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SENATE BILL No. 744

August 19, 2009, Introduced by Senator SANBORN and referred to the Committee on Economic Development and Regulatory Reform.

A bill to amend 1956 PA 218, entitled
"The insurance code of 1956,"

(MCL 500.100 to 500.8302) by adding section 3829a.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 SEC. 3829A. (1) THIS SECTION APPLIES TO ALL MEDICARE
- 2 SUPPLEMENT POLICIES OR CERTIFICATES DELIVERED, ISSUED FOR DELIVERY,
- 3 OR RENEWED ON OR AFTER MAY 21, 2009.
 - (2) AN INSURER OF A MEDICARE SUPPLEMENT POLICY OR CERTIFICATE SHALL NOT DO EITHER OF THE FOLLOWING:
 - (A) DENY OR CONDITION THE ISSUANCE OR EFFECTIVENESS OF THE POLICY OR CERTIFICATE, INCLUDING THE IMPOSITION OF ANY EXCLUSION OF BENEFITS UNDER THE POLICY BASED ON A PREEXISTING CONDITION, ON THE BASIS OF THE GENETIC INFORMATION WITH RESPECT TO THAT INDIVIDUAL.
 - (B) DISCRIMINATE IN THE PRICING OF THE POLICY OR CERTIFICATE,

- 1 INCLUDING THE ADJUSTMENT OF PREMIUM RATES, OF AN INDIVIDUAL ON THE
- 2 BASIS OF THE GENETIC INFORMATION WITH RESPECT TO THAT INDIVIDUAL.
- 3 (3) NOTHING IN SUBSECTION (2) LIMITS THE ABILITY OF AN
- 4 INSURER, TO THE EXTENT OTHERWISE PERMITTED BY LAW, FROM DOING
- 5 EITHER OF THE FOLLOWING:
- 6 (A) DENYING OR CONDITIONING THE ISSUANCE OR EFFECTIVENESS OF A
- 7 POLICY OR CERTIFICATE OR INCREASING THE PREMIUM FOR A GROUP BASED
- 8 ON THE MANIFESTATION OF A DISEASE OR DISORDER OF AN INSURED OR
- 9 APPLICANT.
- 10 (B) INCREASING THE PREMIUM FOR ANY POLICY ISSUED TO AN
- 11 INDIVIDUAL BASED ON THE MANIFESTATION OF A DISEASE OR DISORDER OF
- 12 AN INDIVIDUAL WHO IS COVERED UNDER THE POLICY. HOWEVER, THE
- 13 MANIFESTATION OF A DISEASE OR DISORDER IN 1 INDIVIDUAL CANNOT BE
- 14 USED AS GENETIC INFORMATION ABOUT OTHER GROUP MEMBERS AND TO
- 15 FURTHER INCREASE THE PREMIUM FOR THE GROUP.
- 16 (4) AN INSURER OF A MEDICARE SUPPLEMENT POLICY OR CERTIFICATE
- 17 SHALL NOT REQUEST OR REQUIRE AN INDIVIDUAL OR A FAMILY MEMBER OF
- 18 THAT INDIVIDUAL TO UNDERGO A GENETIC TEST.
- 19 (5) SUBSECTION (4) DOES NOT PRECLUDE AN INSURER OF A MEDICARE
- 20 SUPPLEMENT POLICY OR CERTIFICATE FROM OBTAINING AND USING THE
- 21 RESULTS OF A GENETIC TEST IN MAKING A DETERMINATION REGARDING
- 22 PAYMENT, AS DEFINED FOR THE PURPOSES OF APPLYING THE REGULATIONS
- 23 PROMULGATED UNDER PART C OF TITLE XI AND SECTION 264 OF THE HEALTH
- 24 INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996, 42 USC 1320D
- 25 TO 1320D-8, AND CONSISTENT WITH SUBSECTION (2).
- 26 (6) FOR PURPOSES OF CARRYING OUT SUBSECTION (5), AN INSURER OF
- 27 A MEDICARE SUPPLEMENT POLICY OR CERTIFICATE MAY REQUEST ONLY THE

