

# Committee Report

**REGULAR CALENDAR**

March 5, 2020

**HOUSE OF REPRESENTATIVES**

**REPORT OF COMMITTEE**

**The Committee on Commerce and Consumer Affairs to  
which was referred HB 1633-FN,**

**AN ACT relative to insurance coverage for tick-borne  
illness. Having considered the same, report the same  
with the following amendment, and the  
recommendation that the bill OUGHT TO PASS WITH  
AMENDMENT.**

**Rep. Rebecca McBeath**

**FOR THE COMMITTEE**

## COMMITTEE REPORT

|                   |  |
|-------------------|--|
| Committee:        | Commerce and Consumer Affairs                          |
| Bill Number:      | HB 1633-FN   |
| Title:            | relative to insurance coverage for tick-borne illness. |
| Date:             | March 5, 2020  |
| Consent Calendar: | REGULAR  |
| Recommendation:   | OUGHT TO PASS WITH AMENDMENT<br>2020-0846h             |

### STATEMENT OF INTENT

This legislation with the amendment clarifies that New Hampshire health insurance providers will cover all medically necessary blood testing prescribed by a primary care provider, including Polymerase Chain Reaction (PCR) testing, and that this benefit shall not be subject to any greater co-payment, deductible or coinsurance than any other similar benefit provided by that health insurer.

Vote 12-8.

Rep. Rebecca McBeath  
FOR THE COMMITTEE

Original: House Clerk  
Cc: Committee Bill File

## REGULAR CALENDAR

Commerce and Consumer Affairs

**HB 1633-FN**, relative to insurance coverage for tick-borne illness. **OUGHT TO PASS WITH AMENDMENT.**

Rep. Rebecca McBeath for Commerce and Consumer Affairs. This legislation with the amendment clarifies that New Hampshire health insurance providers will cover all medically necessary blood testing prescribed by a primary care provider, including Polymerase Chain Reaction (PCR) testing, and that this benefit shall not be subject to any greater co-payment, deductible or coinsurance than any other similar benefit provided by that health insurer. **Vote 12-8.**

Rep. Rebecca McBeath for the majority of the Committee HB 1633-FN OTP/A #0846h relative to insurance coverage of blood testing for tick-borne illness. This legislation clarifies that New Hampshire health insurance providers will cover all medically necessary blood testing prescribed by a primary care provider, including Polymerase Chain Reaction (PCR) testing, and that this benefit shall not be subject to any greater co-payment, deductible or coinsurance than any other similar benefit provided by that health insurer. (Vote 12-8)

Amendment to HB 1633-FN

1 Amend RSA 415:6-y as inserted by section 1 of the bill by replacing it with the following:

2

3 415:6-y Coverage for Tick-Borne Illness. Each insurer that issues or renews any individual  
4 policy of accident or health insurance providing benefits for medical or hospital expenses, shall  
5 provide to certificate holders of such insurance, who are residents of this state, coverage for further  
6 blood testing, including PCR testing as medically necessary, for persons who are symptomatic after a  
7 first blood test for tick-borne illness. Benefits provided under this section shall not be subject to any  
8 greater co-payment, deductible, or coinsurance than any other similar benefits provided by the  
9 insurer.

10

11 Amend RSA 415:18-cc as inserted by section 2 of the bill by replacing it with the following:

12

13 415:18-cc Coverage for Tick-Borne Illness. Each insurer that issues or renews any policy of  
14 group or blanket accident or health insurance providing benefits for medical or hospital expenses.  
15 shall provide to certificate holders of such insurance, who are residents of this state, coverage for  
16 further blood testing, including PCR testing as medically necessary, for persons who are  
17 symptomatic after a first blood test for tick-borne illness. Benefits provided under this section shall  
18 not be subject to any greater co-payment, deductible, or coinsurance than any other similar benefits  
19 provided by the insurer.

Amendment to HB 1633-FN  
- Page 2 -

2020-0846h

AMENDED ANALYSIS

This bill requires insurance coverage for further blood testing for persons who are symptomatic after a first blood test for tick-borne illness.

# Voting Sheets





HOUSE COMMITTEE ON COMMERCE AND CONSUMER AFFAIRS

EXECUTIVE SESSION on HB 1633-FN

BILL TITLE: relative to insurance coverage for tick-borne illness.

