

**ASSEMBLY BILL**

**No. 2640**

---

---

**Introduced by Assembly Member Gonzalez**

February 20, 2020

---

---

An act to amend Section 1367.665 of the Health and Safety Code, and to amend Section 10123.20 of the Insurance Code, relating to health care coverage.

LEGISLATIVE COUNSEL'S DIGEST

AB 2640, as introduced, Gonzalez. Health care coverage: genetic biomarker testing.

Existing law, the Knox-Keene Health Care Service Plan Act of 1975, provides for the licensure and regulation of health care service plans by the Department of Managed Health Care, and makes a willful violation of the act a crime. Existing law provides for the regulation of health insurers by the Department of Insurance. Existing law requires an individual or group health care service plan contract or health insurance policy issued, amended, delivered, or renewed on or after July 1, 2000, to provide coverage for all generally medically accepted cancer screening tests.

This bill would prohibit an individual or group health care service plan contract or health insurance policy issued, amended, delivered, or renewed on or after January 1, 2021, from requiring prior authorization for genetic biomarker testing for an enrollee or insured with metastatic or advanced stage 3 or 4 cancer. Because a willful violation of these provisions by a health care service plan would be a crime, the bill 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 1367.665 of the Health and Safety Code  
2 is amended to read:

3 1367.665. ~~Every~~(a) An individual or group health care service  
4 plan contract, except for a specialized health care service plan  
5 contract, that is issued, amended, delivered, or renewed on or after  
6 July 1, 2000, shall be deemed to provide coverage for all generally  
7 medically accepted cancer screening tests, subject to all terms and  
8 conditions that would otherwise apply.

9 (b) *An individual or group health care service plan contract,*  
10 *except for a specialized health care service plan contract, that is*  
11 *issued, amended, delivered, or renewed on or after January 1,*  
12 *2021, shall not require prior authorization for genetic biomarker*  
13 *testing for an enrollee with metastatic or advanced stage 3 or 4*  
14 *cancer.*

15 SEC. 2. Section 10123.20 of the Insurance Code is amended  
16 to read:

17 10123.20. (a) ~~Every~~An individual or group ~~disability health~~  
18 insurance policy ~~that covers hospital, medical, or surgical expenses~~  
19 that is issued, amended, delivered, or renewed on or after July 1,  
20 2000, shall be deemed to provide coverage for all generally  
21 medically accepted cancer screening tests, subject to all other terms  
22 and conditions that would otherwise apply.

23 (b) *An individual or group health insurance policy that is issued,*  
24 *amended, delivered, or renewed on or after January 1, 2021, shall*  
25 *not require prior authorization for genetic biomarker testing for*  
26 *an insured with metastatic or advanced stage 3 or 4 cancer.*

27 ~~(b)~~

28 (c) This section ~~shall~~ does not apply to vision-only, dental-only,  
29 accident-only, specified disease, hospital indemnity, Medicare  
30 supplement, long-term care, or disability income insurance, except

1 that for accident-only, specified disease, or hospital indemnity  
2 insurance, coverage for benefits under this section shall apply to  
3 the extent that the benefits are covered under the general terms  
4 and conditions that apply to all other benefits under the policy or  
5 contract. ~~Nothing in this section shall be construed as imposing~~  
6 *This section does not impose* a new benefit mandate on  
7 accident-only, specified disease, or hospital indemnity insurance.

8 SEC. 3. No reimbursement is required by this act pursuant to  
9 Section 6 of Article XIII B of the California Constitution because  
10 the only costs that may be incurred by a local agency or school  
11 district will be incurred because this act creates a new crime or  
12 infraction, eliminates a crime or infraction, or changes the penalty  
13 for a crime or infraction, within the meaning of Section 17556 of  
14 the Government Code, or changes the definition of a crime within  
15 the meaning of Section 6 of Article XIII B of the California  
16 Constitution.