- 1 MINIMUM AMOUNT OF INFORMATION NECESSARY TO ACCOMPLISH THE INTENDED
- 2 PURPOSE.
- 3 (7) NOTWITHSTANDING SUBSECTION (4), AN INSURER OF A MEDICARE
- 4 SUPPLEMENT POLICY MAY REQUEST, BUT NOT REQUIRE, THAT AN INDIVIDUAL,
- 5 OR A FAMILY MEMBER OF THAT INDIVIDUAL, UNDERGO A GENETIC TEST IF
- 6 EACH OF THE FOLLOWING CONDITIONS IS MET:
- 7 (A) THE REQUEST IS MADE PURSUANT TO RESEARCH THAT COMPLIES
- 8 WITH 45 CFR PART 46, OR EQUIVALENT FEDERAL REGULATIONS, AND ANY
- 9 APPLICABLE STATE OR LOCAL LAW OR REGULATIONS FOR THE PROTECTION OF
- 10 HUMAN SUBJECTS IN RESEARCH.
- 11 (B) THE INSURER CLEARLY INDICATES TO EACH INDIVIDUAL, OR IN
- 12 THE CASE OF A MINOR CHILD, TO THE LEGAL GUARDIAN OF THAT CHILD, TO
- 13 WHOM THE REQUEST IS MADE, THAT COMPLIANCE WITH THE REQUEST IS
- 14 VOLUNTARY AND THAT NONCOMPLIANCE WILL HAVE NO EFFECT ON ENROLLMENT
- 15 STATUS OR PREMIUM OR CONTRIBUTION AMOUNTS.
- 16 (C) GENETIC INFORMATION COLLECTED OR ACQUIRED UNDER THIS
- 17 SUBSECTION SHALL NOT BE USED FOR UNDERWRITING, DETERMINATION OF
- 18 ELIGIBILITY TO ENROLL OR MAINTAIN ENROLLMENT STATUS, PREMIUM RATES,
- 19 OR THE ISSUANCE, RENEWAL, OR REPLACEMENT OF A POLICY OR
- 20 CERTIFICATE.
- 21 (D) THE INSURER NOTIFIES THE COMMISSIONER IN WRITING THAT THE
- 22 INSURER IS CONDUCTING ACTIVITIES PURSUANT TO THE EXCEPTION PROVIDED
- 23 FOR UNDER THIS SUBSECTION, INCLUDING A DESCRIPTION OF THE
- 24 ACTIVITIES CONDUCTED.
- 25 (E) THE INSURER COMPLIES WITH ANY OTHER CONDITIONS AS THE
- 26 COMMISSIONER MAY BY REGULATION REQUIRE FOR ACTIVITIES CONDUCTED
- 27 UNDER THIS SUBSECTION.

- 1 (8) AN INSURER OF A MEDICARE SUPPLEMENT POLICY OR CERTIFICATE
- 2 SHALL NOT REQUEST, REQUIRE, OR PURCHASE GENETIC INFORMATION FOR
- 3 UNDERWRITING PURPOSES.
- 4 (9) AN INSURER OF A MEDICARE SUPPLEMENT POLICY OR CERTIFICATE
- 5 SHALL NOT REOUEST, REOUIRE, OR PURCHASE GENETIC INFORMATION WITH
- 6 RESPECT TO ANY INDIVIDUAL PRIOR TO THAT INDIVIDUAL'S ENROLLMENT
- 7 UNDER THE POLICY IN CONNECTION WITH THAT ENROLLMENT.
- 8 (10) IF AN INSURER OF A MEDICARE SUPPLEMENT POLICY OR
- 9 CERTIFICATE OBTAINS GENETIC INFORMATION INCIDENTAL TO THE
- 10 REQUESTING, REQUIRING, OR PURCHASING OF OTHER INFORMATION
- 11 CONCERNING ANY INDIVIDUAL, THAT REQUEST, REQUIREMENT, OR PURCHASE
- 12 IS NOT A VIOLATION OF SUBSECTION (9) IF THAT REQUEST, REQUIREMENT,
- 13 OR PURCHASE DOES NOT VIOLATE SUBSECTION (8).
- 14 (11) AS USED IN THIS SECTION:
- 15 (A) "FAMILY MEMBER" MEANS, WITH RESPECT TO AN INDIVIDUAL, ANY
- 16 OTHER INDIVIDUAL WHO IS A FIRST-DEGREE, SECOND-DEGREE, THIRD-
- 17 DEGREE, OR FOURTH-DEGREE RELATIVE OF THAT INDIVIDUAL.
- 18 (B) "GENETIC INFORMATION" MEANS, WITH RESPECT TO ANY
- 19 INDIVIDUAL, INFORMATION ABOUT THAT INDIVIDUAL'S GENETIC TESTS, THE
- 20 GENETIC TESTS OF FAMILY MEMBERS OF THAT INDIVIDUAL, AND THE
- 21 MANIFESTATION OF A DISEASE OR DISORDER IN FAMILY MEMBERS OF THAT
- 22 INDIVIDUAL. GENETIC INFORMATION INCLUDES, WITH RESPECT TO ANY
- 23 INDIVIDUAL, ANY REQUEST FOR, OR RECEIPT OF, GENETIC SERVICES, OR
- 24 PARTICIPATION IN CLINICAL RESEARCH WHICH INCLUDES GENETIC SERVICES,
- 25 BY THAT INDIVIDUAL OR ANY FAMILY MEMBER OF THAT INDIVIDUAL. ANY
- 26 REFERENCE TO GENETIC INFORMATION CONCERNING AN INDIVIDUAL OR FAMILY
- 27 MEMBER OF AN INDIVIDUAL WHO IS A PREGNANT WOMAN INCLUDES GENETIC

