

SUBJECT: Mandating health insurance coverage for prostate examinations

COMMITTEE: Insurance— favorable, without amendment

VOTE: 8 ayes — Smithee, Van de Putte, Averitt, Burnam, Eiland, G. Lewis, Olivo, Wise
0 nays
1 absent — Bonnen

SENATE VOTE: On final passage, April 4 — 28-0

WITNESSES: On — Rhonda Myron, Texas Department of Insurance

DIGEST: SB 258 would require health benefit plans that provide benefits for diagnostic medical procedures to cover the cost of an annual medically recognized diagnostic examination for detection of prostate cancer.

The minimum benefit would have to include a physical examination for the detection of prostate cancer and a prostate-specific antigen test used for the detection of prostate cancer for each male enrolled in the plan who was at least 50 years old and asymptomatic or at least 40 years old with a family history of prostate cancer or another prostate risk factor.

Health benefit plans would have to provide written notice to enrollees regarding this coverage.

SB 258 would take effect September 1, 1997, and would apply to health benefit plans delivered, issued for delivery or renewed on January 1, 1998.

SUPPORTERS SAY: SB 258 would help detect and prevent the prevalent but hard-to-detect disease of prostate cancer by requiring insurers and HMOs to cover diagnostic tests for prostate cancer for at-risk males if they cover other diagnostic tests. Men over the age of fifty are most susceptible to this disease, and about one in five American men will develop prostate cancer in their lifetime.

The prostate gland is only found in men and is a walnut-sized organ attached to the base of the urethra that produces a component of seminal fluid. Prostate cancer can often exhibit no symptoms until the cancer has spread to other parts of the body. Other problems associated with the disease and its treatment include incontinence and impotence. The most common form of medical surveillance of the prostate is through a digital rectal examination.

The prostate specific antigen (PSA) test is a relatively inexpensive and accurate method of detecting prostate cancer in early stages before the tumor becomes palpable. Even though prostate cancer may not exhibit symptoms in the early stages, some Texans been refused testing by doctors who are overly cautious against ordering possibly unnecessary tests. This bill would provide a low-cost, effective recourse to inform or reassure patients of their health condition and could improve the early detection and treatment outcomes of this potentially crippling and deadly disease.

PSA test coverage would impose a very small increase in the overall costs of coverage, if any. Most men rely on their doctor's advice and diagnosis, and testing based solely on a patient's request would not be excessive.

**OPPONENTS
SAY:**

SB 258 would require payment for prostate specific antigen tests that are not medically necessary, increasing the costs of health benefit plans. The bill also would open the door for the enactment of other benefit mandates at a time when most health benefit plans advocate reducing state mandates so they can offer more affordable coverage.

Most insurers and HMOs already pay for PSA tests when warranted by enrollee symptoms or for diagnostic purposes. Medical supervision and examinations are essential companions to testing because the PSA tests are not 100 percent accurate. Yet this bill would require health benefit plans to pay for tests based solely on a patient's fear or desire, regardless of whether they seemed warranted by a doctor's examination or diagnosis. Also, the bill would not limit the number of tests paid for by the coverage, and could conceivably cover costs of multiple and duplicative testing requested by overly concerned men.

SB 258 would add yet another mandate that could increase the cost of health insurance coverage for employers and could lead some employers to drop health benefits for their employees altogether.

**OTHER
OPPONENTS
SAY:**

Men are not the only people who experience greater health risks and problems as they age. Other required benefits should include tests for diseases that are initially painless and hard to detect in women over the age of 50, such as osteoporosis testing and mammograms.

NOTES:

A related bill, HB 239 by Puente, which would require the Teacher Retirement System to provide coverage for annual PSA testing for males over the age of 50, has passed both house and been sent to the governor.