DATE: 3/3/2020

LOB ROOM: 302

MOTION: (Please check one box)

- OTP
- ITL
- Retain (1st year)
- Adoption of Amendment # 0846 h (if offered)
- Interim Study (2nd year)

Moved by Rep. Butler Seconded by Rep. Weston Vote: 19-1

MOTION: (Please check one box)

- OTP
- OTP/A
- ITL
- Retain (1st year)
- Adoption of Amendment # \_\_\_\_\_ (if offered)
- Interim Study (2nd year)

Moved by Rep. McBeath Seconded by Rep. Weston Vote: 12-8

MOTION: (Please check one box)

- OTP
- OTP/A
- ITL
- Retain (1st year)
- Adoption of Amendment # \_\_\_\_\_ (if offered)
- Interim Study (2nd year)

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ Vote: \_\_\_\_\_

MOTION: (Please check one box)

- OTP
- OTP/A
- ITL
- Retain (1st year)
- Adoption of Amendment # \_\_\_\_\_ (if offered)
- Interim Study (2nd year)

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ Vote: \_\_\_\_\_

CONSENT CALENDAR: \_\_\_\_\_ YES  NO

Minority Report? \_\_\_\_\_ Yes  No If yes, author, Rep: \_\_\_\_\_ Motion \_\_\_\_\_

Respectfully submitted: Van Staden  
Rep Rebecca McBeath, Clerk



## 2020 SESSION

## Commerce and Consumer Affairs

 Bill #: HB 1633 Motion: Adopt AM #: 0846h Exec Session Date: 3/3/20

| <u>Members</u>                                | <u>YEAS</u> | <u>Nays</u> | <u>NV</u> |
|---|-------------|-------------|-----------|
| Butler, Edward A. Chairman                    | ✓           |             |           |
| Williams, Kermit R. Vice Chairman             | ✓           |             |           |
| Gidge, Kenneth N.                             | ✓           |             |           |
| Abel, Richard M.                              | ✓           |             |           |
| McBeath, Rebecca Susan Clerk                  | ✓           |             |           |
| Bartlett, Christy D.                          | ✓           |             |           |
| Herbert, Christopher J.                       | ✓           |             |           |
| Van Houten, Constance                         | ✓           |             |           |
| Fargo, Kristina M.                            | ✓           |             |           |
| Indruk, Greg L.                               | ✓           |             |           |
| Muscatel, Garrett D.                          | ✓           |             |           |
| Weston, Joyce                                 | ✓           |             |           |
| Hunt, John B.                                 | ✓           |             |           |
| Sanborn, Laurie J.                            | ✓           |             |           |
| Osborne, Jason M.                             | ✓           |             |           |
| <del>Costable, Michael</del> <u>Lascelles</u> | ✓           |             |           |
| Plumer, John R.                               | ✓           |             |           |
| Barnes, Arthur E.                             | ✓           |             |           |
| Potucek, John M.                              | ✓           |             |           |
| Warden, Mark                                  |             | ✓           |           |
| <b>TOTAL VOTE:</b>                            | <u>19</u>   | <u>1</u>    |           |



2020 SESSION

Commerce and Consumer Affairs

Bill #: HB 1633 Motion: OTPA AM #: \_\_\_\_\_ Exec Session Date: 3/3/20

| <u>Members</u>                     | <u>YEAS</u> | <u>Nays</u> | <u>NV</u> |
|------------------------------------|-------------|-------------|-----------|
| Butler, Edward A. Chairman         | ✓           |             |           |
| Williams, Kermit R. Vice Chairman  | ✓           |             |           |
| Gidge, Kenneth N.                  | ✓           |             |           |
| Abel, Richard M.                   | ✓           |             |           |
| Bartlett, Christy D.               | ✓           |             |           |
| Herbert, Christopher J.            | ✓           |             |           |
| McBeath, Rebecca Susan             | ✓           |             |           |
| Van Houten, Constance              | ✓           |             |           |
| Fargo, Kristina M.                 | ✓           |             |           |
| Indruk, Greg L.                    | ✓           |             |           |
| Muscatel, Garrett D.               | ✓           |             |           |
| Neston, Joyce                      | ✓           |             |           |
| Hunt, John B.                      |             | ✓           |           |
| Sanborn, Laurie J.                 |             | ✓           |           |
| Osborne, Jason M.                  |             | ✓           |           |
| Costable, Michael <i>Lescelles</i> |             | ✓           |           |
| Plumer, John R.                    |             | ✓           |           |
| Barnes, Arthur E.                  |             | ✓           |           |
| Potucek, John M.                   |             | ✓           |           |
| Warden, Mark                       |             | ✓           |           |
| <b>TOTAL VOTE:</b>                 | <b>12</b>   | <b>8</b>    |           |

