

Substitute for HOUSE BILL No. 2601

By Committee on Insurance and Financial Institutions

3-19

10 AN ACT concerning insurance; providing reimbursement for certain
11 services; **[providing coverage for colorectal cancer screening;]**
12 amending K.S.A. *[directing the Kansas health policy authority to*
13 *conduct studies for proposed mandated coverages;]* 2007 Supp.
14 40-2,103 and 40-19c09 and repealing the existing sections.
15

16 *Be it enacted by the Legislature of the State of Kansas:*

17 New Section 1. Notwithstanding any provision of an individual or
18 group policy or contract of health and accident insurance, delivered
19 within the state, whenever such policy or contract shall provide for re-
20 imbursement for any mental health service within the lawful scope of
21 practice of a duly licensed clinical marriage and family therapist author-
22 ized to engage in private, independent practice within the state of Kansas,
23 the insured, or any other person covered by policy or contract shall be
24 allowed and entitled to reimbursement for such service irrespective of
25 whether it was provided or performed by a duly licensed physician, or a
26 duly licensed clinical marriage and family therapist. Nothing contained in
27 this act shall be construed to expand the requirements for individual or
28 group policy or contract of health and accident health insurance to pro-
29 vide mental health services pursuant to K.S.A. 40-2,105 and K.S.A. 2007
30 Supp. 40-2,105a, and amendments thereto.

31 New Sec. 2. Notwithstanding any provision of an individual or group
32 policy or contract of health and accident insurance, delivered within the
33 state, whenever such policy or contract shall provide for reimbursement
34 for any mental health service within the lawful scope of practice of a duly
35 licensed clinical professional counselor authorized to engage in private,
36 independent practice within the state of Kansas, the insured, or any other
37 person covered by policy or contract shall be allowed and entitled to
38 reimbursement for such service irrespective of whether it was provided
39 or performed by a duly licensed physician or a duly licensed clinical pro-
40 fessional counselor. Nothing contained in this act shall be construed to
41 expand the requirements for individual or group policy or contract of
42 health and accident health insurance to provide mental health services
43 pursuant to K.S.A. 40-2,105 and K.S.A. 2007 Supp. 40-2,105a, and

1 amendments thereto.

2 New Sec. 3. Notwithstanding any provision of an individual or group
3 policy or contract of health and accident insurance, delivered within the
4 state, whenever such policy or contract shall provide for reimbursement
5 for any mental health service within the lawful scope of practice of a duly
6 licensed clinical psychotherapist authorized to engage in private, inde-
7 pendent practice within the state of Kansas, the insured, or any other
8 person covered by policy or contract shall be allowed and entitled to
9 reimbursement for such service irrespective of whether it was provided
10 or performed by a duly licensed physician or a duly licensed clinical psy-
11 chotherapist. Nothing contained in this act shall be construed to expand
12 the requirements for individual or group policy or contract of health and
13 accident health insurance to provide mental health services pursuant to
14 K.S.A. 40-2,105 and K.S.A. 2007 Supp. 40-2,105a, and amendments
15 thereto.

16 **[New Sec. 4. (a) Any individual or group health insurance pol-**
17 **icy, medical service plan, contract, hospital service corporation**
18 **contract, hospital and medical service corporation contract, fra-**
19 **ternal benefit society or health maintenance organization which**
20 **provides coverage for accident and health services and which is**
21 **delivered, issued for delivery, amended or renewed on or after**
22 **January 1, 2009, also, shall provide coverage for all colorectal can-**
23 **cer examinations and laboratory tests specified in current Ameri-**
24 **can cancer society guidelines for colorectal cancer screening of**
25 **asymptomatic individuals. Coverage or benefits shall be provided**
26 **for all such colorectal screening examinations and tests that are**
27 **administered at a frequency identified in the current American**
28 **cancer society guidelines for colorectal cancer. The coverage re-**
29 **quired under this section must meet the requirements set forth in**
30 **paragraph (b). Benefits shall be provided under this section for a**
31 **covered individual who is:**

32 [(1) At least 50 years of age; or

33 [(2) less than 50 years of age and at high risk for colorectal
34 cancer according to current colorectal cancer screening guidelines
35 of the American cancer society.

