

HB 1290-FN - AS INTRODUCED

2022 SESSION

22-2677

05/04

HOUSE BILL                    ***1290-FN***

AN ACT                    establishing a task force on precision medicine and biomarker testing.

SPONSORS:            Rep. Rogers, Merr. 28

COMMITTEE:        Health, Human Services and Elderly Affairs

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ANALYSIS

This bill establishes a task force on precision medicine and biomarker testing.

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Explanation:        Matter added to current law appears in ***bold italics***.  
                         Matter removed from current law appears ~~[in brackets and struckthrough.]~~  
                         Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

STATE OF NEW HAMPSHIRE

*In the Year of Our Lord Two Thousand Twenty Two*

AN ACT establishing a task force on precision medicine and biomarker testing.

*Be it Enacted by the Senate and House of Representatives in General Court convened:*

1       1 Findings. The legislature finds that 60 percent of medical treatments in preclinical  
2 development rely on biomarker data. In fact, biomarker testing is available for an ever-increasing  
3 range of conditions and diseases, but patient access to these tests is not keeping pace with the rate of  
4 innovation and a lack of awareness among providers and patients, a lack of common terminology,  
5 and deficient coverage policies by both public and private payers are preventing effective adoption  
6 and integration of biomarker testing.

7       2 New Section; Task Force on Precision Medicine and Biomarker Testing. Amend RSA 126-A by  
8 inserting after section 15-a the following new section:

9       126-A:15-b Task Force on Precision Medicine and Biomarker Testing.

10       I. The health and human services oversight committee, established in RSA 126-A:13, shall  
11 convene a precision medicine and biomarker testing task force.

12       II. The task force shall study and make recommendations to the legislature to support  
13 improved awareness, understanding, and access to precision medicine and biomarker testing by  
14 patients, health care providers, employers, and public and private payers.

15       III. The task force shall be comprised of the following members, appointed in accordance  
16 with this paragraph:

17           (a) The oversight committee shall jointly appoint:

18               (1) One representative of an academic medical center conducting research on  
19 biomarker testing and/or personalized medicine.

20               (2) One expert who is a researcher in molecular diagnostics/ biomarker testing.

21               (3) One molecular pathologist.

22               (4) One expert who is a health care provider who utilizes biomarker tests to  
23 diagnose, treat and/or monitor patients.

24           (b) House members of the oversight committee shall appoint:

25               (1) One health technology researcher who specializes in personalized medicine.

26               (2) One representative of a patient advocacy organization.

27               (3) One representative of a diagnostic company such as a reference laboratory or  
28 biomarker test manufacturer.

29           (c) Senate members of the oversight committee shall appoint:

30               (1) One representative of a health insurance plan or employer that is self-insured.

1                   (2) One representative of a national organization which publishes clinical guidelines  
2 on biomarker testing and/or personalized medicine or their appointee.

3                   (3) One member of a community or community organization impacted by health  
4 inequities related to biomarker testing and/or precision healthcare.

5                   (d) The commissioner of the department of health and human services, or the  
6 commissioner's designee, shall serve as an ex-officio member of the task force.

7                   (e) The oversight committee shall jointly select the chairperson of the task force.

8                   IV. The task force shall:

9                   (a) Solicit definitions of "biomarker testing," "precision medicine," and "molecular  
10 testing," and any other terms as determined by the task force.

11                   (b) Review reports or studies on the current status of precision medicine and biomarker  
12 testing, how the science is evolving, and patients' and providers' experiences in accessing and  
13 providing biomarker testing and personalized health care.

14                   (c) Examine barriers to the use of biomarker testing across the continuum of consumer  
15 and patient needs focused on diagnosis, treatment decisions, and post-treatment monitoring of  
16 disease, including but not limited to: lack of awareness of biomarker tests generally, inconsistency of  
17 terminology, no or low reimbursement for providers, lack of coverage or restrictive utilization  
18 management by payers, and level of patient and provider understanding of the use of biomarker  
19 testing in measuring indicators of normal biological processes, pathogenic processes, or  
20 pharmacologic responses to a specific therapeutic intervention.

21                   (d) Study the role of clinical practice guidelines in health care provider and payer  
22 decision making related to biomarker testing, especially when evidence-based tests are available, but  
23 clinical guidelines are not yet developed.

24                   (e) Identify opportunities to expand awareness, education, understanding and  
25 usefulness of biomarker testing and precision medicine to improve care and reduce unnecessary  
26 health care spending.

27                   (f) Make and report findings for policies or actions to improve awareness, education, and  
28 coverage that would optimize the use of biomarker testing and precision medicine for residents of  
29 New Hampshire.

30                   V. The task force may:

31                   (a) Establish subcommittees as necessary to fulfill its duties.

32                   (b) Solicit expert testimony to fulfill its duties.

33                   VI. A member or an ex officio member of the task force shall not receive compensation as a  
34 member of the task force; but shall receive mileage at the rate paid to state employees when  
35 attending to the duties of the task force.

36                   VII. On or before November 1, 2024, the task force shall submit a report of its findings and  
37 recommendations to the governor and legislature.

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1           3 Repeal. RSA 126-A:15-b, relative to the task force on precision medicine and biomarker  
2 testing, is repealed.

3           4 Effective Date.

4           I. Section 3 of this act shall take effect November 1, 2024.

5           II. The remainder of this act shall take effect upon its passage.

LBA  
22-2677  
10/18/21

**HB 1290-FN- FISCAL NOTE  
AS INTRODUCED**

AN ACT                    establishing a task force on precision medicine and biomarker testing.

**FISCAL IMPACT:**

The Legislative Budget Assistant has determined that this legislation, as introduced, has a total fiscal impact of less than \$10,000 in each of the fiscal years 2022 through 2025.

**AGENCIES CONTACTED:**

None