SUBCOMMITTEE  
WORK  
SESSION

HOUSE COMMITTEE ON COMMERCE AND CONSUMER AFFAIRS

**SUBCOMMITTEE WORK SESSION** on HB 1633-FN

**BILL TITLE:** relative to insurance coverage for tick-borne illness.

**DATE:** February 24, 2020

**Subcommittee Members:** Reps. Butler, Williams, Gidge, Abel, Bartlett, Herbert, McBeath, Van Houten, Indruk, Muscatel, Weston, Potucek and Warden

**Comments and Recommendations:** Amendment takes out "third party" and adds PCR. Issue with co-pays and deductible parity. "Medically Necessary" language needed. Amendment

Respectfully submitted,

Rep. Joyce Weston  
Subcommittee Clerk

**SUBCOMMITTEE WORK SESSION** on HB 1633-FN

**BILL TITLE:** relative to insurance coverage for tick-borne illness.

**DATE:** 2/24/2020

**Subcommittee Members:** Reps. Butler, Williams, Gidge, Abel, Bartlett, Herbert, McBeath, Van Houten, Fargo, Indruk, Muscatel, Weston, Hunt, Sanborn, J. Osborne, Costable, Plumer, Barnes, Potucek and Warden

**Comments and Recommendations:**

*Amendment takes out "third party" and adds PCR. Issue w/ co-pay & deductible <sup>parity</sup> exclusion; "medically-necessary" language needed. Amendment tk.*

**MOTIONS:** OTP, OTP/A, ITL, Retained (1st Yr), Interim Study (2nd Yr)  
(Please circle one)

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ AM Vote:

Adoption of Amendment # \_\_\_\_\_

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ Vote:

\_\_\_\_\_ Amendment Adopted \_\_\_\_\_ Amendment Failed

**MOTIONS:** OTP, OTP/A, ITL, Retained (1st Yr), Interim Study (2nd Yr)  
(Please circle one)

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ AM Vote:

Adoption of Amendment # \_\_\_\_\_

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ Vote:

\_\_\_\_\_ Amendment Adopted \_\_\_\_\_ Amendment Failed

Respectfully submitted,

Rep. J. Weston  
Subcommittee Chairman/Clerk

Amendment to HB 1633-FN

1 Amend RSA 415:6-y as inserted by section 1 of the bill by replacing it with the following:

2

3 415:6-y Coverage for Tick-Borne Illness. Each insurer that issues or renews any individual  
4 policy of accident or health insurance providing benefits for medical or hospital expenses, shall  
5 provide to certificate holders of such insurance, who are residents of this state, coverage for further  
6 blood testing, including PCR testing, for persons who are symptomatic after a first blood test for tick-  
7 borne illness. Benefits provided under this section shall not be subject to any greater co-payment,  
8 deductible, or coinsurance than any other similar benefits provided by the insurer.

9

10 Amend RSA 415:18-cc as inserted by section 2 of the bill by replacing it with the following:

11

12 415:18-cc Coverage for Tick-Borne Illness. Each insurer that issues or renews any policy of  
13 group or blanket accident or health insurance providing benefits for medical or hospital expenses,  
14 shall provide to certificate holders of such insurance, who are residents of this state, coverage for  
15 further blood testing, including PCR testing, for persons who are symptomatic after a first blood test  
16 for tick-borne illness. Benefits provided under this section shall not be subject to any greater co-  
17 payment, deductible, or coinsurance than any other similar benefits provided by the insurer.



2020-0828h

AMENDED ANALYSIS

This bill requires insurance coverage for further blood testing for persons who are symptomatic after a first blood test for tick-borne illness.

