
HOUSE BILL 1939

State of Washington

67th Legislature

2022 Regular Session

By Representatives Rude, Bronoske, Valdez, Riccelli, Ormsby, Pollet,
and Kloba

Read first time 01/12/22. Referred to Committee on Health Care &
Wellness.

1 AN ACT Relating to requiring health plans to cover, with no cost
2 sharing, colonoscopies performed as a result of a positive screening;
3 and amending RCW 48.43.043.

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

5 **Sec. 1.** RCW 48.43.043 and 2007 c 23 s 1 are each amended to read
6 as follows:

7 (1) Health plans issued or renewed on or after July 1, 2008, must
8 provide benefits or coverage for colorectal cancer examinations and
9 laboratory tests consistent with the guidelines or recommendations of
10 the United States preventive services task force or the federal
11 centers for disease control and prevention. Benefits or coverage must
12 be provided:

13 (a) For any of the colorectal screening examinations and tests in
14 the selected guidelines or recommendations, at a frequency identified
15 in such guidelines or recommendations, as deemed appropriate by the
16 patient's physician after consultation with the patient; and

17 (b) To a covered individual who is:

18 (i) At least (~~fifty~~) 50 years old; or

19 (ii) Less than (~~fifty~~) 50 years old and at high risk or very
20 high risk for colorectal cancer according to such guidelines or
21 recommendations.

1 (2) To encourage colorectal cancer screenings, patients and
2 health care providers must not be required to meet burdensome
3 criteria or overcome significant obstacles to secure such coverage.
4 An individual may not be required to pay an additional deductible or
5 coinsurance for testing that is greater than an annual deductible or
6 coinsurance established for similar benefits. If the health plan does
7 not cover a similar benefit, a deductible or coinsurance may not be
8 set at a level that materially diminishes the value of the colorectal
9 cancer benefit required.

10 (3) (a) A health carrier is not required under this section to
11 provide for a referral to a nonparticipating health care provider,
12 unless the carrier does not have an appropriate health care provider
13 that is available and accessible to administer the screening exam and
14 that is a participating health care provider with respect to such
15 treatment.

16 (b) If a health carrier refers an individual to a
17 nonparticipating health care provider pursuant to this section,
18 screening exam services or resulting treatment, if any, must be
19 provided at no additional cost to the individual beyond what the
20 individual would otherwise pay for services provided by a
21 participating health care provider.

22 (4) A health carrier offering a health plan issued on or after
23 January 1, 2023, may not impose enrollee cost sharing on
24 colonoscopies performed as a result of a positive result on a
25 noncolonoscopy preventive colorectal cancer screening test assigned
26 either a grade of A or grade of B by the United States preventive
27 services task force.

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