

# Senate Health and Human Services Committee

*Sophie Walsh 271-3469*

**SB 606-FN**, relative to insurance coverage for biomarker testing.

**Hearing Date:** January 28, 2026

**Time Opened:** 9:03 a.m.

**Time Closed:** 9:40 a.m.

**Members of the Committee Present:** Senators Rochefort, Avard, Birdsell, Prentiss and Long

**Members of the Committee Absent:** None

**Bill Analysis:** This bill requires health insurance coverage for biomarker testing. The bill also requires the state Medicaid plan to include coverage for biomarker testing.

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**Sponsors:**

Sen. Birdsell

Sen. Innis

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**Who supports the bill:** Sen. Birdsell, Sen. Innis, Mike Rollo (American Cancer Society Cancer Action Network), Jenny Horgan (Alzheimer's Association), John Ziemba (Alzheimer's Association), Kathy Harvard (Alzheimer's Association), Ben Bradley (NH Hospital Association), Maureen Meletis, Mykelle Richburg, Valerie Danielson, Lisa Ayer, Nancy Husarik, Michelle Collins, Jenn Beyer-Matuszek, Jon Hoffman (American Kidney Fund), John Seigne, Lance Boucher (American Lung Association), Justin Ziemba, Rebecca Luna, and Kerry Dennis.

**Who opposes the bill:** Megan Thompson.

**Who is neutral on the bill:** Dr. Jonathan Ballard (DHHS), Michelle Heaton (NHID), and Henry Lipman (DHHS).

**Summary of testimony presented:**

Senator Regina Birdsell, Senate District 19

- Senator Birdsell explained that biomarker testing utilizes tissue, blood, and other samples to test for the presence of biomarkers. This process can detect which medicines would work on particular specimens and take into account interactions with other medications.
- Biomarker testing is important for precision medicine, which includes targeted therapies that can lead to better survival rates and quality of life for patients.

- Biomarkers are currently most commonly applied in oncology, but there is research underway to apply it in other areas, such as heart disease and Alzheimer's disease.
- This legislation has been introduced in past years mandating coverage for commercial carriers. The biggest pushback on this policy is the potential costs associated with it.
- Senator Birdsell introduced an amendment that would allow biomarker testing for Medicaid recipients only. This will allow for data collection and review of potential financial impacts and savings, which can be used to inform any future decisions about expanding this coverage to commercial carriers.

Henry Lipman and Dr. Jonathan Ballard, Department of Health and Human Services

- Dr. Ballard stated that they are providing information on the bill and amendment.
- Some biomarkers are already covered through the Medicaid program, but there is a significant number of biomarkers that are not currently covered.
- The standard for coverage under Medicaid is determined by CMS and based upon medical necessity.
- The Medicaid program refers to the definition of medical necessity published in the federal registrar. It focuses on services that are reasonable and necessary, safe and effective, furnished in an appropriate setting, ordered and furnished by qualified personnel, and meets but does not exceed the patient's medical need. The benefit must also exceed or be equal to the medically appropriate alternative.
- If the Department of Health and Human Services (DHHS) fails to cover something medically necessary or covers something that is beyond medically necessary, then the Medicaid program would not be eligible to recover the federal match, which varies 50-90%.
- The amendment changes language to meet CMS guidelines on medical necessity and changes the effective date to start with the next budget period.
- Dr. Ballard has discussed biomarkers with his counterparts throughout the country. Multiple states are covering biomarkers, including Florida, which has applied the medical necessity standard and maintains a public list of the hundreds of covered biomarkers.
- Mr. Lipman noted that funding will be necessary for this effort, and explained that there is valuable data on incremental costs from Florida.
- The low estimate would be an increase in total expenditures of \$520,803, of which state funding would be \$166,657 based on a blended percentage between the 50-90% threshold. The high estimate would be an increase in total expenditures of \$1,874,892, of which state funding would be \$599,965.

