

# CONSENT CALENDAR

June 6, 2022

## HOUSE OF REPRESENTATIVES

### REPORT OF COMMITTEE

**The Committee on Health, Human Services and Elderly Affairs to which was referred HB 1290-FN,**

**AN ACT establishing a task force on precision medicine and biomarker testing. Having considered the same, report the same: NOT RECOMMENDED FOR FUTURE LEGISLATION.**

**Rep. Jeffrey Salloway**

**FOR THE COMMITTEE**

## **COMMITTEE REPORT**

Committee:	<b>Health, Human Services and Elderly Affairs</b>
Bill Number:	<b>HB 1290-FN</b>
Title:	<b>establishing a task force on precision medicine and biomarker testing.</b>
Date:	<b>June 6, 2022</b>
Consent Calendar:	<b>CONSENT</b>
Recommendation:	<b>NOT RECOMMENDED FOR FUTURE LEGISLATION</b>

### **STATEMENT OF INTENT**

The Committee on Health, Human Services and Elderly Affairs deliberated with regard to this bill concerning precision medicine as proposed by Rep Kathryn Rogers. The committee viewed this initiative positively and worthy of expedient action. To advance the recommendations of the bill the committee had earlier remanded it to the Committee on DHHS Oversight. That committee empaneled an interim task force to initiate activity on the matter of precision medicine. The task force has met and is active.

Vote 17-0.

Rep. Jeffrey Salloway  
FOR THE COMMITTEE

Original: House Clerk  
Cc: Committee Bill File

## CONSENT CALENDAR

Health, Human Services and Elderly Affairs

**HB 1290-FN**, establishing a task force on precision medicine and biomarker testing.**NOT RECOMMENDED FOR FUTURE LEGISLATION .**

Rep. Jeffrey Salloway for Health, Human Services and Elderly Affairs. The Committee on Health, Human Services and Elderly Affairs deliberated with regard to this bill concerning precision medicine as proposed by Rep Kathryn Rogers. The committee viewed this initiative positively and worthy of expedient action. To advance the recommendations of the bill the committee had earlier remanded it to the Committee on DHHS Oversight. That committee empaneled an interim task force to initiate activity on the matter of precision medicine. The task force has met and is active.  
**Vote 17-0.**

Original: House Clerk

Cc: Committee Bill File

**CONSENT CALENDAR**

**March 8, 2022**

**HOUSE OF REPRESENTATIVES**

**REPORT OF COMMITTEE**

**The Committee on Health, Human Services and Elderly  
Affairs to which was referred HB 1290-FN,**

**AN ACT establishing a task force on precision medicine  
and biomarker testing. Having considered the same,  
report the same with the recommendation that the bill  
be REFERRED FOR INTERIM STUDY.**

**Rep. Jeffrey Salloway**

**FOR THE COMMITTEE**

## COMMITTEE REPORT

Committee:	<b>Health, Human Services and Elderly Affairs</b>
Bill Number:	<b>HB 1290-FN</b>
Title:	<b>establishing a task force on precision medicine and biomarker testing.</b>
Date:	<b>March 8, 2022</b>
Consent Calendar:	<b>CONSENT</b>
Recommendation:	<b>REFER FOR INTERIM STUDY</b>

### STATEMENT OF INTENT

The committee expresses its appreciation to the sponsoring representative. The committee recommended remanding the bill to the Joint Legislative DHHS Oversight Committee for expeditious appointment of a subcommittee to be a Task Force on Precision Medicine.

Vote 20-0.