HOUSE COMMITTEE ON COMMERCE AND CONSUMER AFFAIRS

**SUBCOMMITTEE WORK SESSION** on HB 1633-FN

**BILL TITLE:** relative to insurance coverage for tick-borne illness.

**DATE:** February 18, 2020

**Subcommittee Members:** Reps. Butler, Hunt, Bartlett, Weston, Muscatel, Fargo, Barnes and Potucek

**Comments and Recommendations:** Waits "PCR" testing. It might be an issue of determining if the test is "Medically Necessary". Also present: Herbert, Gidge, Van Houten, McBeath.

Respectfully submitted,

Rep. Rebecca McBeath  
Subcommittee Clerk

Hold Bill for Clarification

HOUSE COMMITTEE ON COMMERCE AND CONSUMER AFFAIRS

Heidi Kroff  
Butler? Bartlett  
Dancel & Finshia

SUBCOMMITTEE WORK SESSION on HB 1633-FN

BILL TITLE: relative to insurance coverage for tick-borne illness.

DATE: 18 February 2020 10:06 am to 10:20 am

Subcommittee Members: Reps. Butler, Hunt, Bartlett, Weston, Muscatel, Fargo, Barnes and Potucek

Also Attending: Herbert, Gids, Van Houten, McBeard

Comments and Recommendations:

Rep. Merry present wants "PCR" testing. Tyler Brande, MHTD comments that it might be an issue of determining if test "Medically Necessary."

\* Dr. Chan may be able to attend next Monday Feb 24th or March 2nd

MOTIONS: OTP, OTP/A, ITL, Retained (1st Yr), Interim Study (2nd Yr) (Please circle one)

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ AM Vote: \_\_\_\_\_

Adoption of Amendment # \_\_\_\_\_

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ Vote: \_\_\_\_\_

\_\_\_\_\_ Amendment Adopted \_\_\_\_\_ Amendment Failed

MOTIONS: OTP, OTP/A, ITL, Retained (1st Yr), Interim Study (2nd Yr) (Please circle one)

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ AM Vote: \_\_\_\_\_

Adoption of Amendment # \_\_\_\_\_

Moved by Rep. \_\_\_\_\_ Seconded by Rep. \_\_\_\_\_ Vote: \_\_\_\_\_

\_\_\_\_\_ Amendment Adopted \_\_\_\_\_ Amendment Failed

Respectfully submitted.

Rep. Rebecca McBeard  
Subcommittee Chairman/Clerk

# Hearing Minutes

HOUSE COMMITTEE ON COMMERCE AND CONSUMER AFFAIRS

PUBLIC HEARING ON HB 1633-FN

**BILL TITLE:** relative to insurance coverage for tick-borne illness.

**DATE:** February 5, 2020

**LOB ROOM:** 302

**Time Public Hearing Called to Order:** 1:39 p.m.

**Time Adjourned:** 2:11 p.m.

**Committee Members:** Reps. Butler, Williams, Bartlett, Herbert, McBeath, Van Houten, Fargo, Indruk, Muscatel, Weston, Hunt, Costable, Plumer, Barnes, Potucek and Gidge

**Bill Sponsors:**

Rep. M. Murray

Rep. W. Thomas

Rep. Panasiti

Rep. Bixby

Sen. Chandley

**TESTIMONY**

\* Use asterisk if written testimony and/or amendments are submitted.

**Ben Chan:** HHS

**Q: Rep Butler:** What do you think of this bill?

Happy to offer comment.

The dept. of health is actively involved in reviewing and messaging around tick borne illness.

Not sure what this bill is meant to address.

In my experience I have not heard of problems with testing being covered. The routine test is an antibody test. I have seen patients get many repeat tests and have not heard of a problem with insurance coverage. I've seen repeat testing used in both an appropriate and inappropriate way. It appears to me that an insurance company will cover tests ordered by a medical professional.

The second issue could be tests provided by "third parties" that may not be FDA approved. In that situation insurance denials may be appropriate.

It's not clear to me which issue this bill is trying to address.

This issue is a controversial one, but routine tests seem to be covered.

**Q: Rep Butler:** Can you elaborate on the 3<sup>rd</sup> party tests?

**A:** I'm not a laboratory expert. From experience the tests need to balance specificity and sensitivity. A very sensitive test may be more prone to false positives. On the other hand, a very precise test might miss something.

3<sup>rd</sup> party labs may offer tests with increased sensitivity, but that test may be less precise. This can also lead to increased false positives.

There is controversy around this, but the recommended tests have been studied and are recommended by the FDA and CDC.

Experimental tests are not recommended.

