

107TH CONGRESS  
1ST SESSION

# H. R. 1520

To amend the Public Health Service Act and the Employee Retirement Income Security Act of 1974 to require coverage for colorectal cancer screenings for group health plans and group and individual health insurance coverage.

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## IN THE HOUSE OF REPRESENTATIVES

APRIL 4, 2001

Ms. SLAUGHTER (for herself, Mrs. MORELLA, Mr. HASTINGS of Florida, Mr. ALLEN, Mr. BACA, Mr. BALDACCI, Mr. BLAGOJEVICH, Mr. BONIOR, Mr. BORSKI, Mr. BRADY of Pennsylvania, Mr. CAPUANO, Ms. CARSON of Indiana, Mr. COYNE, Mr. CRAMER, Mr. DOYLE, Ms. ESHOO, Mr. FILNER, Mr. FOLEY, Mr. FROST, Mr. GONZALEZ, Mr. GREEN of Texas, Mr. GUTIERREZ, Mr. HILLIARD, Mr. HINCHEY, Mr. KANJORSKI, Mr. LANTOS, Mrs. LOWEY, Mrs. MALONEY of New York, Mr. MCINTYRE, Mr. McNULTY, Ms. MILLENDER-McDONALD, Mrs. MINK of Hawaii, Mr. MOORE, Mr. MORAN of Virginia, Mr. PASCRELL, Mr. PAYNE, Mr. PLATTS, Mr. RANGEL, Mr. RUSH, Ms. SANCHEZ, Mr. SANDLIN, Ms. SCHAKOWSKY, Mr. SHERMAN, Mr. SPRATT, Mr. STARK, Mrs. THURMAN, Mr. TIERNEY, Mr. TOWNS, and Ms. WOOLSEY) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Education and the Workforce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend the Public Health Service Act and the Employee Retirement Income Security Act of 1974 to require coverage for colorectal cancer screenings for group health plans and group and individual health insurance coverage.

1       *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; FINDINGS.**

4       (a) **SHORT TITLE.**—This Act may be cited as the  
5 “Eliminate Colorectal Cancer Act of 2001”.

6       (b) **FINDINGS.**—The Congress finds the following:

7           (1) Colorectal cancer is the second leading  
8 cause of cancer deaths in the United States for men  
9 and women combined.

10          (2) It is estimated that in 2001, 135,400 new  
11 cases of colorectal cancer will be diagnosed in men  
12 and women in the United States.

13          (3) Colorectal cancer is expected to kill 56,700  
14 individuals in the United States in 2001.

15          (4) Research has shown that a high-fiber, low-  
16 fat diet can significantly reduce the risk of devel-  
17 oping colorectal cancer.

18          (5) The adoption of a healthy lifestyle at a  
19 young age can significantly reduce the risk of devel-  
20 oping colorectal cancer.

21          (6) Appropriate screenings and regular tests,  
22 including fecal occult blood tests, sigmoidoscopy, and  
23 colonoscopy, can save large numbers of lives by lead-  
24 ing to earlier identification of colorectal cancer.

1           (7) The Centers for Disease Control and Pre-  
2           vention, the Health Care Financing Administration,  
3           and the National Cancer Institute have initiated the  
4           Screen for Life Campaign targeted to individuals  
5           age 50 and older to spread the message of the im-  
6           portance of colorectal cancer screening tests.

7           (8) Education helps to inform the public of  
8           symptoms for the early detection of colorectal cancer  
9           and methods of prevention.

10 **SEC. 2. COVERAGE FOR COLORECTAL CANCER SCREENING.**

11           (a) GROUP HEALTH PLANS.—

12           (1) PUBLIC HEALTH SERVICE ACT AMEND-  
13           MENTS.—(A) Subpart 2 of part A of title XXVII of  
14           the Public Health Service Act is amended by adding  
15           at the end the following new section:

16 **“SEC. 2707. COVERAGE FOR COLORECTAL CANCER SCREEN-**  
17 **ING.**

18           “(a) COVERAGE FOR COLORECTAL CANCER SCREEN-  
19           ING.—

20           “(1) IN GENERAL.—A group health plan, and a  
21           health insurance issuer offering group health insur-  
22           ance coverage, shall provide coverage for colorectal  
23           cancer screening at regular intervals to—

24                   “(A) any participant or beneficiary age 50  
25                   or over; and

1           “(B) any participant or beneficiary under  
2           the age of 50 who is at a high risk for  
3           colorectal cancer, or who may have symptoms  
4           or circumstances that indicate a need for  
5           colorectal cancer screening.

