



Senate

General Assembly

File No. 6

February Session, 2012

Senate Bill No. 12

Senate, March 5, 2012

The Committee on Insurance and Real Estate reported through SEN. CRISCO of the 17th Dist., Chairperson of the Committee on the part of the Senate, that the bill ought to pass.

AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR BREAST MAGNETIC RESONANCE IMAGING.

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

1 Section 1. Section 38a-503 of the 2012 supplement to the general
2 statutes is repealed and the following is substituted in lieu thereof
3 (*Effective from passage*):

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

13 (2) Such policy shall provide additional benefits for [: (A)

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

23 (B) Magnetic resonance imaging in accordance with guidelines
24 established by the American Cancer Society or the American College of
25 Radiology.]

26 (b) Benefits under this section shall be subject to any policy
27 provisions that apply to other services covered by such policy.

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

41 Sec. 2. Section 38a-530 of the 2012 supplement to the general statutes
42 is repealed and the following is substituted in lieu thereof (*Effective*
43 *from passage*):

44 (a) (1) Each group health insurance policy providing coverage of the
45 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-

46 469 delivered, issued for delivery, renewed, amended or continued in
47 this state shall provide benefits for mammographic examinations to
48 any woman covered under the policy which are at least equal to the
49 following minimum requirements: (A) A baseline mammogram for
50 any woman who is thirty-five to thirty-nine years of age, inclusive; and
51 (B) a mammogram every year for any woman who is forty years of age
52 or older.

53 (2) Such policy shall provide additional benefits for [: (A)
54 Comprehensive] comprehensive ultrasound screening and magnetic
55 resonance imaging of an entire breast or breasts if a mammogram
56 demonstrates heterogeneous or dense breast tissue based on the Breast
57 Imaging Reporting and Data System established by the American
58 College of Radiology or if a woman is believed to be at increased risk
59 for breast cancer due to family history or prior personal history of
60 breast cancer, positive genetic testing or other indications as
61 determined by a woman's physician or advanced practice registered
62 nurse.]; and

63 (B) Magnetic resonance imaging in accordance with guidelines
64 established by the American Cancer Society or the American College of
65 Radiology.]

66 (b) Benefits under this section shall be subject to any policy
67 provisions that apply to other services covered by such policy.

68 (c) [On and after October 1, 2009, each] Each mammography report
69 provided to a patient shall include information about breast density,
70 based on the Breast Imaging Reporting and Data System established
71 by the American College of Radiology. Where applicable, such report
72 shall include the following notice: "If your mammogram demonstrates
73 that you have dense breast tissue, which could hide small
74 abnormalities, you might benefit from supplementary screening tests,
75 which can include a breast ultrasound screening or a breast MRI
76 examination, or both, depending on your individual risk factors. A
77 report of your mammography results, which contains information
78 about your breast density, has been sent to your physician's office and

79 you should contact your physician if you have any questions or
80 concerns about this report."

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	38a-503
Sec. 2	<i>from passage</i>	38a-530

INS *Joint Favorable*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note***State Impact:*** None***Municipal Impact:*** None***Explanation***

The bill does not result in a fiscal impact to the state or municipalities. The bill clarifies the criteria for insurance coverage of breast magnetic resonance imaging by removing reference to the American Cancer Society and the American College of Radiology. The bill does not change coverage required pursuant to current law.

The Out Years***State Impact:*** None***Municipal Impact:*** None

OLR Bill Analysis**SB 12*****AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR BREAST MAGNETIC RESONANCE IMAGING.*****SUMMARY:**

This bill resolves a statutory conflict by removing a requirement that certain insurance policies cover magnetic resonance imaging (MRI) in all circumstances in accordance with guidelines established by the American Cancer Society or the American College of Radiology.

By law, unchanged by the bill, certain insurance policies must cover a breast MRI, but only if a (1) mammogram shows heterogeneous or dense breast tissue based on the American College of Radiology's Breast Imaging Reporting and Database System (BI-RADS) or (2) woman is considered to be at an increased breast cancer risk because of family history, her own breast cancer history, positive genetic testing, or other indications determined by her physician or advanced-practice registered nurse.

The bill and law apply to individual and group health insurance policies that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; and (4) hospital or medical services, including those provided by HMOs. They also apply to individual policies that cover limited benefit health coverage. (Due to the federal Employee Retirement Income Security Act (ERISA), state insurance benefit mandates do not apply to self-insured benefit plans.)

EFFECTIVE DATE: Upon passage

BACKGROUND***BI-RADS***

The American College of Radiology collaborated with the National

Cancer Institute, the Centers for Disease Control and Prevention, the American Medical Association, and others to develop BI-RADS, which is used to standardize mammography reporting. There are two BI-RADS scales: one characterizes breast density and the other characterizes a radiologist's reading of what he or she sees on a mammogram. By law, a patient's mammography report must include information about breast density based on BI-RADS.

Related Bill

sSB 97, favorably reported by the Insurance and Real Estate Committee on February 28, 2012, resolves the statutory conflict in a different way. It removes the requirements that health insurance policies cover breast MRI (1) for a woman with dense breast tissue or an increased risk of breast cancer and (2) in accordance with American College of Radiology. It retains the requirement that policies cover breast MRI in accordance with American Cancer Society guidelines.

COMMITTEE ACTION

Insurance and Real Estate Committee

Joint Favorable

Yea 12 Nay 7 (02/21/2012)