Rep. Jeffrey Salloway  
FOR THE COMMITTEE

Original: House Clerk  
Cc: Committee Bill File

## CONSENT CALENDAR

Health, Human Services and Elderly Affairs

**HB 1290-FN**, establishing a task force on precision medicine and biomarker testing. **REFER FOR INTERIM STUDY.**

Rep. Jeffrey Salloway for Health, Human Services and Elderly Affairs. The committee expresses its appreciation to the sponsoring representative. The committee recommended remanding the bill to the Joint Legislative DHHS Oversight Committee for expeditious appointment of a subcommittee to be a Task Force on Precision Medicine. **Vote 20-0.**

Original: House Clerk

Cc: Committee Bill File

**HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES AND ELDERLY AFFAIRS**

**EXECUTIVE SESSION on HB 1290-FN**

**BILL TITLE:** establishing a task force on precision medicine and biomarker testing.

**DATE:** June 6, 2022

**LOB ROOM:** 201-203

**MOTION:**

Interim Study (2nd yr)      Not Recommended for Future Legislation

Moved by Rep. Weber                      Seconded by Rep. M. Pearson                      Vote: 17-0

Respectfully submitted,

Rep Beth Folsom, Clerk

HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES AND ELDERLY AFFAIRS

EXECUTIVE SESSION on Bill # HB 1290-FN

BILL TITLE: task force on precision medicine & biomarker testing

DATE: 6-6-2022

LOB ROOM: 201-203

MOTION: (Please check one box)

- OTP
- ITL *not recommended*
- Retain (1<sup>st</sup> year)
- Adoption of Amendment # \_\_\_\_\_ (if offered)
- Interim Study (2nd year)

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

MOTION: (Please check one box)

- OTP
- OTP/A
- ITL
- Retain (1<sup>st</sup> 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 (1<sup>st</sup> 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 (1<sup>st</sup> 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: \_\_\_\_\_  
Rep. Beth Folsom, Clerk





2022 SESSION

Health, Human Services and Elderly Affairs

17/0

Bill #: HB 1290-FN Motion: not recommended AM #: \_\_\_\_\_

Exec Session Date: 6-6-2022

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Pearson, Mark A. Chairman	X		
Layon, Erica J. Vice Chairman	X		
McMahon, Charles E.	X		
Acton, Dennis F.	X		
Gay, Betty I.	X		
Cushman, Leah P.			X
Folsom, Beth A. Clerk			X
Kelsey, Niki	X		
King, Bill C.			X
Kofalt, Jim	X		
DeLemus, Susan C.			X
Weber, Lucy M.	X		
MacKay, James R.	X		
Snow, Kendall A.	X		
Knirk, Jerry L.	X		
Salloway, Jeffrey C.	X		
Cannon, Gerri D.	X		
Nutter-Upham, Frances E.	X		
Schapiro, Joe	X		
Woods, Gary L.	X		
Merchant, Gary	X		

## **Health, Human Services and Elderly Affairs**

**Public Hearing on Bill# HB 1290 Date 6/6/22 Rm: 201-203 Time: 11:50am**

**Committee Members: Reps. M.Pearson, Layon, Folsom, McMahon, Acton, Gay, Cushman, Kelsey, B. King, Kofalt,, Rice, Weber, MacKay, Snow, Knirk, Salloway, Cannon, Nutter-Upham, Schapiro, Woods and Merchant**

The issue is being addressed so we believe further legislation is not needed at this time. There is work going on with this.

**Respectfully submitted,**

**Rep. Beth Folsom, Clerk**

HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES AND ELDERLY AFFAIRS

EXECUTIVE SESSION on Bill # HB 1290-FN

**TITLE:** An Act establishing a task force on precision medicine and biomarker testing.

**DATE:** 3/8/2022

**LOB ROOM:** 201-3

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**MOTION:**

INTERIM STUDY

Moved by Rep. Salloway Seconded by Rep. Gay Vote: 20-0

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**CONSENT CALENDAR:**  YES  NO