**Q: Rep Williams:** There are some tests that are only done in one particular lab. Are those tests generally not recognized because they aren't available or because they are not proven?

**A:** It's hard to comment without specifics. The third party tests are often the same type of tests but they get different results or have different interpretive criteria. This is not necessarily a situation in which a single lab has IP or other privileged access.

**Q: Rep McBeath:** Are some of the third parties trying to say that they are on the leading edge? And maybe they will get FDA approval?

**A:** The CDC has a two-tiered testing algorithm. The first test is very sensitive and the second test is confirmatory. This is the recommended protocol. Different labs may have different criteria on the exact positive result interpretation.

**Q: Rep McBeath:** Are there many false negatives in the CDC recommended protocol?

**A:** I don't know the exact numbers, but the tests should pick up the vast majority of infection. This is time related though; it takes time for antibodies to develop. It takes about 4 weeks for antibodies to show up. The first step is clinical evaluation. The test is expected to be negative early on- after 1 week the recommended tests should be positive.

**Q: Rep Butler:** Lyme is more and more prevalent. Are you seeing concerns across the country relative to diagnosis and treatment?

**A:** Yes. The recommendations come out from organizations like the CDC and IDSA. These are based on the best available science and published literature.

**Q: Rep Williams:** It's my impression that there is regionalization with many of these diseases. Does that focus NH provider attention on Lyme? Or, do they test for others?

**A:** There are definitely different diseases in different locations. Our focus at HHS is not just on Lyme. We focus on many tick borne illnesses including those that are emerging. As such, our messaging is not focused only on Lyme. Every year we release a general warning to help in prevention- including education- and treatment.

There are tick panels that check for many different diseases. A positive test alone however, does not mean that disease is the cause of the illness.

**Q: Rep Abel:** For confirmation, you have not seen or heard of denials when tests are called for by a physician?

**A:** Correct. That is my understanding when the test is requested by a physician.

**Peter Bragdon:** Harvard Pilgrim Healthcare

No position on bill.

It is my understanding that this is something we already do.

**Q: Rep Butler:** So, your understanding is that repeat testing is paid for?

**A:** Yes.

**Q: Rep Plummer:** Would you believe I have never had a problem getting coverage for repeat testing?

**Q: Rep Williams:** Is there the equivalent of a formulary for testing?

**A:** I don't know.

Q: **Rep McBeath:** But the third party non approved tests would not be tested?

A: I believe that is true.

Q: **Rep Bartlett:** I see there are many do it yourself tests. Would that make a problem for HIP?

A: Probably yes. Self testing would be a problem.

Q: **Rep Indruk:** Can you elaborate on the clinical care guidelines?

A: I'll get more info.

H. **Kroll:** AHIP

The phrase including testing by a third party could be a problem.

With regard to guidelines, my understanding is that the carriers have independent panels constantly reviewing the latest evidence and recommendations. It is comprehensive and independent.

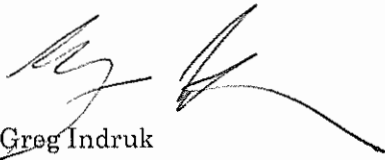
Q: **Rep Butler:** But different carriers may have different guidelines?

A: yes

Q: **Rep Williams:** Do you know if there is a test formulary? Balancing efficacy and cost?

A: I don't know but will see what I can find out. There may be guidelines around this. But it sounds like there hasn't been an issue with approved tests. The problem seems to relate to unapproved 3<sup>rd</sup> party testing.

Respectfully submitted,



Rep Greg Indruk





HB 1633

02/05/2020

Rep. M. Hunt: Introducing the bill

Here to introduce the bill.

Ben Chan: HHS

Q: Butler: What do you think of this bill?

Happy to offer comment.

The dept. of health is actively involved in reviewing and messaging around tick borne illness.

Not sure what this bill is meant to address.

In my experience I have not heard of problems with testing being covered. The routine test is an antibody test. I have seen patients get many repeat tests and have not heard of a problem with insurance coverage. I've seen repeat testing used in both an appropriate and inappropriate way. It appears to me that an insurance company will cover tests ordered by a medical professional.

The second issue could be tests provided by "third parties" that may not be FDA approved. In that situation insurance denials may be appropriate.

It's not clear to me which issue this bill is trying to address.

This issue is a controversial one, but routine tests seem to be covered.

