LEGISLATIVE BILL 829

Approved by the Governor April 15, 2024

Introduced by Blood, 3; Hughes, 24; Ibach, 44; DeBoer, 10; Bostar, 29; Jacobson, 42; Wayne, 13.

A BILL FOR AN ACT relating to insurance; to amend section 44-7,102, Revised Statutes Supplement, 2023; to change provisions relating to coverage for screening for colorectal cancer; to provide an operative date; and to repeal the original section.

Be it enacted by the people of the State of Nebraska,

Section 1. Section 44-7,102, Revised Statutes Supplement, 2023, is amended to read:

44-7,102 (1) Notwithstanding section 44-3,131, (a) any individual or group sickness and accident insurance policy, certificate, or subscriber contract delivered, issued for delivery, or renewed in this state and any hospital, medical, or surgical expense-incurred policy, except for short-term major medical policies of six months or less duration and policies that provide coverage for a specified disease or other limited-benefit coverage, and (b) any self-funded employee benefit plan to the extent not preempted by federal law shall include screening coverage for a colorectal cancer examination, and laboratory tests for cancer, and a concurrent removal of polyps or biopsy, or both, for any nonsymptomatic person forty-five years of age or older covered under such policy, certificate, contract, or plan. Such screening coverage shall include a maximum of one stool-based preventive screening test as approved by the United States Preventive Services Task Force annually and a flexible sigmoidoscopy every five years, a colonoscopy every ten years, or a barium enema every five to ten years, or any combination, or the most reliable, medically recognized screening test available. The screenings selected shall be as deemed appropriate by a health care provider and the patient.

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(2)(a) (2) On or after December 31, 2023, no policy, certificate, or contract, delivered, issued for delivery, or renewed in this state, or any self-funded employee benefit plan, to the extent not preempted by federal law, shall impose a deductible, coinsurance, or any other cost-sharing requirements for screening colonoscopies as recommended by the United States Preventive Services Task Force, including those performed as a result of a positive noncolonoscopy stool-based preventive screening test.

- (b) No policy, certificate, or contract, delivered, issued for delivery, or renewed in this state, or any self-funded employee benefit plan, to the extent not preempted by federal law, shall impose a deductible, coinsurance, or any other cost-sharing requirements for any service or item that is an integral part of performing a colorectal cancer screening, including:
 - (i) Polyp removal performed during the screening procedure;
- (ii) Any pathology examination on a polyp biopsy performed as part of the screening procedure;
 - (iii) Required specialist consultation prior to the screening procedure;
- (iv) Bowel preparation medications prescribed for the screening procedure; and
- (v) Anesthesia services performed in connection with a preventive colonoscopy.
 - Sec. 2. This act becomes operative on January 1, 2025.
- Sec. 3. Original section 44-7,102, Revised Statutes Supplement, 2023, is repealed.