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

Respectfully submitted: baf  
Rep. Beth Folsom, Clerk

STATE OF NEW HAMPSHIRE  
OFFICE OF THE HOUSE CLERK



9/28/2021 11:15:01 AM  
Roll Call Committee Registers  
Report

2022 SESSION

**Health, Human Services and Elderly Affairs**

**Bill #:** 1290-FN      **Motion:** Interim Study      **AM #:** \_\_\_\_\_      **Exec Session Date:** 3/8/2022

<u>Members</u>	<u>YEAS</u>	<u>Nays</u>	<u>NV</u>
Pearson, Mark A. Chairman	Y		
Layon, Erica J. Vice Chairman	Y		
McMahon, Charles E.	Y		
Acton, Dennis F.	Y		
Gay, Betty I.	Y		
Cushman, Leah P.	Y		
Folsom, Beth A. Clerk	Y		
Kelsey, Niki	Y		
King, Bill C.	Y		
Kofalt, Jim	Y		
DeLemus, Susan	Y		
Weber, Lucy M.	Y		
MacKay, James R.	Y		
Snow, Kendall A.			Absent
Knirk, Jerry L.	Y		
Salloway, Jeffrey C.	Y		
Cannon, Gerri D.	Y		
Nutter-Upham, Frances E.	Y		
Schapiro, Joe	Y		
Woods, Gary L.	Y		
Merchant, Gary	Y		
<b>TOTAL VOTE:</b>	20	0	

**HOUSE COMMITTEE ON HEALTH, HUMAN SERVICES AND ELDERLY AFFAIRS**

**PUBLIC HEARING on Bill # HB1290-FN**

**BILL TITLE:** An Act establishing a task force on precision medicine and biomarker testing.

**DATE:** 2/15/2022

**ROOM:** LOB 210-11

**Time Public Hearing Called to Order: 9:35am**

**Time Adjourned: 10:45am**

**Committee Members:** Reps. M. Pearson, Layon, Folsom, Acton, McMahon, Cushman, Kelsey, Gay, B. King, Kofalt, MacKay, DeLemus, Weber, Knirk, Nutter-Upham, Salloway, Snow, Cannon, Schapiro, Woods and Merchant,

**TESTIMONY**

**Representative Katherine Rogers - presented the bill**

- to establish awareness
- legislative support
- alternative therapies - biomarking data
- insurance issues
- very expensive
- under HHS oversight committee
- need bill or could HHS get the process started faster
- large # of members
- extremely rare professional positions - could be hard to recruit
- amendment would be welcome
- medicare coverage - unsure
- empower more research with legislative backing
- 3 parts, awareness, utilization, payment source

**Mike Rollo, American Cancer Society, support**

- Advocacy arm of the Cancer Society
- biomarker testing allows for quicker identification of the type of cancer to a quicker identification of the best treatments
- Access to clinical trials often require bio marker testing
- Great disparities in the healthcare system
- out of network issues
- American Society of clinical oncologist's support
- Medicare - a federal decision
- education and outreach to oncologists for a better ground floor uprising to get coverage
- a multi-year approach, won't happen overnight but need to get started.

**John Williams, Janis Emery, DHHS**

- important legislation
- goal is to get ahead of the technology
- a possible subset of HHS oversight task force
- sunset each biennium
- use an RSA placement for a more permanent subcommittee

**Michael Padmore, NH Medical Society - support**

- oncology and pathology communities - support

- will help recruit the best people for task force
- will work with medical societies
- would remote participation be favored to time constraints on professional members

