REFERENCE TITLE: cancer screening; coverage; gene mutation

State of Arizona
House of Representatives
Fifty-seventh Legislature
First Regular Session
2025

HB 2292

Introduced by
Representatives Simacek: Abeytia, Aguilar, Austin, Connolly, Crews, De Los Santos, Garcia, Gutierrez, Liguori, Luna-Nájera, Márquez, Stahl Hamilton, Volk

AN ACT

AMENDING TITLE 20, CHAPTER 4, ARTICLE 3, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-841.14; AMENDING TITLE 20, CHAPTER 4, ARTICLE 9, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-1057.20; AMENDING TITLE 20, CHAPTER 6, ARTICLE 4, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-1376.11; AMENDING TITLE 20, CHAPTER 6, ARTICLE 5, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-1406.11; AMENDING TITLE 32, CHAPTER 32, ARTICLE 1, ARIZONA REVISED STATUTES, BY ADDING SECTION 32-3230.02; AMENDING TITLE 36, CHAPTER 29, ARTICLE 1, ARIZONA REVISED STATUTES, BY ADDING SECTION 36-2907.16; RELATING TO HEALTH CARE COVERAGE.

(TEXT OF BILL BEGINS ON NEXT PAGE)

Be it enacted by the Legislature of the State of Arizona:

Section 1. Title 20, chapter 4, article 3, Arizona Revised Statutes, is amended by adding section 20-841.14, to read:

20-841.14. Genetic testing; genetic counseling; cancer; coverage; definitions

A. A HOSPITAL SERVICE CORPORATION OR MEDICAL SERVICE CORPORATION THAT ISSUES, DELIVERS OR RENEWS A SUBSCRIPTION CONTRACT IN THIS STATE ON OR AFTER JANUARY 1, 2026 SHALL PROVIDE COVERAGE FOR SUBSCRIBERS AS FOLLOWS:

1. UNDER CIRCUMSTANCES WHERE INCREASED SCREENING, RISK ASSESSMENT, GENETIC COUNSELING OR TESTING IS NECESSARY BASED ON NATIONAL COMPREHENSIVE CANCER NETWORK GUIDELINES.

2. FOR GENETIC COUNSELING, GENETIC TESTING, SINGLE-GENE GERMLINE MUTATION TESTING OR MULTIGENE GERMLINE MUTATION TESTING BASED ON NATIONAL COMPREHENSIVE CANCER NETWORK GUIDELINES, IF THE SUBSCRIBER HAS A PERSONAL HISTORY OR FAMILY HISTORY OF CANCER OR INHERITED GENE MUTATION.

3. FOR ANY GENETIC TEST FOR CANCER RISK IF THE RECOMMENDATION IS CONSISTENT WITH THE MOST RECENT VERSION OF THE GENETIC TESTING GUIDELINES AS PUBLISHED BY A NATIONAL COMPREHENSIVE CANCER NETWORK AND ORDERED BY A HEALTH CARE PROVIDER.

B. A HOSPITAL SERVICE CORPORATION OR MEDICAL SERVICE CORPORATION SHALL ENSURE THAT THE BENEFITS REQUIRED BY THIS SECTION ARE MADE AVAILABLE TO A SUBSCRIBER THROUGH A HEALTH CARE PROVIDER WHO IS A MEMBER OF THE PROVIDER NETWORK OF THE HOSPITAL SERVICE CORPORATION OR MEDICAL SERVICE CORPORATION.

C. COVERAGE UNDER THIS SECTION IS NOT SUBJECT TO A DEDUCTIBLE, COINSURANCE OR ANY OTHER COST SHARING REQUIREMENT.

D. FOR THE PURPOSES OF THIS SECTION:

1. "BRCA GENES" MEANS BRCA1 OR BRCA2 GENES THAT, WHEN MUTATED, CAUSE AN INCREASED RISK OF BREAST, OVARIAN, PROSTATE, PANCREATIC AND MELANOMA CANCERS.

