

Testimony Neither for Nor Against

LD 107 An Act to Require Health Insurance Coverage for Biomarker Testing

Kimberly Cook, Esq. January 28, 2025

Good Afternoon, Senator Bailey, Representative Mathieson, and distinguished members of the Health Coverage, Insurance and Financial Services Committee, my name is Kim Cook and I am here on behalf of Community Health Options, Maine's nonprofit CO-OP health insurance company. Community Health Options exists for the benefit of its members and our mission which is to provide affordable, high-quality benefits that promote health and wellbeing. We are testifying neither for nor against LD 107 as we did two years ago on LD 1577 which proposed this new mandate during the 131st Legislature.

Community Health Options already covers biomarker testing when clinical guidelines¹ support such testing and when laboratories are approved by either Clinical Laboratory Improvement Amendments (CLIA) or Food and Drug Administration (FDA) to provide this service.

We agree with the sponsor and proponents that this coverage mandate should be based upon solid medical and scientific evidence. In support of this goal, we would recommend amending the bill to strengthen the bill's evidence-based approach by replacing the phrase "medical and scientific evidence" with the phrase "nationally recognized clinical practice guidelines or consensus statements." This more specific language would ensure that the medical and scientific evidence being relied upon is of high quality and

¹The clinical guidelines Community Health Options relies on include National Comprehensive Cancer Network (NCCN) guidelines, which provide expert consensus recommendations based on the latest research and clinical data, MCG guidelines, which offer evidence-based criteria for appropriate clinical decision-making, and UpToDate guidelines, which are recognized for their comprehensive, peer-reviewed clinical content.



is accepted within the medical community. This language also benefits from using terms that are defined in this bill.

- 2. Required coverage. An individual health insurance policy must provide coverage for biomarker testing for the purposes of diagnosis, treatment, appropriate management or ongoing monitoring of a disease or condition of a person covered by the policy when the test is supported by medical and scientific evidence a nationally recognized clinical practice guideline or consensus statement, including, but not limited to:
 - A. A labeled indication for a test approved or cleared by the federal Food and Drug Administration;
 - B. An indicated test for a drug approved by the federal Food and Drug Administration;
 - C. A warning or precaution on a label of a drug approved by the federal Food and Drug Administration;
 - <u>D. A federal Department of Health and Human Services, Centers for Medicare and Medicaid Services national coverage determination or Medicare administrative contractor local coverage determination; or </u>
 - E. A nationally recognized clinical practice guideline or consensus statement.

Coverage described in this subsection must provide for the delivery of biomarker testing services in a manner that limits disruptions in care, including the need for multiple biopsies or biological specimen samples.

Thank you for the opportunity to provide our testimony on LD 107.