

Insurance and Real Estate Committee JOINT FAVORABLE REPORT

Bill No.: SB-358
AN ACT CONCERNING REQUIRED HEALTH INSURANCE COVERAGE FOR
Title: BREAST HEALTH BENEFITS.
Vote Date: 3/22/2022
Vote Action: Joint Favorable Substitute
PH Date: 3/15/2022
File No.: 356

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SPONSORS OF BILL:

Insurance and Real Estate Committee

REASONS FOR BILL:

This bill was requested to expand 2019 legislation to cover diagnostic breast cancer testing, as well as other important related coverages for those insured by either Individual or Group Health Insurance plans. Patients are being charged out of pocket for breast cancer diagnostic procedures, which can be expensive and deter women from keeping up with their annual exams. This bill aims to save lives through providing greater access to early-stage detection.

Potential Substitute Language:

The substitute language added sections 3 (individual health insurance) and 4 (group health insurance), which require insurance coverage for ovarian cancer screening and treatment, including coverage for genetic testing for insureds with a family history of breast or ovarian cancer, routine screenings, CA-125 monitoring subsequent to treatment, and genetic testing of BRCA1, BRCA2 and other gene variants that increase an insured's risk for breast, ovarian, or other gynecological cancer.

RESPONSE FROM ADMINISTRATION/AGENCY:

Connecticut Insurance Department says that if these items are determined to be mandates, then the federal subsidy would not cover that portion of the premium, the carriers would remove the cost of the mandate from their premium, and the State would reimburse the carriers for the mandated premium.

Susan Johnson, Representative, House of Representatives asks that you pass SB 358 to make sure Connecticut women have access to up-to-date diagnostic and treatment services. This bill will save more lives and continue the great work of this committee. She strongly supports this legislation because it ensures that insurance coverage is keeping pace with diagnostic and treatment improvements. It is fairly well known that one in eight Connecticut women will at some time in their lives be diagnosed with breast cancer. Early detection saves lives and saves medical costs. That is exactly what this bill will do. It will provide additional opportunities for women to obtain an early diagnosis and treatment, if necessary, without the burden of additional cost.

Gary Turco, Representative, House of Representatives says this bill will close loopholes and further expand access to affordable early detection breast cancer tests and procedures. He draws special attention to where the word "diagnostic" is added to the bill. After the 2019 legislation passed, I heard from numerous women throughout the state who said they were still receiving out-of-pocket charges for their early detection tests because the tests can be coded as "diagnostic" and not a "screening." It is his understanding that "screening" mammograms or ultrasounds are routinely administered to detect breast cancer in women who have no apparent symptoms, while "diagnostic" mammograms and ultrasounds are used after suspicious results on a screening mammogram or after some signs of breast cancer alert the physician to check the tissue. This is a very important loophole to close because we do not want women to delay getting a mammogram or ultrasound only after something suspicious has been detected.

NATURE AND SOURCES OF SUPPORT:

Audrey Carlson asks you to vote to pass the bill, notes that the primary objective is to expand insurance coverage with no burdensome out of pocket costs for both screening and Diagnostic Mammograms, breast ultrasounds and MRIs.

Sandy Cassanelli talks about her personal experiences with mammograms and cancer, and says that it could have been prevented.

Kim Chamerda talks about her experiences getting both screening mammograms and ultrasounds annually, and how the two tests compliment each other. She has a 1 inch papilloma that was uncovered only by the ultrasound and not the mammogram. She strongly urges you to consider the full package and pass this very needed bill.

Thomas Farquhar, Legislative Co-Chair, Radiological Society of Connecticut commends the raising of this important issue once again, and notes that early detection saves lives.

Katie Heffernan Farrell says a mammogram led doctors to act to save her life and hopes that instituting more preventative measures will bring people peace of mind and a chance at a longer life free of the suffering that I and those like me had to endure.

Robin Fowler asks that you pass SB-358 as it will prevent cost barriers for insureds to receive diagnostic testing following an inconclusive screening mammogram. If an insured has to return for further testing, this is called diagnostic testing and it's not covered 100% at that point. It's typically subject to a large deductible. SB-358 bill will cover this diagnostic breast cancer testing. It's a minimal cost for insurance to cover compared to the treatment of late-

stage breast cancer. It's clear and has been proven that early detection saves lives, suffering, time, and money.

