Senate Fiscal Agency
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SFA BILL ANALYSIS

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Senate Bill 589 (Substitute S-1)
Senate Bill 590 (Substitute S-1)
Senate Bill 591 (Substitute S-1)
Sponsor: Senator Dale L. Shugars (S.B. 589)
Senator Bev Hammerstrom (S.B. 590)
Senator John J.H. Schwarz, M.D. (S.B. 591)
Committee: Health Policy

Date Completed: 10-18-99

CONTENT

The bills would amend three acts to prohibit Blue Cross and Blue Shield of Michigan (BCBSM), health insurers, and health maintenance organizations (HMOs) from requiring insured persons or applicants to submit to genetic testing, or to disclose genetic information. Senate Bill 589 (S-1) would amend the Nonprofit Health Care Corporation Reform Act, which governs BCBSM; Senate Bill 590 (S-1) would amend the Insurance Code, which governs private insurers; and Senate Bill 591 (S-1) would amend the Public Health Code in regard to HMOs.

The bills would prohibit BCBSM, a health insurer, and an HMO from requiring an insured person or his or her dependent, or an asymptomatic applicant for insurance or his or her asymptomatic dependent, to do either of the following:

-- Undergo genetic testing before issuing, renewing, or continuing a policy, contract, or certificate.
-- Disclose whether genetic testing had been conducted, or the results of genetic testing or genetic information.

"Genetic test" would mean the analysis of human DNA, RNA, chromosomes, and those proteins and metabolites used to detect heritable or somatic disease-related genotypes or karyotypes for "clinical purposes". A genetic test would have to be generally accepted in the scientific and medical communities as being specifically determinative for the presence, absence, or mutation of a gene or chromosome in order to qualify as a genetic test under the bill. "Genetic test" would not include a routine physical examination or a routine analysis, including but not limited to a chemical analysis of body fluids, unless conducted specifically to determine the presence, absence, or mutation of a gene or chromosome. "Genetic information" would mean information about a gene, gene product, or inherited characteristic derived from a genetic test. "Clinical purposes" would include predicted risk of diseases; identifying carriers for single-gene disorders; establishing prenatal and clinical diagnosis or prognosis; prenatal, newborn, and other carrier screening, as well as testing in high-risk families; tests for metabolites if undertaken with high probability that an excess or deficiency of the metabolite indicated or suggested the presence of heritable mutations in single genes; and other tests if their intended purpose were diagnosis of a presymptomatic genetic condition.

Both Senate Bill 590 (S-1) and 591 (S-1) specify that the bills would not prohibit an insurer or an HMO from requiring an applicant for coverage to answer questions concerning family history.

MCL 550.1401 (S.B. 589)
Proposed MCL 500.3407b (S.B. 590)
Proposed MCL 333.21072a (S.B. 591)

Legislative Analyst: G. Towne

FISCAL IMPACT

The bills would have no fiscal impact on State or local government.

Fiscal Analyst: J. Walker

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