

WEST VIRGINIA LEGISLATURE

2026 REGULAR SESSION

Introduced

Senate Bill 662

By Senators Oliverio, Charnock, Clements, Garcia,
Queen, Rose, Takubo, and Taylor

[Introduced January 29, 2026; referred
to the Committee on Health and Human Resources;
and then to the Committee on Finance]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding a new article,
2 designated §16-67-1, §16-67-2, §16-67-3, §16-67-4, §16-67-5, §16-67-6, §16-67-7, §16-
3 67-8, §16-67-9, §16-67-10, and §16-67-11, relating to colorectal cancer prevention;
4 defining terms; establishing a colorectal cancer program within the Bureau for Public
5 Health; allowing for grants to be issued to approved organizations; setting forth grant
6 criteria; setting forth procedure and eligibility for grants; requiring annual reporting;
7 establishing a fund; setting forth financial eligibility; setting forth medical eligibility; setting
8 forth the reimbursement process; setting forth a rate for the screening service; and setting
9 forth the term of the pilot program.

Be it enacted by the Legislature of West Virginia:

ARTICLE 67. COLORECTAL CANCER SCREENING AND DIAGNOSTIC

<u>COLONOSCOPY</u>	<u>TREATMENT</u>	<u>PILOT</u>	<u>PROGRAM.</u>
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<u>§16-67-1.</u>	<u>Short</u>		<u>title.</u>
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1 This article may be cited as the "Colorectal Cancer Screening and Diagnostic Colonoscopy
2 and Treatment Pilot Program".

<u>§16-67-2.</u>	<u>Definitions.</u>
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1 For purposes of this article:

2 "Approved organization" means an organization approved by the director to provide
3 screening and treatment under this article.

4 "Bureau" means the Bureau for Public Health established pursuant to the provisions of
5 §16-1-1 *et seq.* of this code.

6 "Department" means the Department of Health.

7 "Director" means the State Health Officer.

8 "Fund" means the colorectal cancer and diagnostic colonoscopy treatment pilot program
9 fund established pursuant to this article.

10 "Medical and Implementation Advisory Committee" means a group of medical
11 professionals established by the Department of Health to oversee the program, including
12 establishment of guidelines for program eligibility and treatment payment codes.

13 "Provider" means a physician, hospital, or medical provider currently licensed, operating,
14 or practicing in this state.

15 "Qualified applicant" means a person who meets the financial and medical eligibility
16 guidelines in this article.

17 "Unserved populations" means persons having inadequate access and financial resources
18 to obtain colorectal cancer screening services as set forth in the financial eligibility section of this
19 article.

§16-67-3. Establishment of colorectal cancer screening and diagnostic colonoscopy and treatment pilot and treatment; and program components.

1 (a) There is hereby created within the department the Colorectal Cancer Screening and
2 Diagnostic Colonoscopy and Treatment Pilot Program. This program is established to screen and
3 detect colorectal cancer among unserved populations.

4 (b) The program shall include the following:

5 (1) Establishment of protocols for follow up colonoscopies, diagnostic colonoscopies, and
6 colorectal cancer treatment for unserved individuals who meet eligibly criteria;

7 (2) Provision of grants to approved organizations under this article; and

8 (3) Compilation of data concerning the colorectal cancer screening and diagnostic
9 colonoscopies, and colorectal cancer treatment and dissemination of the data to the public and
10 any related outcome information, if available.

11 (c) Colonoscopy services shall be provided by contracted colonoscopy sites under a
12 Memorandum of Understanding.

13 (d) Covered procedures for colonoscopy services include:

14 (1) Pre-visit consultation;

15 (2) Physician fees;

16 (3) Facility fees;

17 (4) Polyp removal; and

18 (5) Pathology.

19 (e) Approved organizations shall agree to deliver the services at no cost to the patient.

20 (f) Treatment services will be initiated and covered under the program in the event that

21 colorectal cancer is detected;

22 (g) Treatment and payment codes shall be established by the Medical and Implementation

23 Advisory Committee; and

24 (h) A memorandum of understanding shall be established with approved organizations to

25 provide treatment established pursuant to this article.

§16-67-4. Grants for approved organizations.