Julie Gershon voices her strong **support** for proposed SB 358, an act concerning required health insurance coverage for breast health benefits; specifically the portion related to no out of pocket costs for both screening and diagnostic mammograms, breast ultrasounds, and MRIs. As a breast radiologist, she sees patients daily who present with breast symptoms requiring a diagnostic work up. The majority of these patients will receive bills for charges not covered by insurance. She asks you to pass SB 358, as you would make a world of difference in the lives of many women across the state of CT.

Genna Griffith didn't expect to have regular out of pocket expenses each year as she screens for Breast Cancer. It is critical that not just annual mammograms are covered but diagnostics tests are also covered, so any breast cancer can be detected early and save women's lives. The costs of diagnostic testing are expensive and can deter women from keeping up with their annual exams due to unaffordable care. She says the bill is critical in saving lives and is grateful for your consideration to pass SB 358.

A.J. Kritzman says is a good bill and should easily pass with little opposition. The purpose of SB 358 is to expand insurance coverage without any burdensome out-of-pocket costs for both screening and diagnostic mammograms, breast ultrasounds and MRI's. This will provide for the earliest possible early detection of breast cancer.

Debbi Kritzman is confident that the bill will be easily passed. She is thankful to live in a state that is giving consideration to this bill and that can be a leader of legislation like this that other states should adopt as well.

Jan Kritzman says we can't prevent breast cancer, but we have one tool in the toolbox which is the earliest possible detection of breast cancer, and that we must eliminate any financial barriers to receiving essential diagnostic follow-up testing, like mammograms, ultrasounds and MRIs, following an inconclusive screening mammogram, especially for the 40 percent of women with dense breast tissue. SB 358 will provide for no out-of-pocket costs. No having to meet outrageous deductibles, co-pays, co-insurance or cost-sharing. No financial barriers for anyone to go back and get essential follow-up diagnostic testing for a definitive answer.

Joyce Leibert is very much in favor of the bill, because it will eliminate any of-of-pocket costs (like having to meet a deductible, co-pay, cost-sharing or co-insurance) for an insured person to return, if necessary, for a call back for diagnostic testing when a mammogram is inconclusive or suspicious.

Cara Mallett is in **support** of this bill because it will provide no cost barriers for insureds to receive diagnostic testing following an inconclusive screening mammogram. If an insured has to return for further testing, this is called diagnostic testing and it's not covered at this time. SB 358 bill will cover this diagnostic breast cancer testing. It's a minimal cost for an insurance to cover in comparison to treating late stage breast cancer diagnosis. It's clear that early detection saves lives, suffering, time and money

Jason P. Prevelige, Legislative Committee Chair, ConnAPA fully supports efforts to increase access to necessary screening tools for breast health, but requests that the language be

amended to appropriately refer to the profession as “physician assistant” as was previously used in the now amended statutory language of his bill, and not “physician’s assistant,” as the possessive nature implied by the apostrophe is incorrect.

Geraldine Stien strongly encourages you to pass proposed bill SB 358 requiring health insurance coverage for breast health benefits. Early detection is the key to curing breast cancer and will save many lives.

NATURE AND SOURCES OF OPPOSITION:

W. Wyatt Bosworth, Assistant Counsel, CBIA broadly **opposes** any healthcare mandate bills without a complete cost-benefit analysis being conducted prior to passage. Health benefit mandates pose an enormous cost to all Connecticut residents. Mandates drive up costs because with each new requirement, insurers must expand coverage to include additional services or devices. This increases the cost of health insurance premiums, and those increases are passed directly onto enrollees. Each year, Connecticut residents pay an additional \$2,085.48 in premium costs because of the 68 health benefit mandates codified in law.

Connecticut Association of Health Plans urges caution as the legislature seeks to further expand the coverage mandates related to breast imaging. Connecticut statutes already cover a broad range of radiologic treatments and services. Codifying specific treatment regimens in statute raises concerns as appropriate protocols change with emerging science and evidence based practice guidelines change accordingly. They are concerned that the bill deletes language that guarantees that tomosynthesis is an option for many women in Connecticut, and asks that if you pass this bill, you retain the current safeguard for tomosynthesis (sections & lines listed in full testimony).

David Godbout **opposes** the bill.

Reported by: Daniil Toropov

Date: 4/5/2022