Q: Butler: Can you elaborate on the 3<sup>rd</sup> party tests?

A: I'm not a laboratory expert. From experience the tests need to balance specificity and sensitivity. A very sensitive test may be more prone to false positives. On the other hand, a very precise test might miss something.

3<sup>rd</sup> party labs may offer tests with increased sensitivity, but that test may be less precise. This can also lead to increased false positives.

There is controversy around this, but the recommended tests have been studied and are recommended by the FDA and CDC.

Experimental tests are not recommended.

Q: Williams: There are some tests that are only done in one particular lab. Are those tests generally not recognized because they aren't available or because they are not proven?

A: It's hard to comment without specifics. The third party tests are often the same type of tests but they get different results or have different interpretive criteria. This is not necessarily a situation in which a single lab has IP or other privileged access.

Q: McBeath: Are some of the third parties trying to say that they are on the leading edge? And maybe they will get FDA approval?

A: The CDC has a two-tiered testing algorithm. The first test is very sensitive and the second test is confirmatory. This is the recommended protocol. Different labs may have different criteria on the exact positive result interpretation.

Q: McBeath: Are there many false negatives in the CDC recommended protocol?

I don't know the exact numbers, but the tests should pick up the vast majority of infection. This is time related though; it takes time for antibodies to develop. It takes about 4 weeks for antibodies to show up. The first step is clinical evaluation. The test is expected to be negative early on- after 4 weeks the recommended tests should be positive.

Q: Butler: Lyme is more and more prevalent. Are you seeing concerns across the country relative to diagnosis and treatment?

A: Yes. The recommendations come out from organizations like the CDC and IDSA. These are based on the best available science and published literature.

Q: Williams: It's my impression that there is regionalization with many of these diseases. Does that focus NH provider attention on Lyme? Or, do they test for others?

A: There are definitely different diseases in different locations. Our focus at HHS is not just on Lyme. We focus on many tick borne illnesses including those that are emerging. As such, our messaging is not focused only on Lyme. Every year we release a general warning to help in prevention- including education- and treatment.

There are tick panels that check for many different diseases. A positive test alone however, does not mean that disease is the cause of the illness.

Q: Abel: For confirmation, you have not seen or heard of denials when tests are called for by a physician?

A: Correct. That is my understanding when the test is requested by a physician.

Peter Bragdon: Harvard Pilgrim Healthcare

No position on bill.

It is my understanding that this is something we already do.

Q: Butler: So, your understanding is that repeat testing is paid for?

A: Yes.

Q: Plummer: Would you believe I have never had a problem getting coverage for repeat testing?

Q: Williams: Is there the equivalent of a formulary for testing?

A: I don't know.

Q: McBeath: But the third party non approved tests would not be tested?

A: I believe that is true.

Q: Bartlett: I see there are many do it yourself tests. Would that make a problem for HP?

A: Probably yes. Self testing would be a problem.

Q: Indruk: Can you elaborate on the clinical care guidelines?

A: I'll get more info.

H. Kroll: AHIP

The phrase including testing by a third party could be a problem.

With regard to guidelines, my understanding is that the carriers have independent panels constantly reviewing the latest evidence and recommendations. It is comprehensive and independent.

Q: Butler: But different carriers may have different guidelines?

A: yes

Q: Williams: Do you know if there is a test formulary? Balancing efficacy and cost?

A: I don't know but will see what I can find out. There may be guidelines around this. But it sounds like there hasn't been an issue with approved tests. The problem seems to relate to unapproved 3<sup>rd</sup> party testing.



Bill as  
Introduced

HB 1633-FN - AS INTRODUCED

2020 SESSION

20-2434

01/10

HOUSE BILL            ***1633-FN***

AN ACT                relative to insurance coverage for tick-borne illness.

SPONSORS:            Rep. M. Murray, Hills. 22; Rep. W. Thomas, Hills. 21; Rep. Panasiti, Hills. 22;  
Rep. Bixby, Straf. 17; Sen. Chandley, Dist 11

COMMITTEE:          Commerce and Consumer Affairs

---

ANALYSIS

This bill requires insurance coverage for further blood testing for persons who are still symptomatic after a first blood test for tick-borne illness.

.....