work group - Woods, MacKay, Gay, Salloway, Layon

Respectfully submitted,

Rep. Beth Folsom, Clerk





# House Remote Testify

## Health, Human Services and Elderly Affairs Committee Testify List for Bill HB1290 on 2022-02-15

Support: 23 Oppose: 1 Neutral: 0 Total to Testify: 0

Export to Excel

<u>Name</u>	<u>City, State</u> <u>Email Address</u>	<u>Title</u>	<u>Representing</u>	<u>Position</u>	<u>Testifying</u>	<u>Non-Germane</u>	<u>Signed Up</u>
Walz, Mary Beth	Bow, NH Mbwalz@leg.state.nh.us	An Elected Official	Myself	Support	No	No	2/14/2022 1:17 PM
Monroe, Sharon	Concord, NH monroenh@aol.com	A Member of the Public	Myself	Support	No	No	2/14/2022 1:18 PM
Belanger, Kathleen	Saratoga Springs, NY 67togany@gmail.com	A Member of the Public	Myself	Support	No	No	2/14/2022 1:27 PM
Cahill, Michael	Newmarket, NH michael.cahill@leg.state.nh.us	An Elected Official	Myself	Support	No	No	2/14/2022 1:41 PM
Vail, Suzanne	Nashua, NH Suzanne.vail@leg.state.nh.us	An Elected Official	Hillsborough County 30	Support	No	No	2/14/2022 1:47 PM
Davidson, Suellen	Hollis, NH SuellenDavidson@gmail.com	A Member of the Public	Myself	Support	No	No	2/14/2022 2:43 PM
Cote, David E.	Nashua, NH david.cote@leg.state.nh.us	An Elected Official	Myself	Support	No	No	2/14/2022 3:34 PM
Raycraft, Donna	Concord, NH draycraft@comcast.net	A Member of the Public	Myself	Support	No	No	2/14/2022 4:08 PM
Schultz, Kris	Concord, NH kris.schultz@leg.state.nh.us	An Elected Official	Merr. 18/Concord Ward 9	Support	No	No	2/14/2022 4:28 PM
Burns, Scott	Franklin, NH scottaburns.2020@gmail.com	A Member of the Public	Myself	Support	No	No	2/14/2022 4:39 PM
Horn, Marcia	Phoenix, AZ icanadvocacy@earthlink.net	A Member of the Public	ICAN, International Cancer Advocacy Network	Support	No	No	2/14/2022 4:52 PM
Sheahan, Nicole	Washington, DC nicolesheahan@yahoo.com	A Member of the Public	Global Colon Cancer Association	Support	No	No	2/14/2022 7:39 PM
Klein Knight, Nicole	Manchester, NH Nicole.KleinKnight@leg.state.nh.us	An Elected Official	Manchester	Support	No	No	2/14/2022 7:43 PM



Fellows, Sallie	Holderness, NH sallie.fellows@.leg.state.nh.us	An Elected Official	Myself	Support	No	No	2/14/2022 7:55 PM
Cloutier, John	Claremont, NH, NH joelcloutier@comcast.net	An Elected Official	Myself	Support	No	No	2/14/2022 7:58 PM
Cotter-Cranston, Linda	Mason, NH lcc@onemain.com	A Member of the Public	Myself	Support	No	No	2/14/2022 8:18 PM
Bartlett, Rep Christy	Concord, NH christydbartlett@gmail.com	An Elected Official	Merrimack County 19	Support	No	No	2/14/2022 9:42 PM
Bouchard, Candace	Concord, NH cwbouchard@aol.com	A Member of the Public	Myself	Support	No	No	2/14/2022 10:04 PM
Johnson, William	Concord, NH wfjohnson27@gmail.com	A Member of the Public	Myself	Oppose	No	No	2/14/2022 11:19 PM
Taylor, Gale	Concord, NH galeforcefacilitators@gmail.com	A Member of the Public	Myself	Support	No	No	2/15/2022 2:04 AM
Cahill-Yeaton, Miriam	Epsom, NH nmyeaton.mims@yahoo.com	A Member of the Public	Myself	Support	No	No	2/15/2022 5:48 AM
Padmore, Michael	Manchester, NH michael.padmore@nhms.org	A Lobbyist	NH Medical Society	Support	No	No	2/15/2022 9:05 AM
Rollo, Deanna	Rollinsford, NH Deanna1214@aol.com	A Member of the Public	Myself	Support	No	No	2/15/2022 9:29 AM
Runde, George	Rollindford, NH Minicarrs@aol.com	A Member of the Public	Myself	Support	No	No	2/15/2022 9:30 AM

27 West Morten Avenue  
Phoenix, AZ 85021-7246  
phone (602) 618-0183 · fax (602) 926-8109  
programs@askican.org · askican.org

3944 Pine Avenue  
Long Beach, CA 90807  
phone (562) 427-5561

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Qingmei Xie, MD



**Testimony of Marcia K. Horn, JD  
President and CEO  
ICAN, International Cancer Advocacy Network**

**Submitted to the New Hampshire House of Representatives  
Health, Human Services, and Elderly Affairs Committee**

**in Support of:**

**SB 1290, Establishing a Task Force on  
Precision Medicine and Biomarker Testing.**

**February 15, 2022**

Chairman Pearson and Members of the Committee,

We are writing in strong support of SB 1290, which will establish a task force on precision medicine and biomarker testing.

