

## PURPOSE OF BILL: HB 1079

To mandate coverage for genetic testing for an inherited gene mutation and evidence-based cancer imaging for certain individuals, not subject to deductible, copay, or coinsurance limits.

## ACTUARIAL STATEMENT

The Fiscal Impact Statement was prepared according to generally accepted actuarial principles and practices, in compliance with ACT 112. The Statement provides an estimate of the financial and actuarial effect of the proposed change(s) on the Plans, if possible. The Statement makes no comment or opinion with regard to the merits of the measure for which the Statement is prepared; however, any identified technical or mechanical defects have been noted.

We have reviewed the input and results of our analysis for reasonableness and relied upon the data and information provided by the Plans and their Claims Processing Contractors.

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3/5/2025

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Patrick Klein, FSA, MAAA  
Vice President, Segal

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Date

A handwritten signature in black ink, appearing to read "Matthew Kersting".

3/5/2025

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Matthew Kersting, FSA, MAAA  
Vice President, Segal

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Date

## PROJECTED COSTS

Plan	Plan Design Change	Low Annual Cost Estimate	High Annual Cost Estimate
EBD	Covering genetic testing for inherited gene mutation and evidence-based cancer imaging for certain individuals at 100% of the cost	\$2.0 million	\$2.5 million

## PRICING APPROACH AND COMMENTS

House Bill 1079 requires coverage for genetic testing for an inherited gene mutation and evidence-based cancer imaging for certain individuals, and prohibits it being a subject to annual deductible, copayment, or coinsurance.

EBD currently covers both inherited gene mutation and evidence-based cancer imaging for eligible individuals, as required by HB 1079. However, these services are subject to members paying copays, deductibles and / or coinsurance requirements. According to the EBD data for CY 2022, member cost sharing for inherited gene mutation and cancer imaging amounted to approximately \$1.5 million.

After adjusting for increases in medical trends and potential utilization growth due to services being free to the member, we expect this bill to cost EBD \$2.0 – 2.5 million or 0.4% of projected medical claims.