2. "GENETIC TEST FOR CANCER RISK" MEANS A BLOOD, SALIVA OR TISSUE TYPE TEST THAT RELIABLY DETERMINES THE PRESENCE OR ABSENCE OF AN INHERITED GENETIC CHARACTERISTIC THAT IS GENERALLY ACCEPTED IN THE MEDICAL OR SCIENTIFIC COMMUNITY AS BEING ASSOCIATED WITH A STATISTICALLY SIGNIFICANT INCREASED RISK OF CANCER DEVELOPMENT.

3. "GERMLINE MUTATION TESTING" MEANS TESTING FOR INHERITED GENETIC MUTATIONS THAT ARE ASSOCIATED WITH AN INCREASED CANCER RISK BASED ON EVIDENCE-BASED, CLINICAL PRACTICE GUIDELINES THAT ADDRESS GENETIC COUNSELING AND TESTING, SCREENING AND MANAGEMENT OF INDIVIDUALS WHO HAVE AN INHERITED GENETIC MUTATION ASSOCIATED WITH AN INCREASED CANCER RISK AND THAT INCLUDE:

(a) A BREAST CANCER GENE, INCLUDING EITHER OF THE FOLLOWING:

(i) BRCA1.

(ii) BRCA2.

(b) A LYNCH SYNDROME GENE, INCLUDING ANY OF THE FOLLOWING:
(i) MLH1.
(ii) MSH2.
(iii) MSH6.
(iv) PMS2.
(v) EPCAM.
(c) ANY OTHER HEREDITARY CANCER SYNDROME-RELATED GENE.
4. "HEALTH CARE PROVIDER" MEANS A PERSON WHO IS LICENSED OR CERTIFIED PURSUANT TO TITLE 32, CHAPTER 13, 15, 17, 25 OR 29.

Sec. 2. Title 20, chapter 4, article 9, Arizona Revised Statutes, is amended by adding section 20-1057.20, to read:

20-1057.20. Genetic testing; genetic counseling; cancer; coverage; definitions

A. A HEALTH CARE SERVICES ORGANIZATION THAT ISSUES, DELIVERS OR RENEWS AN EVIDENCE OF COVERAGE IN THIS STATE ON OR AFTER JANUARY 1, 2026 SHALL PROVIDE COVERAGE FOR ENROLLEES AS FOLLOWS:
1. UNDER CIRCUMSTANCES WHERE INCREASED SCREENING, GENETIC COUNSELING OR TESTING IS NECESSARY BASED ON NATIONAL COMPREHENSIVE CANCER NETWORK GUIDELINES.
2. FOR GENETIC COUNSELING, GENETIC TESTING, SINGLE-GENE GERMLINE MUTATION TESTING OR MULTIGENE GERMLINE MUTATION TESTING BASED ON NATIONAL COMPREHENSIVE CANCER NETWORK GUIDELINES, IF THE ENROLLEE HAS A PERSONAL HISTORY OR FAMILY HISTORY OF CANCER OR GENE MUTATION.
3. FOR ANY GENETIC TEST FOR CANCER RISK IF THE RECOMMENDATION IS CONSISTENT WITH THE MOST RECENT VERSION OF THE GENETIC TESTING GUIDELINES AS PUBLISHED BY A NATIONAL COMPREHENSIVE CANCER NETWORK AND ORDERED BY A HEALTH CARE PROVIDER.

B. A HEALTH CARE SERVICES ORGANIZATION SHALL ENSURE THAT THE BENEFITS REQUIRED BY THIS SECTION ARE MADE AVAILABLE TO AN ENROLLEE THROUGH A HEALTH CARE PROVIDER WHO IS A MEMBER OF THE PROVIDER NETWORK OF THE HEALTH CARE SERVICES CORPORATION.

