

ASSEMBLY BILL

No. 547

Introduced by Assembly Member Liu

February 18, 2003

An act to add Section 1367.666 to the Health and Safety Code, and to add Section 10123.175 to the Insurance Code, relating to health care coverage.

LEGISLATIVE COUNSEL'S DIGEST

AB 547, as introduced, Liu. Ovarian cancer coverage.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the regulation of health care service plans by the Department of Managed Health Care and makes a violation of the act's provisions a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Under existing law, a health care service plan and a health insurer are deemed to provide coverage for all generally medically accepted cancer screening tests.

This bill would specifically provide that a health care service plan and a health insurer would be deemed to provide coverage for specified tests and procedures relating to the screening and diagnosis of ovarian cancer.

Because the bill would specify additional requirements for a health care service plan, the violation of which would be a crime, it would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 1367.666 is added to the Health and
2 Safety Code, to read:

3 1367.666. Every individual or group health care service plan
4 contract, except for a specialized health care service plan contract,
5 that is issued, amended, delivered, or renewed on or after January
6 1, 2004, shall be deemed to provide coverage for the screening and
7 diagnosis of ovarian cancer, including, but not limited to, the
8 appropriate blood tests, a transvaginal sonogram, and a
9 rectovaginal pelvic examination when medically necessary and
10 consistent with good professional practice.

11 SEC. 2. Section 10123.175 is added to the Insurance Code, to
12 read:

13 10123.175. (a) Every individual or group health insurance
14 policy that is issued, amended, delivered, or renewed on or after
15 January 1, 2004, shall be deemed to provide coverage for the
16 screening and diagnosis of ovarian cancer, including, but not
17 limited to, the appropriate blood tests, a transvaginal sonogram,
18 and a rectovaginal pelvic examination when medically necessary
19 and consistent with good professional practice.

20 (b) This section shall not apply to Medicare supplement,
21 vision-only, dental-only, or Champus-supplement insurance, or to
22 hospital indemnity, accident-only, or specified disease insurance
23 that does not pay benefits on a fixed-benefit, cash payment only
24 basis.

25 SEC. 3. No reimbursement is required by this act pursuant to
26 Section 6 of Article XIII B of the California Constitution because
27 the only costs that may be incurred by a local agency or school
28 district will be incurred because this act creates a new crime or
29 infraction, eliminates a crime or infraction, or changes the penalty
30 for a crime or infraction, within the meaning of Section 17556 of
31 the Government Code, or changes the definition of a crime within



1 the meaning of Section 6 of Article XIII B of the California
2 Constitution.

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