36 [(b) To encourage colorectal cancer screening, patients and
37 health care providers shall not be required to meet burdensome
38 criteria or overcome significant obstacles to secure such coverage.
39 No individual shall be required to pay an additional deductible or
40 coinsurance for testing that is greater than an annual deductible
41 or coinsurance established for similar benefits. If the program or
42 contract does not cover a similar benefit, a deductible or coinsur-
43 ance may not be set at a level that materially diminishes the value

1 of the colorectal cancer benefit required. Reimbursement to
2 health care providers for colorectal cancer screening provided un-
3 der this section shall be equal to or greater than reimbursement
4 to health care providers provided under title XVII of the social
5 security act.

6 [(c) The coverage required by this section shall be subject to
7 the same annual deductibles, copayments or coinsurance limits as
8 established for all other covered benefits under the individual or
9 group policy of accident and sickness insurance referred to in sub-
10 section (a).

11 [(d) The provisions of this section shall apply to the state health
12 care benefits program and municipal self-funded pools.

13 [New Sec. 5. The provisions of section 4, and amendments
14 thereto, shall not apply to any policy or certificate which provides
15 coverage for any specified disease, specified accident or accident
16 only coverage, credit, dental, disability income, hospital indem-
17 nity, long-term care insurance as defined by K.S.A. 40-2227, and
18 amendments thereto, vision care or any other limited supplement-
19 tal benefit nor to any medicare supplement policy of insurance as
20 defined by the commissioner of insurance by rule and regulation,
21 any coverage issued as a supplement to liability insurance, work-
22 ers' compensation or similar insurance, automobile medical-pay-
23 ment insurance or any insurance under which benefits are payable
24 with or without regard to fault, whether written on a group, blan-
25 ket or individual basis.]

26 Sec. ~~4~~ [6.] K.S.A. 2007 Supp. 40-2,103 is hereby amended to read
27 as follows: 40-2,103. The requirements of K.S.A. 40-2,100, 40-2,101, 40-
28 2,102, 40-2,104, 40-2,105, 40-2,114, 40-2,160, 40-2,165 through 40-2,170,
29 inclusive, 40-2250, K.S.A. 2007 Supp. 40-2,105a ~~and~~ 40-2,105b, *section*
30 *1, section 2 and section 3*, **section 3 and section 4**], and amendments
31 thereto, shall apply to all insurance policies, subscriber contracts or cer-
32 tificates of insurance delivered, renewed or issued for delivery within or
33 outside of this state or used within this state by or for an individual who
34 resides or is employed in this state.

35 Sec. ~~5~~ [7.] K.S.A. 2007 Supp. 40-19c09 is hereby amended to read
36 as follows: 40-19c09. (a) Corporations organized under the nonprofit
37 medical and hospital service corporation act shall be subject to the pro-
38 visions of the Kansas general corporation code, articles 60 to 74, inclusive,
39 of chapter 17 of the Kansas Statutes Annotated, applicable to nonprofit
40 corporations, to the provisions of K.S.A. 40-214, 40-215, 40-216, 40-218,
41 40-219, 40-222, 40-223, 40-224, 40-225, 40-226, 40-229, 40-230, 40-231,
42 40-235, 40-236, 40-237, 40-247, 40-248, 40-249, 40-250, 40-251, 40-252,
43 40-254, 40-2,100, 40-2,101, 40-2,102, 40-2,103, 40-2,104, 40-2,105, 40-

1 2,116, 40-2,117, 40-2,153, 40-2,154, 40-2,160, 40-2,161, 40-2,163 through
2 40-2,170, inclusive, 40-2a01 *et seq.*, 40-2111 to 40-2116, inclusive, 40-
3 2215 to 40-2220, inclusive, 40-2221a, 40-2221b, 40-2229, 40-2230, 40-
4 2250, 40-2251, 40-2253, 40-2254, 40-2401 to 40-2421, inclusive, and 40-
5 3301 to 40-3313, inclusive, K.S.A. 2007 Supp. 40-2,105a ~~and~~ 40-2,105b,
6 *section 1, section 2* ~~and section 3~~, **section 3 and section 4**], and amend-
7 ments thereto, except as the context otherwise requires, and shall not be
8 subject to any other provisions of the insurance code except as expressly
9 provided in this act.