C. COVERAGE UNDER THIS SECTION IS NOT SUBJECT TO A DEDUCTIBLE, COINSURANCE OR ANY OTHER COST SHARING REQUIREMENT.

D. FOR THE PURPOSES OF THIS SECTION:
1. "BRCA GENES" MEANS BRCA1 OR BRCA2 GENES THAT, WHEN MUTATED, CAUSE AN INCREASED RISK OF BREAST, OVARIAN, PROSTATE, PANCREATIC AND MELANOMA CANCERS.
2. "GENETIC TEST FOR CANCER RISK" MEANS A BLOOD, SALIVA OR TISSUE TYPE TEST THAT RELIABLY DETERMINES THE PRESENCE OR ABSENCE OF AN INHERITED GENETIC CHARACTERISTIC THAT IS GENERALLY ACCEPTED IN THE MEDICAL OR SCIENTIFIC COMMUNITY AS BEING ASSOCIATED WITH A STATISTICALLY SIGNIFICANT INCREASED RISK OF CANCER DEVELOPMENT.
3. "GERMLINE MUTATION TESTING" MEANS TESTING FOR INHERITED GENETIC MUTATIONS THAT ARE ASSOCIATED WITH AN INCREASED CANCER RISK BASED ON EVIDENCE-BASED, CLINICAL PRACTICE GUIDELINES THAT ADDRESS GENETIC

COUNSELING AND TESTING, SCREENING AND MANAGEMENT OF INDIVIDUALS WHO HAVE AN INHERITED GENETIC MUTATION ASSOCIATED WITH AN INCREASED CANCER RISK AND THAT INCLUDE:

(a) A BREAST CANCER GENE, INCLUDING EITHER OF THE FOLLOWING:

(i) BRCA1.

(ii) BRCA2.

(b) A LYNCH SYNDROME GENE, INCLUDING ANY OF THE FOLLOWING:

(i) MLH1.

(ii) MSH2.

(iii) MSH6.

(iv) PMS2.

(v) EPCAM.

(c) ANY OTHER HEREDITARY CANCER SYNDROME-RELATED GENE.

4. "HEALTH CARE PROVIDER" MEANS A PERSON WHO IS LICENSED OR CERTIFIED PURSUANT TO TITLE 32, CHAPTER 13, 15, 17, 25 OR 29.

Sec. 3. Title 20, chapter 6, article 4, Arizona Revised Statutes, is amended by adding section 20-1376.11, to read:

20-1376.11. Genetic testing; genetic counseling; cancer; coverage; definitions

A. A DISABILITY INSURER THAT ISSUES, DELIVERS OR RENEWS A DISABILITY INSURANCE POLICY IN THIS STATE ON OR AFTER JANUARY 1, 2026 SHALL PROVIDE COVERAGE FOR INSUREDS AS FOLLOWS:

1. UNDER CIRCUMSTANCES WHERE INCREASED SCREENING, GENETIC COUNSELING OR TESTING IS NECESSARY BASED ON NATIONAL COMPREHENSIVE CANCER NETWORK GUIDELINES.

2. FOR GENETIC COUNSELING, GENETIC TESTING, SINGLE-GENE GERMLINE MUTATION TESTING OR MULTIGENE GERMLINE MUTATION TESTING BASED ON NATIONAL COMPREHENSIVE CANCER NETWORK GUIDELINES, IF THE INSURED HAS A PERSONAL HISTORY OR FAMILY HISTORY OF CANCER OR GENE MUTATION.

3. FOR ANY GENETIC TEST FOR CANCER RISK IF THE RECOMMENDATION IS CONSISTENT WITH THE MOST RECENT VERSION OF THE GENETIC TESTING GUIDELINES AS PUBLISHED BY A NATIONAL COMPREHENSIVE CANCER NETWORK AND ORDERED BY A HEALTH CARE PROVIDER.

B. A DISABILITY INSURER SHALL ENSURE THAT THE BENEFITS REQUIRED BY THIS SECTION ARE MADE AVAILABLE TO AN INSURED THROUGH A HEALTH CARE PROVIDER WHO IS A MEMBER OF THE PROVIDER NETWORK OF THE DISABILITY INSURER.

C. COVERAGE UNDER THIS SECTION IS NOT SUBJECT TO A DEDUCTIBLE, COINSURANCE OR ANY OTHER COST SHARING REQUIREMENT.

D. FOR THE PURPOSES OF THIS SECTION:

1. "BRCA GENES" MEANS BRCA1 OR BRCA2 GENES THAT, WHEN MUTATED, CAUSE AN INCREASED RISK OF BREAST, OVARIAN, PROSTATE, PANCREATIC AND MELANOMA CANCERS.