6           “(2) DEFINITION OF HIGH RISK.—For purposes  
7           of subsection (a)(1)(B), the term ‘high risk for  
8           colorectal cancer’ has the meaning given such term  
9           in section 1861(pp)(2) of the Social Security Act (42  
10          U.S.C. 1395x(pp)(2)).

11          “(3) METHOD OF SCREENING.—The group  
12          health plan or health insurance issuer shall cover the  
13          method and frequency of colorectal cancer screening  
14          deemed appropriate by a health care provider treat-  
15          ing such participant or beneficiary, in consultation  
16          with the participant or beneficiary. Such coverage  
17          shall include the procedures in section 1861(pp)(1)  
18          of the Social Security Act (42 U.S.C. 1395x(pp)(1))  
19          and section 4104(a)(2) of the Balanced Budget Act  
20          of 1997.

21          “(b) NOTICE.—A group health plan under this part  
22          shall comply with the notice requirement under section  
23          714(b) of the Employee Retirement Income Security Act  
24          of 1974 with respect to the requirements of this section  
25          as if such section applied to such plan.

1       “(c) NON-PREEMPTION OF MORE PROTECTIVE  
2 STATE LAW WITH RESPECT TO HEALTH INSURANCE  
3 ISSUERS.—This section shall not be construed to super-  
4 sede any provision of State law which establishes, imple-  
5 ments, or continues in effect any standard or requirement  
6 solely relating to health insurance issuers in connection  
7 with group health insurance coverage that provides great-  
8 er protections to participants and beneficiaries than the  
9 protections provided under this section.”.

10           (B) Section 2723(c) of such Act (42 U.S.C.  
11 300gg-23(c)) is amended by striking “section 2704”  
12 and inserting “sections 2704 and 2707”.

13           (2) ERISA AMENDMENTS.—(A) Subpart B of  
14 part 7 of subtitle B of title I of the Employee Re-  
15 tirement Income Security Act of 1974 is amended by  
16 adding at the end the following new section:

17 **“SEC. 714. COVERAGE FOR COLORECTAL CANCER SCREEN-**  
18 **ING.**

19       “(a) COVERAGE FOR COLORECTAL CANCER SCREEN-  
20 ING.—

21           “(1) IN GENERAL.—A group health plan, and a  
22 health insurance issuer offering group health insur-  
23 ance coverage, shall provide coverage for colorectal  
24 cancer screening at regular intervals to—

1           “(A) any participant or beneficiary age 50  
2           or over; and

3           “(B) any participant or beneficiary under  
4           the age of 50 who is at a high risk for  
5           colorectal cancer, or who may have symptoms  
6           or circumstances that indicate a need for  
7           colorectal cancer screening.

8           “(2) DEFINITION OF HIGH RISK.—For purposes  
9           of subsection (a)(1)(B), the term ‘high risk for  
10          colorectal cancer’ has the meaning given such term  
11          in section 1861(pp)(2) of the Social Security Act (42  
12          U.S.C. 1395x(pp)(2)).

13          “(3) METHOD OF SCREENING.—The group  
14          health plan or health insurance issuer shall cover the  
15          method and frequency of colorectal cancer screening  
16          deemed appropriate by a health care provider treat-  
17          ing such participant or beneficiary, in consultation  
18          with the participant or beneficiary. Such coverage  
19          shall include the procedures in section 1861(pp)(1)  
20          of the Social Security Act (42 U.S.C. 1395x(pp)(1))  
21          and section 4104(a)(2) of the Balanced Budget Act  
22          of 1997.

