



General Assembly

February Session, 2012

Raised Bill No. 97

LCO No. 354

00354_____INS

Referred to Committee on Insurance and Real Estate

Introduced by:
(INS)

AN ACT CONCERNING BREAST ULTRASOUND SCREENING.

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2 statutes is repealed and the following is substituted in lieu thereof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 January 1, 2013*):

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] (A) Provide additional benefits for [:
14 (A) Comprehensive] comprehensive ultrasound screening and
15 magnetic resonance imaging of an entire breast or breasts if a
16 mammogram demonstrates heterogeneous or dense breast tissue

17 based on the Breast Imaging Reporting and Data System established
18 by the American College of Radiology or if a woman is believed to be
19 at increased risk for breast cancer due to family history or prior
20 personal history of breast cancer, positive genetic testing or other
21 indications as determined by a woman's physician or advanced
22 practice registered 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] Not impose a coinsurance, copayment, deductible or other
26 out-of-pocket expense for such ultrasound screening, except that a
27 high deductible health plan, as that term is used in subsection (f) of
28 section 38a-493, shall not be subject to this subparagraph.

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

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

46 Sec. 2. Section 38a-530 of the 2012 supplement to the general statutes
47 is repealed and the following is substituted in lieu thereof (*Effective*
48 *January 1, 2013*):

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

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

68 (B) [Magnetic resonance imaging in accordance with guidelines
69 established by the American Cancer Society or the American College of
70 Radiology] Not impose a coinsurance, copayment, deductible or other
71 out-of-pocket expense for such ultrasound screening, except that a
72 high deductible health plan, as that term is used in subsection (f) of
73 section 38a-520, shall not be subject to this subparagraph.

74 (b) [Benefits] Except as specified in subparagraph (B) of subdivision
75 (2) of subsection (a) of this section, benefits under this section shall be
76 subject to any policy provisions that apply to other services covered by
77 such policy.

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

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

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>January 1, 2013</i>	38a-503
Sec. 2	<i>January 1, 2013</i>	38a-530

Statement of Purpose:

To prohibit insurers from imposing a coinsurance, copayment, deductible or other out-of-pocket expense on an insured for breast ultrasound screening, and to clarify the criteria for insurance coverage of breast magnetic resonance imaging.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]