sHB-5208
AN ACT CONCERNING MAMMOGRAMS, BREAST ULTRASOUNDS AND MAGNETIC RESONANCE IMAGING OF BREASTS.

As Amended by House "A" (LCO 4900)
House Calendar No.: 74
Senate Calendar No.: 516

OFA Fiscal Note

State Impact: None

Municipal Impact:

<table>
<thead>
<tr>
<th>Municipalities</th>
<th>Effect</th>
<th>FY 19 $</th>
<th>FY 20 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Various Municipalities</td>
<td>STATE MANDATE - Cost</td>
<td>See Below</td>
<td>See Below</td>
</tr>
</tbody>
</table>

Explanation

The bill does not result in a fiscal impact to the state health plan as the state does not currently impose cost sharing in-network for mammograms, including tomosynthesis.

The bill’s expanded definition of mammogram, to include coverage codes for tomosynthesis will result in a cost to certain fully-insured municipal plans, to the extent the expanded coverage definition precludes municipal plans from imposing cost sharing for tomosynthesis. Pursuant to federal law cost sharing for in network mammograms is prohibited.¹ The coverage requirements may result in increased premium costs for the municipality when they enter into

¹ [https://www.healthcare.gov/preventive-care-women/](https://www.healthcare.gov/preventive-care-women/)
new health insurance contracts after January 1, 2019. Due to federal law, municipalities with self-insured plans are exempt from state health insurance mandates. Lastly, many municipal plans may be recognized as “grandfathered” plans under the federal Affordable Care Act (ACA). It is uncertain what the effect of this mandate will have on the grandfathered status of those municipal plans.

House “A” struck the underlying bill and its associated fiscal impact and results in the fiscal impact described herein.

**The Out Years**

The fiscal impact will continue into the future and will be reflected in future premiums.

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2 Grandfathered plans include most group health insurance plans and some individual plans created or purchased on or before March 23, 2010.