



General Assembly

**Substitute Bill No. 5372**

February Session, 2006

\*            HB05372INS            031506            \*

**AN ACT CONCERNING ACCESS TO IMAGING SERVICES.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1       Section 1. (NEW) (*Effective October 1, 2006*) (a) No health insurer,  
2 health care center, hospital service corporation, medical service  
3 corporation or fraternal benefit society that provides coverage under  
4 an individual health insurance policy or contract for magnetic  
5 resonance imaging, computed axial tomography or positron emission  
6 tomography may (1) require total copayments in excess of seven  
7 hundred fifty dollars for all such in-network imaging services  
8 combined in any policy year, or (2) require a copayment in excess of  
9 two hundred dollars for each in-network positron emission  
10 tomography in any policy year, provided the physician ordering the  
11 imaging services and the physician rendering such services is not the  
12 same person or is not participating in the same group practice.

13       (b) The provisions of subsection (a) of this section shall not apply to  
14 a high deductible health plan as that term is used in subsection (f) of  
15 section 38a-520 of the general statutes.

16       Sec. 2. (NEW) (*Effective October 1, 2006*) (a) No health insurer, health  
17 care center, hospital service corporation, medical service corporation  
18 or fraternal benefit society that provides coverage under a group  
19 health insurance policy or contract for magnetic resonance imaging,

20 computed axial tomography or positron emission tomography may (1)  
21 require total copayments in excess of seven hundred fifty dollars for all  
22 such in-network imaging services combined in any policy year, or (2)  
23 require a copayment in excess of two hundred dollars for each in-  
24 network positron emission tomography in any policy year, provided  
25 the physician ordering the imaging services and the physician  
26 rendering such services is not the same person or participants in the  
27 same group practice.

28 (b) The provisions of subsection (a) of this section shall not apply to  
29 a high deductible health plan as that term is used in subsection (f) of  
30 section 38a-520 of the general statutes.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2006</i>	New section
Sec. 2	<i>October 1, 2006</i>	New section

**Statement of Legislative Commissioners:**

The language in subdivision (1) of subsection (a) of sections 1 and 2 was restated for clarity and accuracy.

**INS**      *Joint Favorable Subst.*