

Department of Legislative Services
 Maryland General Assembly
 2025 Session

FISCAL AND POLICY NOTE
Third Reader - Revised

Senate Bill 374
 Finance

(Senator Beidle, *et al.*)

Health and Government Operations

Counties - Cancer Screening for Professional Firefighters - Required Coverage
(James "Jimmy" Malone Act)

This bill requires a county that offers a self-insured employee health benefit plan to provide to each firefighter employed by the county coverage for preventive cancer screenings in accordance with the latest [screening guidelines](#) issued by the International Association of Fire Fighters (IAFF). The recommendations currently include specified screenings for bladder, breast, cervical, colorectal, lung, oral, prostate, skin, testicular, and thyroid cancers. A county may not impose a copayment, coinsurance, or deductible on such coverage. Each county subject to the bill must collect and submit specified data to the Maryland Health Care Commission (MHCC), which must consider the data and study and report on the impact of expanding coverage for preventive cancer screenings for firefighters to the commercial insurance market by December 1, 2028. **The bill takes effect January 1, 2026.**

Fiscal Summary

State Effect: MHCC special fund expenditures increase by \$100,000 in FY 2029 only to conduct the required study. Revenues are not affected.

(in dollars)	FY 2026	FY 2027	FY 2028	FY 2029	FY 2030
Revenues	\$0	\$0	\$0	\$0	\$0
SF Expenditure	0	0	0	100,000	0
Net Effect	\$0	\$0	\$0	(\$100,000)	\$0

Note: () = decrease; GF = general funds; FF = federal funds; SF = special funds; - = indeterminate increase; (-) = indeterminate decrease

Local Effect: Health insurance expenditures may increase for counties that provide a self-insured health benefit plan and employ firefighters, as discussed below. Revenues are not affected. **This bill may impose a mandate on a unit of local government.**

Small Business Effect: None.

Analysis

Bill Summary: A county may satisfy the bill's coverage requirement by (1) providing a no-cost annual examination to firefighters employed by the county that includes the required preventive screenings or (2) applying for a grant from the Professional and Volunteer Firefighter Innovative Cancer Screening Technologies Program to pay for innovative cancer screening technologies.

The bill may not be construed to prohibit a county from providing coverages that are greater than or more favorable to an insured or enrollee than the coverage required under the bill.

Each county must collect, for calendar 2026 and 2027, the following data: (1) the number of firefighters eligible for coverage under the bill; (2) the number of firefighters provided preventive cancer screenings; (3) the number of preventive screenings that resulted in a cancer diagnosis; and (4) the cost to provide preventive screenings. By June 1, 2027, and June 1, 2028, each county must report to MHCC the data collected.

Current Law:

Health Insurance

Under Maryland law, there are more than 50 mandated health insurance benefits that certain carriers must provide. These mandates generally apply only to fully insured health insurance policies and do not apply to self-funded employer plans. With respect to cancer screenings, certain carriers must cover the following screenings or testing for breast, colorectal, lung, and prostate cancer:

- **Breast cancer screenings** in accordance with the latest screening guidelines issued by the American Cancer Society (ACS). Currently, (1) women ages 40 to 44 may get annual breast cancer screenings with mammograms and (2) starting at age 45, women should have annual mammograms. Carriers must also provide coverage for digital tomosynthesis if an enrollee's treating physician determines it is medically appropriate and necessary. A deductible may not be imposed for covered digital tomosynthesis or mammograms.
- **Colorectal screening** in accordance with the latest guidelines issued by ACS. Coverage may be subject to a copayment or coinsurance requirement provided it is no greater than that imposed for similar coverages.
- **Recommended follow-up diagnostic imaging to assist in the diagnosis of lung cancer** for individuals for whom lung cancer screening is recommended by the U.S. Preventative Services Task Force. Coverage must include diagnostic ultrasound, magnetic resonance imaging, computed tomography, and image-guided

biopsy. A carrier may not impose a copayment, coinsurance, or deductible on the coverage that is greater than that for breast cancer screening and diagnosis (with the exception for a high deductible health plan deductible requirement).

- Expenses incurred in conducting a digital rectal exam and a prostate-specific antigen (more commonly known as PSA) blood test for men between 40 and 75 years of age who are at high risk for **prostate cancer**. Carriers may not apply a deductible, copayment, or coinsurance to coverage for preventive care screening services for prostate cancer.

Innovative Cancer Screening Technologies Program

Chapter 219 of 2019 established the Professional and Volunteer Firefighter Innovative Cancer Screening Technologies Program in the Maryland Department of Health. The program provides grants to local fire departments and volunteer fire companies and departments to procure innovative cancer screening tests. The Governor must include at least \$100,000 in the annual budget for the program.

In fiscal 2024, 513 individuals were screened through the program. All the individuals were tested using the OneTest™ Premium by 20/20 GeneSystems, Inc., which is a multi-cancer early detection blood test that predicts an individual's risk of being identified as having cancer in the coming 12-month period. On average, the cost of each test was \$192. The OneTest™ Premium is designed to detect 12 biomarkers that can aid in the detection of cancers. As the OneTest™ Premium only detects cancer risk and does not diagnose cancer, no cancers were detected by the test. However, among the individuals tested, the risk predictor for certain cancers was elevated in some of the individuals (breast, colon, liver, lung, ovarian, pancreas, prostate, and stomach).

State Expenditures: MHCC advises that additional resources are required to consider the data reported by counties in 2027 and 2028 and study the impact of expanding preventive cancer screening coverage for firefighters to the commercial insurance market. Thus, MHCC special fund expenditures increase by \$100,000 in fiscal 2029 only for contractual services to complete the required study.

Local Expenditures: Health insurance expenditures may increase for counties that offer a self-insured employee health benefit plan to provide each firefighter employed by the county with coverage for preventive cancer screenings without cost-sharing in accordance with the latest [screening guidelines](#) issued by IAFF. The magnitude of expenditures depends on the degree to which such screenings are already covered (and if so, whether they are provided with or without cost-sharing).

The Maryland Association of Counties advises that the bill has a minimal impact on most jurisdictions that employ professional firefighters.

Affected counties can report the required data with existing resources.

Additional Comments: The bill establishes that a county may satisfy the preventive cancer screening requirement by applying for a grant through an existing program, which is currently funded at \$100,000 a year. Accordingly, a county that applies for a grant but does not receive an award under that program appears to have no further obligation to provide the screenings.

Additional Information

Recent Prior Introductions: Similar legislation has not been introduced within the past three years.

Designated Cross File: HB 459 (Delegate Pruski, *et al.*) - Health and Government Operations.

Information Source(s): Charles, Garrett, and Howard counties; City of Frostburg; Maryland Association of Counties; Maryland Municipal League; Department of Budget and Management; Maryland Department of Health; Department of State Police; Maryland Department of Transportation; Maryland Insurance Administration; Department of Legislative Services

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