- Senator Avarad asked who determines whether a test meets medical necessity standards.
- Dr. Ballard explained that it is based upon the standards of medicine. CMS refers back to the Medicaid program and their interpretations of federal statute against the medical need put forth through the authorization request for service.
- Senator Avarad asked if this could save money overall.
- Dr. Ballard explained that while that cannot be determined currently, there are other states looking into the potential savings. He noted that there would be upfront costs.
- Mr. Lipman noted that when matching periods of expenditures with the arrival of benefits, there may not be a benefit to the program even though there will be benefit to citizens. He emphasized that the Florida legislature is monitoring implementation.
- Dr. Ballard noted that the average person who is on Granite Advantage is on Medicaid for less than 1 year, emphasizing that the cost savings may not come back to Medicaid.
- Senator Avarad asked if this would be good medical practice, and Dr. Ballard confirmed.
- Senator Rochefort inquired about biomarker tests theoretically saving the state from spending on various other tests and treatments in determining appropriate therapy, and Dr. Ballard confirmed and emphasized that this is called precision medicine.
- Mr. Lipman noted that the benefits in long-term costs may accrue elsewhere rather than Medicaid, as the intent in general is to have those on Medicaid eventually get other insurance.
- Senator Long asked how many biomarkers are currently covered by Medicaid.
- Dr. Ballard explained that using the definition contained in this bill, there are hundreds covered. This legislation would add a few more hundred to the coverage as well.
- Senator Long asked if there has been any instances in the past in which the federal government has disagreed with the state about whether a biomarker fits within the definition of medical necessity.
- Dr. Ballard explained that while this has not happened in New Hampshire, there have been instances in other states where they did not receive the federal match.

Mike Rollo, American Cancer Society Cancer Action Network

- Mr. Rollo stated that he is speaking in support of this bill as drafted and potentially as amended, as he has not yet seen the amendment.
- He noted that this legislation was passed unanimously by the Committee last year.

- Many people face barriers to accessing biomarker testing, with factors such as socioeconomic status and treatment setting playing a role. Medicaid recipients are one of the groups that may face barriers.
- Mr. Rollo noted that he is not advocating for universal biomarker testing, as it is not appropriate for all cancer patients. This legislation is tied to medical and scientific evidence providing guidance on who should receive biomarker testing.
- Mr. Rollo shared a patient story about someone who testified on this legislation last year, emphasizing the necessity of access to biomarker testing. He noted that this individual was able to avoid invasive and expensive procedures by getting the biomarker testing.
- 26 states have passed some form of this legislation. Mr. Rollo referenced documents submitted to the Committee outlining costs and cost savings associated with this policy.
- Mr. Rollo said he believes passing this legislation could also save the system resources as well.
- Mr. Rollo said the amendment would need to include a specific definition of medical necessity and recommended that the effective date not delay implementation until the next budget year.

Michelle Heaton, New Hampshire Insurance Department

- Ms. Heaton stated that this amendment will not impact insurance.
- She noted that the amendment still references RSA 420-J and recommended that any references to 420-J be removed to avoid confusion.

Jenny Horgan, Alzheimer's Association

- Ms. Horgan stated that more than 26,500 people in New Hampshire are living with Alzheimer's disease or dementia. The true number is likely higher, as there are significant barriers to timely and accurate diagnoses.
- New Hampshire's aging population will continue to be impacted by this disease, along with families, caregivers, the long-term care system, health care providers, and the state budget.
- Biomarker testing presents promising ways to improve early detection, early diagnosis, and management of symptoms.
- Early diagnosis of Alzheimer's is especially critical, now that there are FDA approved treatments that delay disease progression in the earliest stages.
- Early diagnoses benefit the state by reducing stress on the long-term care and health care systems and reducing costs. National data suggests that an early diagnosis could save approximately \$63,000 per person.
- Ms. Horgan emphasized the financial strain that has already been put on the state, citing that there was an estimated \$363 million in Medicaid spending relating to Alzheimer's and dementia in 2025.

- The Alzheimer's Association supports the expansion of biomarker testing to ensure that we are keeping pace with scientific advances.
- Without this legislation, individuals could wait up to 2 years for a diagnosis, thus delaying treatment and increasing costs.

John Ziemba, Alzheimer's Association

- Mr. Ziemba shared a personal story about his late wife's experience with Alzheimer's disease and his experience as a caregiver.
- His wife saw several providers and got many tests before she was able to receive a diagnosis.
- Biomarker testing would have changed their journey. It would have given them time to prepare legally, financially, and emotionally.

Kathy Harvard, Alzheimer's Association

- Ms. Harvard shared a personal story about her and her late husband's experience with Alzheimer's disease.
- Due to her husband's late diagnosis, he lost his job, disability eligibility, and health benefits.
- Access to an early and accurate diagnosis through biomarker testing is the first step to better care, support, and the possibility of treatment.
- This bill will help reduce some of the financial barriers to critical diagnostic tools.