23          “(b) NOTICE UNDER GROUP HEALTH PLAN.—The  
24          imposition of the requirements of this section shall be  
25          treated as a material modification in the terms of the plan

1 described in section 102(a), for purposes of assuring no-  
2 tice of such requirements under the plan; except that the  
3 summary description required to be provided under the  
4 third to last sentence of section 104(b)(1) with respect to  
5 such modification shall be provided by not later than 60  
6 days after the first day of the first plan year in which  
7 such requirements apply.”.

8 (B) Section 731(c) of such Act (29 U.S.C.  
9 1191(c)) is amended by striking “section 711” and  
10 inserting “sections 711 and 714”.

11 (C) Section 732(a) of such Act (29 U.S.C.  
12 1191a(a)) is amended by striking “section 711” and  
13 inserting “sections 711 and 714”.

14 (D) The table of contents in section 1 of such  
15 Act is amended by inserting after the item relating  
16 to section 713 the following new item:

“Sec. 714. Coverage for colorectal cancer screening.”.

17 (b) INDIVIDUAL HEALTH INSURANCE.—(1) Part B  
18 of title XXVII of the Public Health Service Act is amend-  
19 ed by inserting after section 2752 the following new sec-  
20 tion:

21 **“SEC. 2753. COVERAGE FOR COLORECTAL CANCER SCREEN-**  
22 **ING.**

23 “(a) IN GENERAL.—The provisions of section  
24 2707(a) shall apply to health insurance coverage offered  
25 by a health insurance issuer in the individual market in

1 the same manner as it applies to health insurance coverage  
2 offered by a health insurance issuer in connection with a  
3 group health plan in the small or large group market.

4 “(b) NOTICE.—A health insurance issuer under this  
5 part shall comply with the notice requirement under sec-  
6 tion 714(b) of the Employee Retirement Income Security  
7 Act of 1974 with respect to the requirements referred to  
8 in subsection (a) as if such section applied to such issuer  
9 and such issuer were a group health plan.”.

10 (c) EFFECTIVE DATES.—(1)(A) Subject to subpara-  
11 graph (B), the amendments made by subsection (a) shall  
12 apply with respect to group health plans for plan years  
13 beginning on or after January 1, 2003.

14 (B) In the case of a group health plan maintained  
15 pursuant to 1 or more collective bargaining agreements  
16 between employee representatives and 1 or more employ-  
17 ers ratified before the date of enactment of this Act, the  
18 amendments made by subsection (a) shall not apply to  
19 plan years beginning before the later of—

20 (i) the date on which the last collective bar-  
21 gaining agreements relating to the plan terminates  
22 (determined without regard to any extension thereof  
23 agreed to after the date of enactment of this Act),  
24 or

25 (ii) January 1, 2003.

1 For purposes of clause (i), any plan amendment made pur-  
2 suant to a collective bargaining agreement relating to the  
3 plan which amends the plan solely to conform to any re-  
4 quirement added by subsection (a) shall not be treated as  
5 a termination of such collective bargaining agreement.

6 (2) The amendments made by subsection (b) shall  
7 apply with respect to health insurance coverage offered,  
8 sold, issued, renewed, in effect, or operated in the indi-  
9 vidual market on or after January 1, 2003.

10 (d) COORDINATED REGULATIONS.—The Secretary of  
11 Labor and the Secretary of Health and Human Services  
12 shall ensure, through the execution of an interagency  
13 memorandum of understanding among such Secretaries,  
14 that—

15 (1) regulations, rulings, and interpretations  
16 issued by such Secretaries relating to the same mat-  
17 ter over which both Secretaries have responsibility  
18 under the provisions of this section (and the amend-  
19 ments made thereby) are administered so as to have  
20 the same effect at all times; and

21 (2) coordination of policies relating to enforcing  
22 the same requirements through such Secretaries in  
23 order to have a coordinated enforcement strategy

- 1 that avoids duplication of enforcement efforts and
- 2 assigns priorities in enforcement.

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