2. "GENETIC TEST FOR CANCER RISK" MEANS A BLOOD, SALIVA OR TISSUE TYPE TEST THAT RELIABLY DETERMINES THE PRESENCE OR ABSENCE OF AN INHERITED

GENETIC CHARACTERISTIC THAT IS GENERALLY ACCEPTED IN THE MEDICAL OR SCIENTIFIC COMMUNITY AS BEING ASSOCIATED WITH A STATISTICALLY SIGNIFICANT INCREASED RISK OF CANCER DEVELOPMENT.

3. "GERMLINE MUTATION TESTING" MEANS TESTING FOR INHERITED GENETIC MUTATIONS THAT ARE ASSOCIATED WITH AN INCREASED CANCER RISK BASED ON EVIDENCE-BASED, CLINICAL PRACTICE GUIDELINES THAT ADDRESS GENETIC COUNSELING AND TESTING, SCREENING AND MANAGEMENT OF INDIVIDUALS WHO HAVE AN INHERITED GENETIC MUTATION ASSOCIATED WITH AN INCREASED CANCER RISK AND THAT INCLUDE:

(a) A BREAST CANCER GENE, INCLUDING EITHER OF THE FOLLOWING:

(i) BRCA1.

(ii) BRCA2.

(b) A LYNCH SYNDROME GENE, INCLUDING ANY OF THE FOLLOWING:

(i) MLH1.

(ii) MSH2.

(iii) MSH6.

(iv) PMS2.

(v) EPCAM.

(c) ANY OTHER HEREDITARY CANCER SYNDROME-RELATED GENE.

4. "HEALTH CARE PROVIDER" MEANS A PERSON WHO IS LICENSED OR CERTIFIED PURSUANT TO TITLE 32, CHAPTER 13, 15, 17, 25 OR 29.

Sec. 4. Title 20, chapter 6, article 5, Arizona Revised Statutes, is amended by adding section 20-1406.11, to read:

20-1406.11. Genetic testing; genetic counseling; cancer; coverage; definitions

A. A GROUP DISABILITY INSURER OR BLANKET DISABILITY INSURER THAT ISSUES, DELIVERS OR RENEWS A GROUP DISABILITY CONTRACT OR BLANKET DISABILITY CONTRACT IN THIS STATE ON OR AFTER JANUARY 1, 2026 SHALL PROVIDE COVERAGE FOR INSUREDS AS FOLLOWS:

1. UNDER CIRCUMSTANCES WHERE INCREASED SCREENING, GENETIC COUNSELING OR TESTING IS NECESSARY BASED ON NATIONAL COMPREHENSIVE CANCER NETWORK GUIDELINES.

2. FOR GENETIC COUNSELING, GENETIC TESTING, SINGLE-GENE GERMLINE MUTATION TESTING OR MULTIGENE GERMLINE MUTATION TESTING BASED ON NATIONAL COMPREHENSIVE CANCER NETWORK GUIDELINES, IF THE INSURED HAS A PERSONAL HISTORY OR FAMILY HISTORY OF CANCER OR GENE MUTATION.

3. FOR ANY GENETIC TEST FOR CANCER RISK IF THE RECOMMENDATION IS CONSISTENT WITH THE MOST RECENT VERSION OF THE GENETIC TESTING GUIDELINES AS PUBLISHED BY A NATIONAL COMPREHENSIVE CANCER NETWORK AND ORDERED BY A HEALTH CARE PROVIDER.

B. A GROUP DISABILITY INSURER OR BLANKET DISABILITY INSURER SHALL ENSURE THAT THE BENEFITS REQUIRED BY THIS SECTION ARE MADE AVAILABLE TO AN INSURED THROUGH A HEALTH CARE PROVIDER WHO IS A MEMBER OF THE PROVIDER NETWORK OF THE GROUP DISABILITY INSURER OR BLANKET DISABILITY INSURER.

C. COVERAGE UNDER THIS SECTION IS NOT SUBJECT TO A DEDUCTIBLE, COINSURANCE OR ANY OTHER COST SHARING REQUIREMENT.

D. FOR THE PURPOSES OF THIS SECTION:

1. "BRCA GENES" MEANS BRCA1 OR BRCA2 GENES THAT, WHEN MUTATED, CAUSE AN INCREASED RISK OF BREAST, OVARIAN, PROSTATE, PANCREATIC AND MELANOMA CANCERS.