Founded in 1996, ICAN, International Cancer Advocacy Network, is a Phoenix-based non-profit that has helped over 15,500 Stage IV metastatic cancer patients in New Hampshire, throughout the United States, and in 54 foreign countries. We work every day to secure the most effective drugs and treatments for our patients.

Our goal is to find the right drugs at the right time for each individual patient. Nothing helps more in achieving that goal than testing for the ever increasing number of actionable biomarkers identified in cancer. This testing allows the choice of the targeted drug most likely to reduce or eliminate that individual patient's specific cancer. Biomarker testing replaces educated guesswork with scientific evidence and makes truly personalized, precision medicine possible.

Stage IV metastatic cancer patients simply do not have the time to try any but the most optimal treatment options. Without testing, or without the correct tests, delays in finding the right drugs at the right time lead to adverse consequences for the patient in terms of the cancer progressing to a more serious stage. This puts the patient in a weakened condition when and if the right drugs are finally found—thus making that therapy less effective.

The negative result—a very avoidable negative result—is that the patient's care actually costs more for the system: the cost of the wrong drugs initially, and then the costs of all the associated conditions that patients suffer as a result of the worsening disease.

To delay the optimal treatment for any patient is wrong. To delay the optimal treatment for a Stage IV metastatic cancer patient is simply cruel beyond belief.

The importance of biomarker testing is succinctly and precisely described in the Findings of SB 1290:

The legislature finds that 60 percent of medical treatments in preclinical development rely on biomarker data. In fact, biomarker testing is available for an ever-increasing range of conditions and diseases, but patient access to these tests is not keeping pace with the rate of innovation and a lack of awareness among providers and patients, a lack of common terminology, and deficient coverage policies by both public and private payers are preventing effective adoption and integration of biomarker testing.

Establishing a task force which will indicate not only the need to expand biomarker testing, but also lay out the mechanisms to achieve that expansion, is critical for all New Hampshire patients to gain access to this new era of precision medicine.

Our only small quibble with the legislation as it currently stands is that we wish the deadline for the report of the task force was much sooner than November 1, 2024. Indeed, we hope that the Task Force will have such a sense of urgency that it completes and submits its report well in advance of that date and that the General Court will quickly take up a serious bill to expand biomarker testing. There is a great deal of data that is available on this issue showing that biomarker testing not only extends and saves lives, but will also save money since patients will be treated earlier and with more effective drugs.

Expanding coverage for biomarker testing will also help achieve other critical objectives of our health care system: reducing health disparities for the poor, for underserved ethnic or racial groups, and for residents of rural areas who lack access to comprehensive cancer centers.

On behalf of all the patients we aid in New Hampshire who will be helped by greater access to biomarker testing and precision medicine, we thank you for your consideration of this very worthy legislation, and we look forward to seeing it successfully go through the legislative process and be signed into law.

Please do not hesitate to contact me at [marcia@askican.org](mailto:marcia@askican.org) or at (602) 618-0183 if you need any additional information.

Respectfully submitted,

*Marcia K. Horn*

Marcia K. Horn, JD  
President and CEO  
ICAN, International Cancer Advocacy Network  
27 West Morten Avenue  
Phoenix, AZ 85021-7246

(602) 618-0183  
[marcia@askican.org](mailto:marcia@askican.org)  
<https://askican.org>

On behalf of Global Colon Cancer Association, we are advocating for the creation of a taskforce on precision medicine and biomarker testing.

Science is advancing and the time is now to ensure that the people of New Hampshire have access to personalized medicine. Lives will be saved, and the goal of reducing the number of deaths from colorectal cancer can be realized.

Precision medicine is dramatically improving cancer outcomes by using information about a person's own genes or proteins (biomarkers) to prevent, diagnose, or treat disease.<sup>1</sup> When used in the treatment of cancer, precision medicine incorporates specific information about a person's cancer to inform diagnosis, prognosis, therapy selection, and to monitor how well therapy is working.

The Global Colon Cancer Association is the voice of millions of colorectal cancer patients, survivors and caregivers from around the world. We know that biomarker testing saves lives. It opens up treatment options for targeted therapy, or precision medicine. Biomarker testing can help to prevent needless suffering.

