

H.R. 9999 - Human Education and Awareness Requires Testing Act of 2020

116th Congress (2019-2020) | Get alerts

Sponsor: Stallings, Erika [NY] (Introduced 10/08/2019)

Committees: House – Committee on Public Health Spending

Committee Meetings: 12/9/20 6:00PM

Committee Reports: H. Rept. 10-101

Latest Action: House - 01/01/2020 Placed on the Union Calendar, Calendar No. 101. (All Actions)

116TH CONGRESS

1ST SESSION

H. R. 9999

IN THE HOUSE OF REPRESENTATIVES

March 18, 2020

Ms. Erika Stallings (for herself, Ms. Meyer and Ms. Knope) introduced the following bill, which was referred to the Committee on Public Health Spending.

A BILL

To amend the Public Health Service Act to fund genetic testing and require primary care providers and obstetrician-gynecologists to include genetic testing for the BRCA and BRCA1 gene as part of annual checkups/physicals of young women, offering patients the option to opt out; this would increase awareness of the risks of breast and ovarian cancer in young women and enable them to make informed decisions before facing a crisis.

1. Short title

This Act may be cited as the Human Education and Awareness Requires Testing Act of 2020 or HEART Act.

2. Young women’s breast cancer education and empowerment

The Public Health Service Act ([42 U.S.C. 241 et seq.](#)) is amended by adding a new subsection “§ 280n” which shall provide the following:

Programs relating to testing for predisposition to breast cancer

(a) Public empowerment campaign

(1) In General. The Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall conduct a national evidence-based testing campaign—

(A) to increase public awareness regarding the threats posed by breast cancer to young women of all ethnic and cultural backgrounds, including the particular risks faced by certain ethnic and cultural groups; and

(B) focusing on awareness of risk factors of breast cancer among young women and achieving early prediction of breast cancer among young women through community-centered informational forums, public service advertisements, and media campaigns.

(2) Authorized activities. In conducting the empowerment campaign under paragraph (1), the Secretary shall—

(A) compel every primary care provider, internist, obstetrician, and gynecologist performing medical services in this Nation to provide genetic testing for the BRCA1 and

BRCA2 gene mutation as part of annual checkups/physicals of young women, offering patients the option to opt out;

(B) compel every insurer delivering a group or blanket policy or issuing a group or blanket policy for delivery in this Nation that provides coverage for hospital, surgical or medical care to fully cover genetic testing for the BRCA1 and BRCA2 gene mutation as part of annual checkups/physicals of young women;

(C) compel the States, through their Medicaid and Medicare programs, to fully cover genetic testing for the BRCA1 and BRCA2 gene mutation as part of annual checkups/physicals of young women; and

(D) conduct other activities determined by the Secretary to promote empowerment, early prediction, and risk-reducing practices among young women.

(3) Exemptions. The Secretary shall grant exemptions to those providers, insurers and States who obtain written “opt out” waivers from young women for whom annual checkups/physicals were performed.

(b) Definitions. In this section—

(1) the term States means each of the several States, the District of Columbia, the Commonwealth of Puerto Rico, American Samoa, Guam, the Commonwealth of the Northern Mariana Islands, and the United States Virgin Islands; and

(2) the term *young women* means women 15 to 39 years of age.

(c) Authorization of appropriations. To carry out this section, there are authorized to be appropriated \$50,000,000 for each of the fiscal years 2020 through 2025.