2. "GENETIC TEST FOR CANCER RISK" MEANS A BLOOD, SALIVA OR TISSUE TYPE TEST THAT RELIABLY DETERMINES THE PRESENCE OR ABSENCE OF AN INHERITED GENETIC CHARACTERISTIC THAT IS GENERALLY ACCEPTED IN THE MEDICAL OR SCIENTIFIC COMMUNITY AS BEING ASSOCIATED WITH A STATISTICALLY SIGNIFICANT INCREASED RISK OF CANCER DEVELOPMENT.

3. "GERMLINE MUTATION TESTING" MEANS TESTING FOR INHERITED GENETIC MUTATIONS THAT ARE ASSOCIATED WITH AN INCREASED CANCER RISK BASED ON EVIDENCE-BASED, CLINICAL PRACTICE GUIDELINES THAT ADDRESS GENETIC COUNSELING AND TESTING, SCREENING AND MANAGEMENT OF INDIVIDUALS WHO HAVE AN INHERITED GENETIC MUTATION ASSOCIATED WITH AN INCREASED CANCER RISK AND THAT INCLUDE:

(a) A BREAST CANCER GENE, INCLUDING EITHER OF THE FOLLOWING:

(i) BRCA1.

(ii) BRCA2.

(b) A LYNCH SYNDROME GENE, INCLUDING ANY OF THE FOLLOWING:

(i) MLH1.

(ii) MSH2.

(iii) MSH6.

(iv) PMS2.

(v) EPCAM.

(c) ANY OTHER HEREDITARY CANCER SYNDROME-RELATED GENE.

4. "HEALTH CARE PROVIDER" MEANS A PERSON WHO IS LICENSED OR CERTIFIED PURSUANT TO TITLE 32, CHAPTER 13, 15, 17, 25 OR 29.

Sec. 5. Title 32, chapter 32, article 1, Arizona Revised Statutes, is amended by adding section 32-3230.02, to read:

32-3230.02. Primary care providers; genetic testing; genetic counseling; cancer; definitions

A. A PRIMARY CARE PROVIDER SHALL ATTEMPT TO DETERMINE WHETHER EACH ADULT PATIENT TO WHOM THE PRIMARY CARE PROVIDER PROVIDES CARE HAS EITHER:

1. A PERSONAL OR FAMILY HISTORY OF MELANOMA, BREAST, OVARIAN, TUBAL, PERITONEAL, ENDOMETRIAL, COLORECTAL, GASTRIC, PANCREATIC OR PROSTATE CANCER.

2. AN ANCESTRY ASSOCIATED WITH A HARMFUL MUTATION IN THE BRCA GENES OR LYNCH SYNDROME GENES OR MEETS ANY OTHER CRITERIA FOR HEREDITARY CANCER GENETIC TESTING AS OUTLINED IN GUIDELINES PRESCRIBED BY THE NATIONAL COMPREHENSIVE CANCER NETWORK OR A SIMILAR MEDICAL PROFESSIONAL ORGANIZATION.

B. IF THE PRIMARY CARE PROVIDER DETERMINES THAT AN ADULT PATIENT TO WHOM THE PRIMARY CARE PROVIDER PROVIDES CARE MEETS THE CRITERIA PRESCRIBED IN SUBSECTION A, PARAGRAPH 1 OF THIS SECTION, THE PATIENT SHALL BE PROVIDED OR REFERRED FOR GENETIC COUNSELING OR GERMLINE MUTATION TESTING, OR BOTH, AS APPLICABLE, BASED ON NATIONALLY RECOGNIZED CLINICAL STANDARDS.

