or after January 1, 2024, shall include coverage for biomarker testing pursuant to the 36 criteria established under subsection (2) of this section. 37

(2) Biomarker testing must be covered for the purposes of 38 39 diagnosis, treatment, appropriate management, or ongoing monitoring

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1 of an enrollee's disease or condition when the test is supported by 2 medical and scientific evidence including, but not limited to:

3 (a) Labeled indications for tests approved or cleared by the 4 United States food and drug administration or indicated tests for a 5 drug approved by the United States food and drug administration;

6 (b) Centers for medicare and medicaid services national coverage 7 determinations or medicare administrative contractor local coverage 8 determinations;

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(c) Nationally recognized clinical practice guidelines; or

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(d) Consensus statements.

(3) A health plan offered to public employees and their covered dependents shall ensure coverage as required in subsection (2) of this section is provided in a manner that limits disruptions in care including the need for multiple biopsies or biospecimen samples.

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(4) For the purposes of this section:

16 (a) "Biomarker" means a characteristic that is objectively 17 measured and evaluated as an indicator of normal biological 18 processes, pathogenic processes, or pharmacologic responses to a 19 specific therapeutic intervention. Biomarkers include but are not 20 limited to gene mutations or protein expression.

(b) "Biomarker testing" means the analysis of a patient's tissue,
blood, or other biospecimen for the presence of a biomarker.
Biomarker testing includes but is not limited to single-analyte
tests, multiplex panel tests, and whole genome sequencing.

25

(c) "Consensus statements" means statements that are:

(i) Developed by an independent, multidisciplinary panel of
 experts utilizing a transparent methodology and reporting structure
 and with a conflict of interest policy;

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(ii) Aimed at specific clinical circumstances; and

30 (iii) Based on the best available evidence for the purpose of 31 optimizing the outcomes of clinical care.

32 (d) "Nationally recognized clinical practice guidelines" means33 evidence-based clinical practice guidelines that:

(i) Are developed by independent organizations or medical
 professional societies utilizing a transparent methodology and
 reporting structure and with a conflict of interest policy;

37 (ii) Establish standards of care informed by a systematic review 38 of evidence and an assessment of the benefits and costs of 39 alternative care options; and

40 (iii) Include recommendations intended to optimize patient care.

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<u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 74.09
 RCW to read as follows:

3 (1) Beginning January 1, 2024, the authority shall provide 4 coverage under this chapter for biomarker testing pursuant to the 5 criteria established under subsection (2) of this section.

6 (2) Biomarker testing must be covered for the purposes of 7 diagnosis, treatment, appropriate management, or ongoing monitoring 8 of an enrollee's disease or condition when the test is supported by 9 medical and scientific evidence including, but not limited to:

(a) Labeled indications for tests approved or cleared by the
 United States food and drug administration or indicated tests for a
 drug approved by the United States food and drug administration;

(b) Centers for medicare and medicaid services national coverage determinations or medicare administrative contractor local coverage determinations;

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(c) Nationally recognized clinical practice guidelines; or

(d) Consensus statements.

18 (3) The authority shall ensure coverage as required in subsection 19 (2) of this section is provided in a manner that limits disruptions 20 in care including the need for multiple biopsies or biospecimen 21 samples.

(4) In administering this program, the authority shall seek any available federal financial participation under the medical assistance program, as codified at Title XIX of the federal social security act, or any other federal funding sources that are now available or may become available.

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(5) For the purposes of this section:

(a) "Biomarker" means a characteristic that is objectively
 measured and evaluated as an indicator of normal biological
 processes, pathogenic processes, or pharmacologic responses to a
 specific therapeutic intervention. Biomarkers include but are not
 limited to gene mutations or protein expression.

33 (b) "Biomarker testing" means the analysis of a patient's tissue, 34 blood, or other biospecimen for the presence of a biomarker. 35 Biomarker testing includes but is not limited to single-analyte 36 tests, multiplex panel tests, and whole genome sequencing.

37 (c) "Consensus statements" means statements that are:

38 (i) Developed by an independent, multidisciplinary panel of 39 experts utilizing a transparent methodology and reporting structure 40 and with a conflict of interest policy; 1

(ii) Aimed at specific clinical circumstances; and

2 (iii) Based on the best available evidence for the purpose of3 optimizing the outcomes of clinical care.

4 (d) "Nationally recognized clinical practice guidelines" means 5 evidence-based clinical practice guidelines that:

6 (i) Are developed by independent organizations or medical 7 professional societies utilizing a transparent methodology and 8 reporting structure and with a conflict of interest policy;

9 (ii) Establish standards of care informed by a systematic review 10 of evidence and an assessment of the benefits and costs of 11 alternative care options; and

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(iii) Include recommendations intended to optimize patient care.

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