1 (a) The director, or his or her designee, shall make grants, within the amounts appropriated

2 to approved organizations for the provision of services relating to the detection of colorectal cancer

3 and diagnostic colonoscopy screening as part of this program. These organizations shall have:

4 (A) Ability to provide and to ensure consistent, quality colorectal cancer detection and

5 treatment and to provide diagnostic colonoscopy screening;

6 (B) Expertise in colorectal cancer detection and treatment and the provision of diagnostic

7 colonoscopy screening services;

8 (C) Capacity to collaborate and coordinate services with physicians, hospitals, and other

9 appropriate local institutions or agencies;

10 (D) Ability to provide colorectal cancer detection and treatment and diagnostic

11 colonoscopy screening services to unserved populations; and

12 (E) Ability to provide colorectal cancer detection and treatment and diagnostic

13 colonoscopy screening in accordance with national organization standards of high quality and

14 other requirements set forth in this article.

15 (b) Applications shall be made on forms provided by the director for approval of grants to
16 provide colorectal cancer screening, diagnostic colonoscopy, and treatment services by
17 organizations.

§16-67-5. Annual report.

1 The director shall submit an annual report to the Legislative Oversight Commission on
2 Health and Human Resources Accountability concerning the operation of the program established
3 pursuant to the article including any available data and assessment. The report shall include any
4 recommendations for additional action to respond to the high incidence of colorectal cancer in this
5 state and the following information per year: the number of referrals, the number of procedures
6 performed, screening and diagnostic outcomes/results, treatment initiation and completion, CPT
7 codes billed, number of services, cost by service, average cost per patient, and overall cost. The
8 report shall also include the operation and status of the fund, acts, policies, practices, and
9 procedures of the bureau in implementing the provisions of this article. The report shall be
10 transmitted to the Legislature electronically by December 15 of each year. The annual reporting
11 shall begin one year after the effective date of this article.

§16-67-6. Establishment of the Colorectal Cancer and Diagnostic Colonoscopy and

<u>Treatment</u>	<u>Pilot</u>	<u>Program.</u>
<u>(a) There is hereby established the Colorectal Cancer Screening and Diagnostic</u>		
<u>oscopy and Treatment Pilot Program fund which shall provide financial assistance for the</u>		
<u>ing of patients eligible pursuant to this article.</u>		
<u>(b) The fund shall be comprised annually of \$500,000.</u>		
<u>(c) The fund may be comprised of moneys appropriated to the fund by the Legislature,</u>		
<u>ed to the fund by the federal government, and all other sums designated for deposit in the</u>		
<u>om any source, public, or private.</u>		
<u>(d) The fund shall be administered by the Bureau for Public Health.</u>		
<u>(e) Nothing in this article may be construed or interpreted to mean that diagnostic and</u>		

10 treatment are required to be provided by the bureau or the department. Nothing in this article may
11 be construed to mandate funding for the colorectal cancer screening and diagnostic colonoscopy
12 and treatment pilot program or to require any appropriation by the Legislature to the fund.

§16-67-7. Financial eligibility.

1 To be eligible for services under the fund, a patient's income must be at or below 300
2 percent of the federal poverty level in accordance with the prevailing national poverty income
3 guidelines and be medically eligible for participation pursuant to the provisions of this article. The
4 patient may not be responsible for the cost of the screening colonoscopy or any related cancer
5 treatment or facility fee.

§16-67-8. Medical eligibility.

1 In addition to meeting the requirements contained in the financial eligibility section of this
2 article, in order to be eligible for services under the fund, a patient shall meet the screening
3 guidelines set forth by the Medical and Implementation Advisory Committee, including but not
4 limited to the following:

- 5 (1) The patient shall be 45-64 years old;
- 6 (2) The patient shall be a current resident of the State of West Virginia;
- 7 (3) The patient shall meet the eligibility criteria set forth in this article;
- 8 (4) The patient shall have tested positive on a stool-based colorectal screening test;
- 9 (5) The patient shall have symptoms for colorectal cancer requiring diagnostic
10 colonoscopy; and
- 11 (6) The patient shall have a medical home and a West Virginia primary care provider.

§16-67-9. Application forms and process.

1 (a) The bureau shall develop authorization request forms and make the forms available to
2 the provider upon request.

3 (b) An application for colonoscopy or treatment services shall be accompanied by a
4 written, signed, statement from the attending physician which includes the medical basis for the

5 requested services.

§16-67-10. Reimbursement process.

1 (a) The fund is the payor of last resort. Payment for the facility and professional
2 components of the service shall be made not to exceed the provider's current Medicare
3 reimbursement rate.

4 (b) A claim for authorized services rendered shall be processed in accordance with this
5 article.

§16-67-11. Term.

1 The term of this program shall be three years from the effective date.

NOTE: The purpose of this bill is to establish a pilot program to support and pay for colorectal cancer screenings and related treatment to be administered by the Department of Health. The bill sets forth financial and medical eligibility.

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