

THE INSURANCE CODE OF 1956 (EXCERPT)
Act 218 of 1956

500.3407b Undergoing genetic testing as condition of issuing, renewing, or continuing policy; disclosure of genetic testing or genetic information; definitions.

Sec. 3407b.

(1) An insurer that delivers, issues for delivery, or renews in this state a health insurance policy shall not require an insured or his or her dependent or an asymptomatic applicant for insurance or his or her asymptomatic dependent to do either of the following:

- (a) Undergo genetic testing before issuing, renewing, or continuing the policy in this state.
- (b) Disclose whether genetic testing has been conducted or the results of genetic testing or genetic information.

(2) As used in this section:

- (a) "Clinical purposes" includes all of the following:
 - (i) Predicting risk of diseases.
 - (ii) Identifying carriers for single-gene disorders.
 - (iii) Establishing prenatal and clinical diagnosis or prognosis.
 - (iv) Prenatal, newborn, and other carrier screening, as well as testing in high-risk families.
 - (v) Testing for metabolites if undertaken with high probability that an excess or deficiency of the metabolite indicates or suggests the presence of heritable mutations in single genes.
 - (vi) Other testing if the intended purpose is diagnosis of a presymptomatic genetic condition.
- (b) "Genetic information" means information about a gene, gene product, or inherited characteristic derived from a genetic test.
- (c) "Genetic test" means the analysis of human DNA, RNA, chromosomes, and those proteins and metabolites used to detect heritable or somatic disease-related genotypes or karyotypes for clinical purposes. A genetic test must be generally accepted in the scientific and medical communities as being specifically determinative for the presence, absence, or mutation of a gene or chromosome to qualify under this definition. Genetic test does not include a routine physical examination or a routine analysis, including, but not limited to, a chemical analysis, of body fluids, unless conducted specifically to determine the presence, absence, or mutation of a gene or chromosome.
- (d) After December 31, 2017, "insurer" includes a nonprofit dental care corporation operating under 1963 PA 125, MCL 550.351 to 550.373.

History: Add. 2000, Act 27, Imd. Eff. Mar. 15, 2000 ;-- Am. 2016, Act 276, Imd. Eff. July 1, 2016 ;-- Am. 2017, Act 223, Imd. Eff. Dec. 20, 2017

Popular Name: Act 218