J55 lr 3474

By: Delegates Ruff, Addison, Amprey, Davis, Edelson, Harris, J. Long, Shetty, Simmons, Smith, and Spiegel

Introduced and read first time: February 7, 2025 Assigned to: Health and Government Operations

A BILL ENTITLED

1	AN ACT concerning
2 3	Health Insurance – Testing for Ovarian and Cervical Cancers – Required Coverage and Prohibited Cost Sharing
4	FOR the purpose of requiring certain insurers, nonprofit health service plans, and health
5	maintenance organizations to provide coverage for cervical smear or Pap test and for
6	surveillance tests for ovarian cancer; prohibiting certain insurers, nonprofit health
7	service plans, and health maintenance organizations from imposing a copayment
8	coinsurance, or deductible requirement on the coverage; and generally relating to
9	health insurance coverage for ovarian and cervical cancer testing.
10	BY adding to
11	Article – Insurance
12	Section 15–861
13	Annotated Code of Maryland
14	(2017 Replacement Volume and 2024 Supplement)
15	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND
16	That the Laws of Maryland read as follows:
17	Article – Insurance
18	15-861.
19	(A) IN THIS SECTION, "SURVEILLANCE TEST" MEANS AN ANNUAL
20	SCREENING USING:
21	(1) CA-125 SERUM TUMOR MARKER TESTING;
22	(2) TRANSVAGINAL ULTRASOUND; OR



- 1 (3) A PELVIC EXAMINATION.
- 2 (B) THIS SECTION APPLIES TO:
- 3 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT
- 4 PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS
- 5 ON AN EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR
- 6 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND
- 7 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE
- 8 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER
- 9 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.
- 10 (C) (1) AN ENTITY SUBJECT TO THIS SECTION:
- 11 (I) SHALL PROVIDE COVERAGE FOR CERVICAL SMEAR OR PAP
- 12 TEST FOR AN INSURED OR ENROLLEE;
- 13 (II) SHALL PROVIDE COVERAGE FOR SURVEILLANCE TESTS FOR
- 14 OVARIAN CANCER FOR AN INSURED OR ENROLLEE THAT:
- 15 1. HAS AT LEAST ONE FIRST-DEGREE RELATIVE WITH
- 16 OVARIAN CANCER OR CLUSTER OF RELATIVES WITH BREAST OR NONPOLYPOSIS
- 17 COLORECTAL CANCER; OR
- 18 2. HAS TESTED POSITIVE FOR THE BRCA1 OR BRCA2
- 19 GENE MUTATION; AND
- 20 (III) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, MAY
- 21 NOT IMPOSE A COPAYMENT, COINSURANCE, OR DEDUCTIBLE REQUIREMENT ON
- 22 COVERAGE DESCRIBED IN ITEMS (I) AND (II) OF THIS PARAGRAPH.
- 23 (2) If an insured or enrollee is covered under a
- 24 HIGH-DEDUCTIBLE HEALTH PLAN, AS DEFINED IN 26 U.S.C. § 223, AN ENTITY
- 25 SUBJECT TO THIS SECTION MAY SUBJECT THE COVERAGE DESCRIBED IN
- 26 PARAGRAPH (1)(I) AND (II) OF THIS SUBSECTION TO THE DEDUCTIBLE
- 27 REQUIREMENT OF THE HIGH-DEDUCTIBLE HEALTH PLAN.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
- 29 policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or
- 30 after January 1, 2026.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect 2 January 1, 2026.