10 (b) No policy, agreement, contract or certificate issued by a corpo-
11 ration to which this section applies shall contain a provision which ex-
12 cludes, limits or otherwise restricts coverage because medicaid benefits
13 as permitted by title XIX of the social security act of 1965 are or may be
14 available for the same accident or illness.

15 (c) Violation of subsection (b) shall be subject to the penalties pre-
16 scribed by K.S.A. 40-2407 and 40-2411, and amendments thereto.

17 **[Sec. 8. K.S.A. 40-2248 is hereby amended to read as follows:**
18 **40-2248. Prior to the legislature's consideration of any bill that**
19 **mandates health insurance coverage for specific health services,**
20 **specific diseases, or for certain providers of health care services**
21 **as part of individual, group or blanket health insurance policies,**
22 **the person or organization which seeks sponsorship of such propo-**
23 **posal shall request the Kansas legislature to direct the Kansas health**
24 **policy authority to conduct a study of such proposal and determine the**
25 **social and financial effects of the proposed mandated coverage. The Kan-**
26 **sas health policy authority shall conduct such study and shall submit to**
27 **the legislative committees to which the proposal is assigned an**
28 **impact report that assesses both the social and financial effects of**
29 **the proposed mandated coverage. For purposes of this act, man-**
30 **dated health insurance coverage shall include mandated optional**
31 **benefits. It shall be the duty of The commissioner of insurance to**
32 **shall cooperate with, assist and provide information to any person**
33 **or organization required to submit an aid the Kansas health policy au-**
34 **thority in developing the impact report under the provisions of this**
35 **act.**

36 **[Sec. 9. K.S.A. 40-2249 is hereby amended to read as follows:**
37 **40-2249. The report required under K.S.A. 40-2248 for Kansas health**
38 **policy authority shall in assessing the impact of a proposed mandate**
39 **of health coverage shall, include at the minimum and to the extent**
40 **that information is available, the following in the report required**
41 **under K.S.A. 40-2248, and amendments thereto:**

42 **[(a) The social impact, including:**

43 **[(1) The extent to which the treatment or service is generally**

- 1 **utilized by a significant portion of the population;**
2 **[(2) the extent to which such insurance coverage is already gen-**
3 **erally available;**
4 **[(3) if coverage is not generally available, the extent to which**
5 **the lack of coverage results in persons being unable to obtain nec-**
6 **essary health care treatment;**
7 **[(4) if the coverage is not generally available, the extent to**
8 **which the lack of coverage results in unreasonable financial hard-**
9 **ship on those persons needing treatment;**
10 **[(5) the level of public demand for the treatment or service;**
11 **[(6) the level of public demand for individual or group insur-**
12 **ance coverage of the treatment or service;**
13 **[(7) the level of interest of collective bargaining organizations**
14 **in negotiating privately for inclusion of this coverage in group con-**
15 **tracts; and**
16 **[(8) the impact of indirect costs which are costs other than pre-**
17 **miums and administrative costs, on the question of the costs and**
18 **benefits of coverage.**
19 **[(b) The financial impact, including:**
20 **[(1) The extent to which insurance coverage of the kind pro-**
21 **posed would increase or decrease the cost of the treatment or**
22 **service;**
23 **[(2) the extent to which the proposed coverage might increase**
24 **the use of the treatment or service;**
25 **[(3) the extent to which the mandated treatment or service**
26 **might serve as an alternative for more expensive treatment or**
27 **service;**
28 **[(4) the extent to which insurance coverage of the health care**
29 **service or provider can be reasonably expected to increase or de-**
30 **crease the insurance premium and administrative expenses of pol-**
31 **icyholders; and**
32 **[(5) the impact of this coverage on the total cost of health care.]**
33 **Sec. 6- [10.] K.S.A. [40-2248 and 40-2249 and K.S.A.] 2007 Supp.**
34 **40-2,103 and 40-19c09 are hereby repealed.**
35 **Sec. 7- [11.] This act shall take effect and be in force from and after**
36 **its publication in the statute book.**