

House Bill 420

By: Representatives Taylor of the 173rd, Hawkins of the 27th, Dempsey of the 13th, Mathiak of the 82nd, Stinson of the 150th, and others

A BILL TO BE ENTITLED
AN ACT

1 To amend Article 1 of Chapter 24 of Title 33 of the Official Code of Georgia Annotated,
2 relating to general provisions regarding insurance, so as to require certain health benefit
3 policies to cover genetic testing for an inherited mutation and cancer imaging under certain
4 conditions; to provide for definitions; to exclude such coverage from any cost-sharing
5 requirements; to protect the eligibility of health savings accounts; to provide for rules and
6 regulations; to provide for related matters; to repeal conflicting laws; and for other purposes.

7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

8 **SECTION 1.**

9 Article 1 of Chapter 24 of Title 33 of the Official Code of Georgia Annotated, relating to
10 general provisions regarding insurance, is amended by adding a new Code section to read as
11 follows:

12 "33-24-59.34.

13 (a) As used in this Code section, the term:

14 (1) 'Cancer imaging' means imaging modalities available to healthcare providers who
15 diagnose, stage, and treat human cancer in accordance with nationally recognized clinical
16 practice guidelines. Such term includes but is not limited to x-ray, computed

17 tomography, ultrasound, magnetic resonance imaging, single photon emission computed
18 tomography, positron emission tomography, and optical imaging.

19 (2) 'Clinical utility' means any test or imaging result that provides information that is
20 used in the formulation of a treatment or monitoring strategy that informs a patient's
21 outcome and impacts a clinical decision. Such term includes the most appropriate test
22 that may include information that is actionable and information that cannot be
23 immediately used in the formulation of a clinical decision.

24 (3) 'Cost-sharing requirement' means a deductible, coinsurance, or copayment and any
25 maximum limitation on the application of such deductible, coinsurance, copayment, or
26 similar out-of-pocket expense.

27 (4) 'Genetic testing for an inherited mutation' means germline multi-gene testing for an
28 inherited mutation or pathogenic variants in an individual's genes that are associated with
29 an increased risk of cancer.

30 (5) 'Health benefit policy' shall have the same meaning as set forth in Code
31 Section 33-24-59.21.

32 (6) 'Nationally recognized clinical practice guidelines' means evidence based clinical
33 practice guidelines developed by independent organizations or medical professional
34 societies utilizing a transparent methodology and reporting structure and with a
35 conflict-of-interest policy. Such guidelines establish standards of care informed by a
36 systematic review of evidence and an assessment of the benefits and risks of any
37 alternative care options and include recommendations intended to optimize patient care.

38 (b) All health benefit policies renewed or issued on or after July 1, 2025, shall include
39 coverage for:

40 (1) Genetic testing for an inherited mutation for a covered person with a personal or
41 family history of cancer when such testing provides clinical utility, is recommended by
42 a healthcare provider, and is in accordance with nationally recognized clinical practice
43 guidelines; and

44 (2) Cancer imaging for a covered person with an increased risk of cancer when such
45 imaging provides clinical utility, is recommended by a healthcare provider, and is in
46 accordance with nationally recognized clinical practice guidelines.

47 (c) The coverage provided for in subsection (b) of this Code section shall not be subject
48 to any cost-sharing requirement of the covered person's health benefit policy and shall not
49 diminish or limit any other benefits provided under such policy.

50 (d) If application of the provisions of this Code section would result in health savings
51 account ineligibility under 26 U.S.C. Section 223 as it existed on January 1, 2025, then
52 such provisions shall apply only to health savings accounts with qualified high deductible
53 health plans with respect to the deductibles of such plans after an individual has satisfied
54 the minimum deductibles; provided, however, that the provisions of this Code section shall
55 apply to items or services that are preventive care.

56 (e) The Commissioner shall promulgate rules and regulations necessary to implement the
57 provisions of this Code section in accordance with current guidelines established by
58 professional medical organizations such as the National Comprehensive Cancer Network."

59 **SECTION 2.**

60 All laws and parts of laws in conflict with this Act are repealed.