



General Assembly

Amendment

January Session, 2011

LCO No. 6235

SB0039606235SD0

Offered by:

SEN. CRISCO, 17th Dist.

REP. MEGNA, 97th Dist.

To: Subst. Senate Bill No. 396

File No. 49

Cal. No. 64

**"AN ACT CONCERNING INSURANCE COVERAGE FOR THE
SCREENING AND TREATMENT OF PROSTATE CANCER."**

1 After the last section, add the following and renumber sections and
2 internal references accordingly:

3 "Sec. 501. Section 38a-503 of the general statutes is repealed and the
4 following is substituted in lieu thereof (*Effective January 1, 2012*):

5 (a) Each individual health insurance policy providing coverage of
6 the type specified in subdivisions (1), (2), (4), [(6),] (10), (11) and (12) of
7 section 38a-469 delivered, issued for delivery, renewed, amended or
8 continued in this state [on or after October 1, 2001,] shall provide
9 benefits for mammographic examinations to any woman covered
10 under the policy which are at least equal to the following minimum
11 requirements: (1) A baseline mammogram for any woman who is
12 thirty-five to thirty-nine years of age, inclusive; and (2) a mammogram
13 every year for any woman who is forty years of age or older.

14 **(b)** Such policy shall:

15 [provide] **(1)** Provide additional benefits for comprehensive
16 ultrasound screening of an entire breast or breasts if a mammogram
17 demonstrates heterogeneous or dense breast tissue based on the Breast
18 Imaging Reporting and Data System established by the American
19 College of Radiology or if a woman is believed to be at increased risk
20 for breast cancer due to family history or prior personal history of
21 breast cancer, positive genetic testing or other indications as
22 determined by a woman's physician or advanced practice registered
23 nurse; and

24 **(2)** Not impose a coinsurance, copayment, deductible or other out-
25 of-pocket expense for such ultrasound screening, except that a high
26 deductible health plan, as that term is used in subsection (f) of section
27 38a-493, shall not be subject to this subdivision.

28 [(b) Benefits] **(c)** Except as specified under subdivision (2) of
29 subsection (b) of this section, benefits under this section shall be
30 subject to any policy provisions that apply to other services covered by
31 such policy.

32 [(c)] **(d)** On and after October 1, 2009, each mammography report
33 provided to a patient shall include information about breast density,
34 based on the Breast Imaging Reporting and Data System established
35 by the American College of Radiology. Where applicable, such report
36 shall include the following notice: "If your mammogram demonstrates
37 that you have dense breast tissue, which could hide small
38 abnormalities, you might benefit from supplementary screening tests,
39 which can include a breast ultrasound screening or a breast MRI
40 examination, or both, depending on your individual risk factors. A
41 report of your mammography results, which contains information
42 about your breast density, has been sent to your physician's office and
43 you should contact your physician if you have any questions or
44 concerns about this report."

45 Sec. 502. Section 38a-530 of the general statutes is repealed and the

46 following is substituted in lieu thereof (*Effective January 1, 2012*):

47 (a) Each group health insurance policy providing coverage of the
48 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-
49 469 delivered, issued for delivery, renewed, amended or continued in
50 this state [on or after October 1, 2001,] shall provide benefits for
51 mammographic examinations to any woman covered under the policy
52 which are at least equal to the following minimum requirements: (1) A
53 baseline mammogram for any woman who is thirty-five to thirty-nine
54 years of age, inclusive; and (2) a mammogram every year for any
55 woman who is forty years of age or older.

56 (b) Such policy shall:

57 [provide] (1) Provide additional benefits for comprehensive
58 ultrasound screening of an entire breast or breasts if a mammogram
59 demonstrates heterogeneous or dense breast tissue based on the Breast
60 Imaging Reporting and Data System established by the American
61 College of Radiology or if a woman is believed to be at increased risk
62 for breast cancer due to family history or prior personal history of
63 breast cancer, positive genetic testing or other indications as
64 determined by a woman's physician or advanced practice registered
65 nurse; and

66 (2) Not impose a coinsurance, copayment, deductible or other out-
67 of-pocket expense for such ultrasound screening, except that a high
68 deductible health plan, as that term is used in subsection (f) of section
69 38a-520, shall not be subject to this subdivision.

70 [(b) Benefits] (c) Except as specified under subdivision (2) of
71 subsection (b) of this section, benefits under this section shall be
72 subject to any policy provisions that apply to other services covered by
73 such policy.

74 [(c)] (d) On and after October 1, 2009, each mammography report
75 provided to a patient shall include information about breast density,
76 based on the Breast Imaging Reporting and Data System established

77 by the American College of Radiology. Where applicable, such report
78 shall include the following notice: "If your mammogram demonstrates
79 that you have dense breast tissue, which could hide small
80 abnormalities, you might benefit from supplementary screening tests,
81 which can include a breast ultrasound screening or a breast MRI
82 examination, or both, depending on your individual risk factors. A
83 report of your mammography results, which contains information
84 about your breast density, has been sent to your physician's office and
85 you should contact your physician if you have any questions or
86 concerns about this report."."