Sincerely,  
Nicole Sheahan  
President  
Global Colon Cancer Association

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<sup>1</sup> NCI Dictionary of Cancer Terms. <https://www.cancer.gov/publications/dictionaries/cancer-terms/def/precision-medicine>. Accessed September 7, 2020.

**Rep Katherine Rogers Testimony on  
HB 1290: Establishing a task force  
on precision medicine & biomarker testing**

**Tuesday, February 15, 2022 9:30AM  
House Health, Human Services & Elderly Affairs**

Thank you Mr Chairman and members of the Committee.

I am Rep Katherine Rogers and I represent Merrimack District #28, Concord's East Side.

I am here to introduce HB 1290 which would convene a Task Force to study precision medicine and biomarker testing. The Task Force would be charged with making recommendations to the Legislature to foster greater awareness, understanding and access to precision medicine and biomarker testing among patients, health care providers, employers and public and private payers.

You might be asking yourselves what motivates and qualifies me to speak to this subject. A year ago I would have asked myself the same question. But, in January 2021 my life changed when I was diagnosed with Stage 4 endometrial uterine cancer. I am now undergoing intensive chemotherapy and suffering from its side effects.

The treatment has not gone well and we have begun exploring alternative therapies. Some of these alternatives involve biomarkers and many of them are promising. However, these treatments are expensive, costing between \$35,000 and \$65,000 a dose.

**Rep Katherine Rogers Testimony on  
HB 1290: Establishing a task force  
on precision medicine & biomarker testing**

**Tuesday, February 15, 2022 9:30AM  
House Health, Human Services & Elderly Affairs**

I wish I had been aware of biomarker data years ago. Perhaps I could have taken steps that would have stopped or slowed the growth of the cancer I am now suffering from.

Nearly two-thirds of all medical treatments in preclinical development rely on biomarker data. In fact, biomarker testing is available for an ever increasing range of conditions and diseases. However, patient access to this testing has not kept pace with the growth of this science.

More widespread knowledge among health care providers and more efficient coverage policies among insurance carriers, both public and private, is required to integrate biomarker testing into the practice of medicine.

An initiative and commitment by this Legislature to promote biomarker testing would contribute significantly to the prevention and early detection of cancer in New Hampshire.

I am an attorney by trade, not a medical practitioner. But, others will be testifying today who will provide you with a wealth of information about the benefits of this legislation. I simply ask you to move forward in some manner so that we can spare people facing the future I do from appearing before you in the years ahead.

Please vote HB 1290 OTP.

HB 1290-FN - AS INTRODUCED

2022 SESSION

22-2677

05/04

HOUSE BILL            ***1290-FN***

AN ACT                establishing a task force on precision medicine and biomarker testing.

SPONSORS:            Rep. Rogers, Merr. 28

COMMITTEE:          Health, Human Services and Elderly Affairs

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ANALYSIS

This bill establishes a task force on precision medicine and biomarker testing.

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Explanation:        Matter added to current law appears in ***bold italics***.  
Matter removed from current law appears ~~[in brackets and struckthrough.]~~  
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 Two*

AN ACT establishing a task force on precision medicine and biomarker testing.

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

1       1 Findings. The legislature finds that 60 percent of medical treatments in preclinical  
2 development rely on biomarker data. In fact, biomarker testing is available for an ever-increasing  
3 range of conditions and diseases, but patient access to these tests is not keeping pace with the rate of  
4 innovation and a lack of awareness among providers and patients, a lack of common terminology,  
5 and deficient coverage policies by both public and private payers are preventing effective adoption  
6 and integration of biomarker testing.

7       2 New Section; Task Force on Precision Medicine and Biomarker Testing. Amend RSA 126-A by  
8 inserting after section 15-a the following new section:

9       126-A:15-b Task Force on Precision Medicine and Biomarker Testing.

10       I. The health and human services oversight committee, established in RSA 126-A:13, shall  
11 convene a precision medicine and biomarker testing task force.

