

# SENATE BUDGET AND APPROPRIATIONS COMMITTEE

## STATEMENT TO

[First Reprint]

## **SENATE, No. 3098**

with committee amendments

# **STATE OF NEW JERSEY**

DATED: MARCH 17, 2025

The Senate Budget and Appropriations Committee reports favorably and with committee amendments Senate Bill No. 3098 (1R).

As amended and reported, this bill requires health insurers to cover biomarker precision medical testing. Under the bill, health insurance carriers (including health service corporations, hospital service corporations, medical service corporations, commercial individual and group health insurers, health maintenance organizations, entities contracted to administer health benefits in connection with the State Health Benefits Program and School Employees' Health Benefits Program, and Medicaid) are to cover biomarker precision medical testing for the purposes of diagnosis, treatment, appropriate management, or ongoing monitoring of an individual's disease or condition, excluding asymptomatic screening, to guide treatment decisions of an individual. Biomarker precision medical testing is to be covered only when the efficacy and appropriateness of testing for the diagnosis, treatment, appropriate management, or guiding treatment decisions for an individual's disease or condition is recognized by: (1) labeled indications for an FDA-approved or -cleared test; (2) indicated tests for an FDA-approved drug; (3) actions to address warnings and precautions on FDA-approved drug labels; (4) Centers for Medicare and Medicaid Services National Coverage Determinations or Medicare Administrative Contractor Local Coverage Determinations; or (5) Nationally recognized clinical practice guidelines. Coverage is to be provided in a manner that limits disruption, including multiple biopsies or biospecimen samples, in the care of an individual.

The bill also stipulates that utilization review decisions concerning coverage provided under the bill are to be made in accordance with guidelines and timeframes already present in current law, and that coverage for biomarker precision medical testing is to be provided to the same extent as for any other medical condition, including determinations of clinical review criteria used for utilization review of health care services along with copayment, deductible, and coinsurance provisions.

COMMITTEE AMENDMENTS:

The committee amended the bill to:

(1) require health insurers to provide coverage for biomarker precision medical testing for the purposes of diagnosis, treatment, appropriate management, or ongoing monitoring of a disease or condition, excluding asymptomatic screening, to guide treatment decisions of an individual under certain conditions;

(2) clarify the circumstances under which biomarker precision medical testing is required to be covered;

(3) add language requiring certain insurers to provide coverage for biomarker precision medical testing to the same extent as for other medical conditions, including clinical review criteria used for utilization review of health care services and copayment, deductible, and coinsurance provisions; and

(4) make technical changes.

FISCAL IMPACT:

Fiscal information for this bill is currently unavailable.