AN ACT

CONCERNING REQUIRED HEALTH CARE COVERAGE FOR THE EARLY DETECTION OF PROSTATE CANCER.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. 10-16-104, Colorado Revised Statutes, 1987 Repl. Vol., as amended, is amended by the addition of a new subsection to read:

10-16-104. Mandatory coverage provisions. (10) All individual and all group sickness and accident insurance policies, except supplemental policies covering a specified disease or other limited benefit, which are delivered or issued for delivery within the state by an entity subject to the provisions of part 2 of this article and all individual and group health care service or indemnity contracts issued by an entity subject to the provisions of part 3 or 4 of this article, as well as any other group health care coverage offered to residents of this state, shall offer coverage for annual screening for the early detection of prostate cancer in men over the age of fifty years and in men over the age of forty years who are in high-risk categories, which coverage by entities subject to part 2 or 3 of this article shall not be subject to policy deductibles. Such coverage shall be the lesser of sixty-five dollars per prostate cancer screening, or the actual charge for such screening. Such benefit shall in no way diminish or limit diagnostic benefits otherwise allowable under a policy. This coverage shall be offered according to the following guidelines:

(I) The screening shall be performed by a qualified medical professional,
INCLUDING WITHOUT LIMITATION A UROLOGIST, INTERNIST, GENERAL PRACTITIONER, DOCTOR OF OSTEOPATHY, NURSE PRACTITIONER, OR PHYSICIAN ASSISTANT.

(II) THE SCREENING SHALL CONSIST, AT A MINIMUM, OF THE FOLLOWING TESTS:

(A) A PROSTATE-SPECIFIC ANTIGEN ("PSA") BLOOD TEST;

(B) DIGITAL RECTAL EXAMINATION.

(III) AT LEAST ONE SCREENING PER YEAR SHALL BE COVERED FOR ANY MAN FIFTY YEARS OF AGE OR OLDER.

(IV) AT LEAST ONE SCREENING PER YEAR SHALL BE COVERED FOR ANY MAN FROM FORTY TO FIFTY YEARS OF AGE WHO IS AT INCREASED RISK OF DEVELOPING PROSTATE CANCER AS DETERMINED BY THE MAN’S PHYSICIAN FOR AN ENTITY SUBJECT TO PART 2 OR 3 OF THIS ARTICLE, OR AS DETERMINED BY A PARTICIPATING PHYSICIAN FOR AN ENTITY SUBJECT TO PART 4 OF THIS ARTICLE.

(b) THE REQUIREMENTS OF THIS SUBSECTION (10) SHALL APPLY TO ALL INDIVIDUAL SICKNESS AND ACCIDENT INSURANCE POLICIES AND HEALTH CARE SERVICE OR INDEMNITY CONTRACTS ISSUED ON OR AFTER JULY 1, 1993, AND TO ALL GROUP ACCIDENT AND SICKNESS POLICIES AND GROUP HEALTH CARE SERVICE OR INDEMNITY CONTRACTS ISSUED, RENEWED, OR REINSTATED ON OR AFTER JULY 1, 1993.

(c) FOR PURPOSES OF THIS SUBSECTION (10), "SICKNESS AND ACCIDENT INSURANCE POLICY" DOES NOT INCLUDE SHORT-TERM, ACCIDENT, FIXED INDEMNITY, SPECIFIED DISEASE POLICIES OR DISABILITY INCOME CONTRACTS, AND LIMITED BENEFIT OR CREDIT DISABILITY INSURANCE, OR SUCH OTHER INSURANCE AS DEFINED IN SECTION 10-18-101 (3) OR BY THE COMMISSIONER. THE TERM ALSO DOES NOT INCLUDE INSURANCE ARISING OUT OF THE "WORKERS’ COMPENSATION ACT OF COLORADO", ARTICLES 40 TO 47 OF TITLE 8, C.R.S., OR OTHER SIMILAR LAW, AUTOMOBILE MEDICAL PAYMENT INSURANCE, OR INSURANCE UNDER WHICH BENEFITS ARE PAYABLE WITH OR WITHOUT REGARD TO FAULT AND WHICH IS REQUIRED BY LAW TO BE CONTAINED IN ANY LIABILITY INSURANCE POLICY OR EQUIVALENT SELF-INSURANCE.

(d) THE HEALTH CARE SERVICE PLAN ISSUED BY AN ENTITY SUBJECT TO THE PROVISIONS OF PART 4 OF THIS ARTICLE MAY PROVIDE THAT THE BENEFITS OFFERED PURSUANT TO THIS SUBSECTION (10) SHALL BE COVERED BENEFITS ONLY IF THE SERVICES ARE RENDERED BY A PROVIDER WHO IS DESIGNATED BY AND AFFILIATED WITH THE HEALTH MAINTENANCE ORGANIZATION.

SECTION 2. Safety clause. The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

Approved: June 9, 1993