C. IF THE PRIMARY CARE PROVIDER DETERMINES THAT AN ADULT PATIENT TO WHOM THE PRIMARY CARE PROVIDER PROVIDES CARE MEETS THE CRITERIA PRESCRIBED IN SUBSECTION A, PARAGRAPH 1 OF THIS SECTION AND THE PATIENT HAS NOT PREVIOUSLY TESTED POSITIVE FOR A MUTATION IN THE BRCA GENES OR OTHER GENES ASSOCIATED WITH AN INCREASED CANCER RISK, THE PRIMARY CARE PROVIDER SHALL USE AN APPROPRIATE FAMILIAL RISK ASSESSMENT TOOL TO SCREEN FOR THE RISK OF SUCH A MUTATION. IF THIS SCREENING INDICATES THAT THE PATIENT IS AT RISK OF A HARMFUL MUTATION IN THE BRCA GENES OR OTHER GENES ASSOCIATED WITH AN INCREASED CANCER RISK, THE PRIMARY CARE PROVIDER SHALL DO BOTH OF THE FOLLOWING:

1. PROVIDE GENETIC COUNSELING TO THE PATIENT OR REFER THE PATIENT FOR GENETIC COUNSELING.

2. IF A GENETIC TEST FOR HARMFUL MUTATIONS IN THE BRCA GENES OR OTHER GENES ASSOCIATED WITH AN INCREASED CANCER RISK IS CLINICALLY INDICATED AS A RESULT OF THE GENETIC COUNSELING, ADMINISTER A GENETIC TEST FOR CANCER RISK TO THE PATIENT OR REFER THE PATIENT FOR GENETIC TESTING.

D. FOR THE PURPOSES OF THIS SECTION:

1. "BRCA GENES" MEANS BRCA1 OR BRCA2 GENES THAT, WHEN MUTATED, CAUSE AN INCREASED RISK OF BREAST, OVARIAN, PROSTATE, PANCREATIC AND MELANOMA CANCERS.

2. "GENETIC TEST FOR CANCER RISK" MEANS A BLOOD, SALIVA OR TISSUE TYPE TEST THAT RELIABLY DETERMINES THE PRESENCE OR ABSENCE OF AN INHERITED GENETIC CHARACTERISTIC THAT IS GENERALLY ACCEPTED IN THE MEDICAL OR SCIENTIFIC COMMUNITY AS BEING ASSOCIATED WITH A STATISTICALLY SIGNIFICANT INCREASED RISK OF CANCER DEVELOPMENT.

3. "GERMLINE MUTATION TESTING" MEANS TESTING FOR INHERITED GENETIC MUTATIONS THAT ARE ASSOCIATED WITH AN INCREASED CANCER RISK BASED ON EVIDENCE-BASED, CLINICAL PRACTICE GUIDELINES THAT ADDRESS GENETIC COUNSELING AND TESTING, SCREENING AND MANAGEMENT OF INDIVIDUALS WHO HAVE AN INHERITED GENETIC MUTATION ASSOCIATED WITH AN INCREASED CANCER RISK AND THAT INCLUDE:

(a) A BREAST CANCER GENE, INCLUDING EITHER OF THE FOLLOWING:

(i) BRCA1.

(ii) BRCA2.

(b) A LYNCH SYNDROME GENE, INCLUDING ANY OF THE FOLLOWING:

(i) MLH1.

(ii) MSH2.

(iii) MSH6.

(iv) PMS2.

(v) EPCAM.

(c) ANY OTHER HEREDITARY CANCER SYNDROME-RELATED GENE.

4. "HEALTH CARE PROVIDER" MEANS A PERSON WHO IS LICENSED OR CERTIFIED PURSUANT TO CHAPTER 13, 15, 17, 25 OR 29 OF THIS TITLE.

Sec. 6. Title 36, chapter 29, article 1, Arizona Revised Statutes, is amended by adding section 36-2907.16, to read:

36-2907.16. Genetic testing; genetic counseling; cancer

THE ADMINISTRATION AND ITS CONTRACTORS, TO THE EXTENT AUTHORIZED BY FEDERAL LAW, SHALL PROVIDE SCREENING, GENETIC COUNSELING, GENETIC TESTING AND GERMLINE MUTATION TESTING FOR HARMFUL INHERITED GENETIC MUTATIONS IN THE BRCA GENES OR OTHER GENES THAT CAUSE AN INCREASED CANCER RISK FOR MEMBERS WHEN INDICATED PURSUANT TO SECTION 32-3230.02.

Sec. 7. Short title

This act may be cited as the "Donna Hicks Act".