12       II. The task force shall study and make recommendations to the legislature to support  
13 improved awareness, understanding, and access to precision medicine and biomarker testing by  
14 patients, health care providers, employers, and public and private payers.

15       III. The task force shall be comprised of the following members, appointed in accordance  
16 with this paragraph:

17           (a) The oversight committee shall jointly appoint:

18               (1) One representative of an academic medical center conducting research on  
19 biomarker testing and/or personalized medicine.

20               (2) One expert who is a researcher in molecular diagnostics/ biomarker testing.

21               (3) One molecular pathologist.

22               (4) One expert who is a health care provider who utilizes biomarker tests to  
23 diagnose, treat and/or monitor patients.

24           (b) House members of the oversight committee shall appoint:

25               (1) One health technology researcher who specializes in personalized medicine.

26               (2) One representative of a patient advocacy organization.

27               (3) One representative of a diagnostic company such as a reference laboratory or  
28 biomarker test manufacturer.

29           (c) Senate members of the oversight committee shall appoint:

30               (1) One representative of a health insurance plan or employer that is self-insured.



1 (2) One representative of a national organization which publishes clinical guidelines  
2 on biomarker testing and/or personalized medicine or their appointee.

3 (3) One member of a community or community organization impacted by health  
4 inequities related to biomarker testing and/or precision healthcare.

5 (d) The commissioner of the department of health and human services, or the  
6 commissioner's designee, shall serve as an ex-officio member of the task force.

7 (e) The oversight committee shall jointly select the chairperson of the task force.

8 IV. The task force shall:

9 (a) Solicit definitions of "biomarker testing," "precision medicine," and "molecular  
10 testing," and any other terms as determined by the task force.

11 (b) Review reports or studies on the current status of precision medicine and biomarker  
12 testing, how the science is evolving, and patients' and providers' experiences in accessing and  
13 providing biomarker testing and personalized health care.

14 (c) Examine barriers to the use of biomarker testing across the continuum of consumer  
15 and patient needs focused on diagnosis, treatment decisions, and post-treatment monitoring of  
16 disease, including but not limited to: lack of awareness of biomarker tests generally, inconsistency of  
17 terminology, no or low reimbursement for providers, lack of coverage or restrictive utilization  
18 management by payers, and level of patient and provider understanding of the use of biomarker  
19 testing in measuring indicators of normal biological processes, pathogenic processes, or  
20 pharmacologic responses to a specific therapeutic intervention.

21 (d) Study the role of clinical practice guidelines in health care provider and payer  
22 decision making related to biomarker testing, especially when evidence-based tests are available, but  
23 clinical guidelines are not yet developed.

24 (e) Identify opportunities to expand awareness, education, understanding and  
25 usefulness of biomarker testing and precision medicine to improve care and reduce unnecessary  
26 health care spending.

27 (f) Make and report findings for policies or actions to improve awareness, education, and  
28 coverage that would optimize the use of biomarker testing and precision medicine for residents of  
29 New Hampshire.

30 V. The task force may:

31 (a) Establish subcommittees as necessary to fulfill its duties.

32 (b) Solicit expert testimony to fulfill its duties.

33 VI. A member or an ex officio member of the task force shall not receive compensation as a  
34 member of the task force; but shall receive mileage at the rate paid to state employees when  
35 attending to the duties of the task force.

36 VII. On or before November 1, 2024, the task force shall submit a report of its findings and  
37 recommendations to the governor and legislature.

**HB 1290-FN - AS INTRODUCED**

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1           3 Repeal. RSA 126-A:15-b, relative to the task force on precision medicine and biomarker  
2 testing, is repealed.

3           4 Effective Date.

4           I. Section 3 of this act shall take effect November 1, 2024.

5           II. The remainder of this act shall take effect upon its passage.

LBA  
22-2677  
10/18/21

**HB 1290-FN- FISCAL NOTE  
AS INTRODUCED**

AN ACT                    establishing a task force on precision medicine and biomarker testing.

**FISCAL IMPACT:**

The Legislative Budget Assistant has determined that this legislation, as introduced, has a total fiscal impact of less than \$10,000 in each of the fiscal years 2022 through 2025.

**AGENCIES CONTACTED:**

None