GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2005

H HOUSE BILL 323

Short Title: State Health Plan/Increase Wellness Benefit. (Public)

Sponsors: Representatives Jeffus; Culp, Glazier, Luebke, and McLawhorn.

Referred to: Health.

February 21, 2005

A BILL TO BE ENTITLED

AN ACT TO INCREASE THE WELLNESS BENEFIT UNDER THE TEACHERS' AND STATE EMPLOYEES' COMPREHENSIVE MAJOR MEDICAL PLAN.

The General Assembly of North Carolina enacts:

SECTION 1. G.S. 135-40.5(e) reads as rewritten:

"§ 135-40.5. Benefits not subject to deductible or coinsurance.

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(e) Routine Diagnostic Examinations. – The Plan will pay one hundred percent (100%) of allowable charges for routine diagnostic examinations and tests, including breast, colon, rectal, and prostate exams, X rays, mammograms, blood and blood pressure checks, urine tests, tuberculosis tests, tests and other procedures to detect cardiovascular disease, and general health checkups that are medically necessary for the maintenance and improvement of individual health but no more often than once every three years for covered individuals to age 40 years, once every two years for covered individuals to age 50 years, and once a year for covered individuals age 50 years and older, unless a more frequent occurrence is warranted by a medical condition when such charges are incurred in a medically supervised facility. Routine diagnostic examinations and tests covered under this subsection also include examinations and tests for the screening for the early detection of cervical cancer. The coverage shall be in accordance with the most recently published American Cancer Society guidelines or guidelines adopted by the North Carolina Advisory Committee on Cancer Coordination and Control for any covered female. For the purposes of this subsection, "examinations and laboratory tests for the screening for the early detection of cervical cancer" means conventional PAP smear screening, liquid-based cytology, and human papilloma virus (HPV) detection methods for women with equivocal findings on cervical cytologic analysis that are subject to the approval of and have been approved by the United States Food and Drug Administration. Provided, however, that charges for such examinations and tests are not covered by the Plan when they are incurred to obtain or continue employment, to secure insurance coverage, to comply with legal proceedings, to attend

- schools or camps, to meet travel requirements, to participate in athletic and related activities, or to comply with governmental licensing requirements. The maximum
- amount payable under this subsection for a covered individual is one hundred fifty
- 4 dollars (\$150.00) six hundred dollars (\$600.00) per fiscal year."
- 5 **SECTION 2.** This act becomes effective July 1, 2005.