

WEST VIRGINIA LEGISLATURE

2025 REGULAR SESSION

Committee Substitute

for

Senate Bill 28

By Senator Chapman

[Reported February 19, 2025, from the Committee on
Health and Human Resources]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding six new sections,
2 designated §5-16-7h, §33-15-4y, §33-16-3ii, §33-24-7z, §33-25-8w, and §33-25A-8z,
3 relating to requiring insurance coverage for clinical genetic testing for an inherited gene
4 mutation and evidenced-based cancer imaging; providing effective date; and providing
5 that this testing is not subject to cost-sharing.

Be it enacted by the Legislature of West Virginia:

**CHAPTER 5. GENERAL POWERS AND AUTHORITY OF THE
GOVERNOR, SECRETARY OF STATE AND ATTORNEY GENERAL;
BOARD OF PUBLIC WORKS; MISCELLANEOUS AGENCIES,
COMMISSIONS, OFFICES, PROGRAMS, ETC.**

ARTICLE 16. WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE ACT.

**§5-16-7h. Required coverage for clinical genetic testing for an inherited gene mutation and
evidenced-based cancer imaging.**

1 (a) The agency shall provide coverage for the cost of health care services pursuant to this
2 article for the cost of the following health care services:

3 (1) Clinical genetic testing for an inherited gene mutation for individuals with a personal
4 family history of cancer that is recommended by a healthcare professional; and

5 (2) Evidenced-based cancer imaging for individuals with an increased risk of cancer as
6 recommended by the National Comprehensive Cancer Network (NCCN) clinical practice
7 guidelines.

8 (b) This section applies to all coverage issued by this agency delivered, issued for delivery,
9 reissued, or extended in the state on and after January 1, 2026, or at any time thereafter when any
10 term of the policy, contract, or plan is changed, or any premium adjustment is made.

11 (c) Coverage required by this section may not be subject to cost-sharing requirements.

12 (d) If under federal law, application of this section would result in Health Savings Account
13 ineligibility under section 223 of the federal Internal Revenue Code, this requirement shall apply
14 only, for Health Savings Account-qualified High Deductible Health Plans with respect to the
15 deductible of such a plan after the enrollee has satisfied the minimum deductible under section
16 223, except for with respect to items or services that are preventive care pursuant to section
17 223(c)(2)(C) of the federal Internal Revenue Code, in which case the requirements of this section
18 shall apply regardless of whether the minimum deductible under section 223 has been satisfied.

CHAPTER 33. INSURANCE.

ARTICLE 15. ACCIDENT AND SICKNESS INSURANCE.

§33-15-4y. Required coverage for clinical genetic testing for an inherited gene mutation and evidenced-based cancer imaging.

1 (a) An insurance policy issued by an insurer pursuant to this article shall provide coverage
2 for the cost of health care services pursuant to this article for the cost of the following health care
3 services:

4 (1) Clinical genetic testing for an inherited gene mutation for individuals with a personal
5 family history of cancer that is recommended by a healthcare professional; and

6 (2) Evidenced-based cancer imaging for individuals with an increased risk of cancer as
7 recommended by the National Comprehensive Cancer Network (NCCN) clinical practice
8 guidelines.

9 (b) This section applies to all coverage issued by this agency delivered, issued for delivery,
10 reissued, or extended in the state on and after January 1, 2026, or at any time thereafter when any
11 term of the policy, contract, or plan is changed, or any premium adjustment is made.

12 (c) Coverage required by this section may not be subject to cost-sharing requirements.

13 (d) If under federal law, application of this section would result in Health Savings Account
14 ineligibility under section 223 of the federal Internal Revenue Code, this requirement shall apply

only, for Health Savings Account-qualified High Deductible Health Plans with respect to the deductible of such a plan after the enrollee has satisfied the minimum deductible under section 223, except for with respect to items or services that are preventive care pursuant to section 223(c)(2)(C) of the federal Internal Revenue Code, in which case the requirements of this section shall apply regardless of whether the minimum deductible under section 223 has been satisfied.

ARTICLE 16. GROUP ACCIDENT AND SICKNESS INSURANCE.

§33-16-3ii. Required coverage for clinical genetic testing for an inherited gene mutation and evidenced-based cancer imaging.

(a) An insurance policy issued by an insurer pursuant to this article shall provide coverage for the cost of health care services pursuant to this article for the cost of the following health care services:

(1) Clinical genetic testing for an inherited gene mutation for individuals with a personal family history of cancer that is recommended by a healthcare professional; and

(2) Evidenced-based cancer imaging for individuals with an increased risk of cancer as recommended by the National Comprehensive Cancer Network (NCCN) clinical practice guidelines.

(b) This section applies to all coverage issued by this agency delivered, issued for delivery, reissued, or extended in the state on and after January 1, 2026, or at any time thereafter when any term of the policy, contract, or plan is changed, or any premium adjustment is made.

(c) Coverage required by this section may not be subject to cost-sharing requirements.

(d) If under federal law, application of this section would result in Health Savings Account ineligibility under section 223 of the federal Internal Revenue Code, this requirement shall apply only, for Health Savings Account-qualified High Deductible Health Plans with respect to the deductible of such a plan after the enrollee has satisfied the minimum deductible under section 223, except for with respect to items or services that are preventive care pursuant to section 223(c)(2)(C) of the federal Internal Revenue Code, in which case the requirements of this section

19 shall apply regardless of whether the minimum deductible under section 223 has been satisfied.