Explanation:        Matter added to current law appears in ***bold italics***.  
Matter removed from current law appears ~~[in brackets and struck through.]~~  
Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

*In the Year of Our Lord Two Thousand Twenty*

AN ACT relative to insurance coverage for tick-borne illness.

*Be it Enacted by the Senate and House of Representatives in General Court convened:*

1 1 New Section; Accident and Health Insurance; Coverage for Tick -Borne Illness; Individual.  
2 Amend RSA 415 by inserting after section 6-x the following new section:

3 415:6-y Coverage for Tick-Borne Illness. Each insurer that issues or renews any individual  
4 policy of accident or health insurance providing benefits for medical or hospital expenses, shall  
5 provide to certificate holders of such insurance, who are residents of this state, coverage for further  
6 blood testing, including testing by a third party, for persons who are still symptomatic after a first  
7 blood test for tick-borne illness. Benefits provided under this section shall not be subject to any  
8 greater co-payment, deductible, or coinsurance than any other similar benefits provided by the  
9 insurer.

10 2 New Section; Accident and Health Insurance; Coverage for Tick-Borne Illness; Group. Amend  
11 RSA 415 by inserting after section 18-bb the following new section:

12 415:18-cc Coverage for Tick-Borne Illness. Each insurer that issues or renews any policy of  
13 group or blanket accident or health insurance providing benefits for medical or hospital expenses,  
14 shall provide to certificate holders of such insurance, who are residents of this state, coverage for  
15 further blood testing, including testing by a third party, for persons who are still symptomatic after a  
16 first blood test for tick-borne illness. Benefits provided under this section shall not be subject to any  
17 greater co-payment, deductible, or coinsurance than any other similar benefits provided by the  
18 insurer.

19 3 Health Services Corporations; Applicable Statutes. Amend RSA 420-A:2 to read as follows:

20 420-A:2 Applicable Statutes. Every health service corporation shall be governed by this chapter  
21 and the relevant provisions of RSA 161-H, and shall be exempt from this title except for the  
22 provisions of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415-A, RSA 415-F, RSA 415:6,  
23 II(4), RSA 415:6-g, RSA 415:6-k, RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, RSA 415:6-t, RSA 415:6-u,  
24 RSA 415:6-v, RSA 415:6-w, RSA 415:6-x, **RSA 415:6-y**, RSA 415:18, V, RSA 415:18, XVI and XVII,  
25 RSA 415:18, VII-a, RSA 415:18-a, RSA 415:18-i, RSA 415:18-j, RSA 415:18-o, RSA 415:18-r, RSA  
26 415:18-t, RSA 415:18-u, RSA 415:18-v, RSA 415:18-w, RSA 415:18-y, RSA 415:18-z, RSA 415:18-aa,  
27 RSA 415:18-bb, **RSA 415:18-cc**, RSA 415:22, RSA 417, RSA 417-E, RSA 420-J, and all applicable  
28 provisions of title XXXVII wherein such corporations are specifically included. Every health service  
29 corporation and its agents shall be subject to the fees prescribed for health service corporations  
30 under RSA 400-A:29, VII.

1       4 Health Services Corporations; Applicable Statutes; Effective January 2021. Amend RSA 420-  
2 A:2 to read as follows:

3       420-A:2 Applicable Statutes. Every health service corporation shall be governed by this chapter  
4 and the relevant provisions of RSA 161-H, and shall be exempt from this title except for the  
5 provisions of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415-A, RSA 415-F, RSA 415:6,  
6 II(4), RSA 415:6-g, RSA 415:6-k, RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, RSA 415:6-u, RSA 415:6-v,  
7 RSA 415:6-w, RSA 415:6-x, *RSA 415:6-y*, RSA 415:18, V, RSA 415:18, XVI and XVII, RSA 415:18,  
8 VII-a, RSA 415:18-a, RSA 415:18-i, RSA 415:18-j, RSA 415:18-o, RSA 415:18-r, RSA 415:18-t, RSA  
9 415:18-u, RSA 415:18-v, RSA 415:18-w, RSA 415:18-z, RSA 415:18-aa, RSA 415:18-bb, *RSA 415:18-*  
10 *cc*, RSA 415:22, RSA 417, RSA 417-E, RSA 420-J, and all applicable provisions of title XXXVII  
11 wherein such corporations are specifically included. Every health service corporation and its agents  
12 shall be subject to the fees prescribed for health service corporations under RSA 400-A:29, VII.