- 1 INFORMATION OF ANY FETUS CARRIED BY THAT PREGNANT WOMAN OR, WITH
- 2 RESPECT TO AN INDIVIDUAL OR FAMILY MEMBER UTILIZING REPRODUCTIVE
- 3 TECHNOLOGY, INCLUDES GENETIC INFORMATION OF ANY EMBRYO LEGALLY HELD
- 4 BY AN INDIVIDUAL OR FAMILY MEMBER. GENETIC INFORMATION DOES NOT
- 5 INCLUDE INFORMATION ABOUT THE SEX OR AGE OF ANY INDIVIDUAL.
- 6 (C) "GENETIC SERVICES" MEANS A GENETIC TEST, GENETIC
- 7 COUNSELING, INCLUDING OBTAINING, INTERPRETING, OR ASSESSING GENETIC
- 8 INFORMATION, OR GENETIC EDUCATION.
- 9 (D) "GENETIC TEST" MEANS AN ANALYSIS OF HUMAN DNA, RNA,
- 10 CHROMOSOMES, PROTEINS, OR METABOLITES, THAT DETECT GENOTYPES,
- 11 MUTATIONS, OR CHROMOSOMAL CHANGES. GENETIC TEST DOES NOT MEAN AN
- 12 ANALYSIS OF PROTEINS OR METABOLITES THAT DOES NOT DETECT GENOTYPES,
- 13 MUTATIONS, OR CHROMOSOMAL CHANGES; OR AN ANALYSIS OF PROTEINS OR
- 14 METABOLITES THAT IS DIRECTLY RELATED TO A MANIFESTED DISEASE,
- 15 DISORDER, OR PATHOLOGICAL CONDITION THAT COULD REASONABLY BE
- 16 DETECTED BY A HEALTH CARE PROFESSIONAL WITH APPROPRIATE TRAINING
- 17 AND EXPERTISE IN THE FIELD OF MEDICINE INVOLVED.
- 18 (E) "INSURER OF A MEDICARE SUPPLEMENT POLICY OR CERTIFICATE"
- 19 INCLUDES A THIRD-PARTY ADMINISTRATOR OR OTHER PERSON ACTING FOR OR
- 20 ON BEHALF OF THAT INSURER.
- 21 (F) "UNDERWRITING PURPOSES" MEANS ALL OF THE FOLLOWING:
- 22 (i) RULES FOR, OR DETERMINATION OF, ELIGIBILITY, INCLUDING
- 23 ENROLLMENT AND CONTINUED ELIGIBILITY, FOR BENEFITS UNDER THE
- 24 POLICY.
- 25 (ii) THE COMPUTATION OF PREMIUM OR CONTRIBUTION AMOUNTS UNDER
- 26 THE POLICY.
- 27 (iii) THE APPLICATION OF ANY PREEXISTING CONDITION EXCLUSION

- 1 UNDER THE POLICY.
- 2 (iv) OTHER ACTIVITIES RELATED TO THE CREATION, RENEWAL, OR
- 3 REPLACEMENT OF A CONTRACT OF HEALTH INSURANCE OR HEALTH BENEFITS.