**ARTICLE 24. HOSPITAL SERVICE CORPORATIONS, MEDICAL SERVICE
CORPORATIONS, DENTAL SERVICE CORPORATIONS AND HEALTH
SERVICE CORPORATIONS.**

**§33-24-7z. Required coverage for clinical genetic testing for an inherited gene mutation and
evidenced-based cancer imaging.**

1 (a) An insurance policy issued by an insurer pursuant to this article shall provide coverage
2 for the cost of health care services pursuant to this article for the cost of the following health care
3 services:

4 (1) Clinical genetic testing for an inherited gene mutation for individuals with a personal
5 family history of cancer that is recommended by a healthcare professional; and

6 (2) Evidenced-based cancer imaging for individuals with an increased risk of cancer as
7 recommended by the National Comprehensive Cancer Network (NCCN) clinical practice
8 guidelines.

9 (b) This section applies to all coverage issued by this agency delivered, issued for delivery,
10 reissued, or extended in the state on and after January 1, 2026, or at any time thereafter when any
11 term of the policy, contract, or plan is changed, or any premium adjustment is made.

12 (c) Coverage required by this section may not be subject to cost-sharing requirements.

13 (d) If under federal law, application of this section would result in Health Savings Account
14 ineligibility under section 223 of the federal Internal Revenue Code, this requirement shall apply
15 only, for Health Savings Account-qualified High Deductible Health Plans with respect to the
16 deductible of such a plan after the enrollee has satisfied the minimum deductible under section
17 223, except for with respect to items or services that are preventive care pursuant to section
18 223(c)(2)(C) of the federal Internal Revenue Code, in which case the requirements of this section
19 shall apply regardless of whether the minimum deductible under section 223 has been satisfied.

ARTICLE 25. HEALTH CARE CORPORATIONS.

§33-25-8w. Required coverage for clinical genetic testing for an inherited gene mutation and evidenced-based cancer imaging.

1 (a) An insurance policy issued by an insurer pursuant to this article shall provide coverage
2 for the cost of health care services pursuant to this article for the cost of the following health care
3 services:

4 (1) Clinical genetic testing for an inherited gene mutation for individuals with a personal
5 family history of cancer that is recommended by a healthcare professional; and

6 (2) Evidenced-based cancer imaging for individuals with an increased risk of cancer as
7 recommended by the National Comprehensive Cancer Network (NCCN) clinical practice
8 guidelines.

9 (b) This section applies to all coverage issued by this agency delivered, issued for delivery,
10 reissued, or extended in the state on and after January 1, 2026, or at any time thereafter when any
11 term of the policy, contract, or plan is changed, or any premium adjustment is made.

12 (c) Coverage required by this section may not be subject to cost-sharing requirements.

13 (d) If under federal law, application of this section would result in Health Savings Account
14 ineligibility under section 223 of the federal Internal Revenue Code, this requirement shall apply
15 only, for Health Savings Account-qualified High Deductible Health Plans with respect to the
16 deductible of such a plan after the enrollee has satisfied the minimum deductible under section
17 223, except for with respect to items or services that are preventive care pursuant to section
18 223(c)(2)(C) of the federal Internal Revenue Code, in which case the requirements of this section
19 shall apply regardless of whether the minimum deductible under section 223 has been satisfied.

ARTICLE 25A. HEALTH MAINTENANCE ORGANIZATION ACT.

§33-25A-8z. Required coverage for clinical genetic testing for an inherited gene mutation and evidenced-based cancer imaging.

1 (a) An insurance policy issued by an insurer pursuant to this article shall provide coverage
2 for the cost of health care services pursuant to this article for the cost of the following health care
3 services:

4 (1) Clinical genetic testing for an inherited gene mutation for individuals with a personal
5 family history of cancer that is recommended by a healthcare professional; and

6 (2) Evidenced-based cancer imaging for individuals with an increased risk of cancer as
7 recommended by the National Comprehensive Cancer Network (NCCN) clinical practice
8 guidelines.

9 (b) This section applies to all coverage issued by this agency delivered, issued for delivery,
10 reissued, or extended in the state on and after January 1, 2026, or at any time thereafter when any
11 term of the policy, contract, or plan is changed, or any premium adjustment is made.

12 (c) Coverage required by this section may not be subject to cost-sharing requirements.

13 (d) If under federal law, application of this section would result in Health Savings Account
14 ineligibility under section 223 of the federal Internal Revenue Code, this requirement shall apply
15 only, for Health Savings Account-qualified High Deductible Health Plans with respect to the
16 deductible of such a plan after the enrollee has satisfied the minimum deductible under section
17 223, except for with respect to items or services that are preventive care pursuant to section
18 223(c)(2)(C) of the federal Internal Revenue Code, in which case the requirements of this section
19 shall apply regardless of whether the minimum deductible under section 223 has been satisfied.

NOTE: The purpose of this bill is to require insurance coverage for clinical genetic testing for an inherited gene mutation and evidenced-based cancer imaging; and providing that this testing is not subject to cost-sharing.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.