

2007 SESSION

INTRODUCED

078190702

SENATE BILL NO. 991

Offered January 10, 2007

Prefiled January 9, 2007

A *BILL to amend and reenact § 38.2-3418.1:1 of the Code of Virginia, relating to coverage for autologous bone marrow transplants.*

Patron—Blevins

Referred to Committee on Commerce and Labor

Be it enacted by the General Assembly of Virginia:

1. That § 38.2-3418.1:1 of the Code of Virginia is amended and reenacted as follows:

§ 38.2-3418.1:1. Coverage for stem cell transplants.

A. Each insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis, each corporation providing individual or group accident and sickness subscription contracts, and each health maintenance organization providing a health care plan for health care services shall offer and make available coverage under such policy, contract or plan delivered, issued for delivery or renewed in this Commonwealth on and after January 1, 1995, for the treatment of breast cancer by ~~dose-intensive chemotherapy/autologous bone marrow transplants~~ or stem cell transplants when performed pursuant to protocols approved by the institutional review board of any United States medical teaching college including, but not limited to, National Cancer Institute protocols that have been favorably reviewed and utilized by hematologists or oncologists experienced in ~~dose-intensive chemotherapy/autologous bone marrow transplants~~ or stem cell transplants.

B. Such coverage shall not be subject to any greater copayment than that applicable to any other coverage provided by such policies, contracts or plans, and such coverage shall be subject to the same deductible as that applicable to any other coverage; however, a deductible for such coverage in an amount different than that applicable to any other coverage may also be offered and made available.

C. The provisions of this section shall not apply to short-term travel, accident-only, limited or specified disease policies, or to short-term nonrenewable policies of not more than six months' duration.

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