



Coverage would not be subject to utilization management requirements or prior authorization, nor subject to a deductible, coinsurance, copayment, or other cost-sharing requirement.

HB 52 GA **Section 4** would establish that the requirements of Section 1 apply to health plans that cover public employees.

**HB 52 GA would have no fiscal impact on the majority of cities since the health insurance they offer includes preventive care. The bill would have an indeterminable but negative short term fiscal impact on premiums paid by cities who currently offer health insurance plans that do not cover preventive screenings.**

Kentucky League of Cities (KLC) explains that screening services for cancer detection are considered preventive care and are already covered by the health insurance plans offered by most Kentucky cities. If the services are already covered HB 52 GA would have no impact on premiums; if these preventive services are not already covered in the health insurance offered by a city, then HB 52 GA would result in higher premiums charged that city. KLC does not have sufficient information at this time to estimate the increase in premiums that would be required to pay for the additional preventive services; however, preventive services generally result in long term cost savings because early detection reduces the potential for more costly treatments in the future.

Input for this mandate statement was requested from Kentucky Association of Counties (KACo). If input is received from KACo this statement may be amended.

**Data Source(s):** KLC; LRC staff

**Preparer:** Mary Stephens (BL) **Reviewer:** KHC **Date:** 3/1/24