13       5 Health Maintenance Organizations; Statutory Construction. Amend RSA 420-B:20, III to read  
14 as follows:

15       III. The requirements of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415:6-g,  
16 RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, RSA 415:6-t, RSA 415:6-u, RSA 415:6-v, RSA 415:6-w, RSA  
17 415:6-x, *RSA 415:6-y*, RSA 415:18, VII-a, RSA 415:18, XVI and XVII, RSA 415:18-i, RSA 415:18-j,  
18 RSA 415:18-r, RSA 415:18-t, RSA 415:18-u, RSA 415:18-v, RSA 415:18-w, RSA 415:18-y, RSA  
19 415:18-z, RSA 415:18-aa, RSA 415:18-bb, *RSA 415:18-cc*, RSA 415-A, RSA 415-F, RSA 420-G, and  
20 RSA 420-J shall apply to health maintenance organizations.

21       6 Health Maintenance Organizations; Statutory Construction; Effective January 1, 2021.  
22 Amend RSA 420-B:20, III to read as follows:

23       III. The requirements of RSA 400-A:39, RSA 401-B, RSA 402-C, RSA 404-F, RSA 415:6-g,  
24 RSA 415:6-m, RSA 415:6-o, RSA 415:6-r, RSA 415:6-u, RSA 415:6-v, RSA 415:6-w, RSA 415:6-x, *RSA*  
25 *415:6-y*, RSA 415:18, VII-a, RSA 415:18, XVI and XVII, RSA 415:18-i, RSA 415:18-j, RSA 415:18-r,  
26 RSA 415:18-t, RSA 415:18-u, RSA 415:18-v, RSA 415:18-w, RSA 415:18-z, RSA 415:18-aa, RSA  
27 415:18-bb, *RSA 415:18-cc*, RSA 415-A, RSA 415-F, RSA 420-G, and RSA 420-J shall apply to health  
28 maintenance organizations.

29       7 Effective Date.

30       I. Sections 4 and 6 shall take effect January 1, 2021 at 12:03 p.m.

31       II. The remainder of this act shall take effect 60 days after its passage.



HB 1633-FN- FISCAL NOTE  
AS INTRODUCED

AN ACT relative to insurance coverage for tick-borne illness.

FISCAL IMPACT:  State  County  Local  None

| STATE:                 | Estimated Increase / (Decrease)  |                                    |                                  |                                |
|------------------------|----------------------------------|------------------------------------|----------------------------------|--------------------------------|
|                        | FY 2020                          | FY 2021                            | FY 2022                          | FY 2023                        |
| Appropriation          | \$0                              | \$0                                | \$0                              | \$0                            |
| Revenue                | \$0                              | Indeterminable                     | Indeterminable                   | Indeterminable                 |
| Expenditures           | \$0                              | Indeterminable                     | Indeterminable                   | Indeterminable                 |
| <i>Funding Source:</i> | <input type="checkbox"/> General | <input type="checkbox"/> Education | <input type="checkbox"/> Highway | <input type="checkbox"/> Other |

COUNTY:

|              |     |                |                |                |
|--------------|-----|----------------|----------------|----------------|
| Revenue      | \$0 | \$0            | \$0            | \$0            |
| Expenditures | \$0 | Indeterminable | Indeterminable | Indeterminable |

LOCAL:

|              |     |                |                |                |
|--------------|-----|----------------|----------------|----------------|
| Revenue      | \$0 | \$0            | \$0            | \$0            |
| Expenditures | \$0 | Indeterminable | Indeterminable | Indeterminable |

METHODOLOGY:

This bill requires insurance coverage for further blood testing for persons who are still symptomatic after a first blood test for tick-borne illness.

The Insurance Department indicates, under federal law, the cost for this insurance mandate would be borne by the State for policies issued through the insurance exchange. The Department assumes coverage mandates may increase claim costs, which may cause premiums and premium tax revenue to increase.

The Department of Health and Human Services assumes this bill applies to commercial insurers only and does not apply to the Medicaid program. As such, there would be no fiscal impact to the Department.

The Department of Administrative Services indicates this bill would have no fiscal impact on the State Health Benefits Plan for Employees and Retirees because it is a governmental self-funded plan and is not governed by managed care law.

**AGENCIES CONTACTED:**

Departments of Insurance, Administrative Services and Health and Human Services