OLR Bill Analysis
sSB 838

AN ACT CONCERNING REQUIRED HEALTH INSURANCE COVERAGE AND COST-SHARING FOR MAMMOGRAMS AND BREAST ULTRASOUNDS.

SUMMARY

This bill requires certain health insurance policies to expand coverage for breast ultrasound screenings to include women whose physicians recommend it and who (1) are ages 40 and older, (2) have a family history or prior personal history of breast cancer, or (3) have a prior personal history of benign breast disease. Current law already requires these policies to cover breast ultrasounds for women with dense breast tissue, family or personal history of breast cancer, positive genetic testing, or other high risk indicators.

The bill also prohibits these policies from charging coinsurance, copayments, deductibles, and other out-of-pocket expenses for covered breast ultrasounds and mammograms. Current law only prohibits insurers from charging (1) copayments that exceed $20 for breast ultrasounds and (2) copayments or deductibles for mammograms for women ages 50 to 74 that are conducted according to national guidelines.

The bill applies the cost-sharing prohibition to high deductible health plans (HDHPs), to the maximum extent (1) permitted by federal law and (2) that does not disqualify someone who establishes a health savings account (HSA) or Archer Medical Savings Account (MSA) from receiving the associated federal tax benefits. Under federal law, individuals with eligible HDHPs may make pre-tax contributions to HSAs or Archer MSAs and use the accounts for qualified medical expenses.

The bill applies to each insurer, hospital or medical service corporation, HMO, or fraternal benefit society that delivers, issues,
renews, amends, or continues in Connecticut (1) individual or group health insurance policies that cover (a) basic hospital expenses; (b) basic medical-surgical expenses; (c) major medical expenses; or (d) hospital or medical services, including those provided under an HMO plan, and (2) individual health insurance policies that provide limited benefit health coverage. Because of the federal Employee Retirement Income Security Act (ERISA), state insurance benefit mandates do not apply to self-insured benefit plans.

EFFECTIVE DATE: January 1, 2020

BACKGROUND
Related Bills
shB 7124, favorably reported by the Insurance and Real Estate Committee, similarly expands ultrasound coverage, but does not include this bill’s cost-sharing provisions.

COMMITTEE ACTION
Insurance and Real Estate Committee

Joint Favorable Substitute
Yea 20 Nay 0 (03/19/2019)