

**HOUSE . . . . . No. 938**

---

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Ruth B. Balsler***

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to breast cancer screening and early detection.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Ruth B. Balsler</i>	<i>12th Middlesex</i>	<i>1/19/2023</i>
<i>Dawne Shand</i>	<i>1st Essex</i>	<i>3/31/2023</i>
<i>Joan B. Lovely</i>	<i>Second Essex</i>	<i>6/23/2023</i>

**HOUSE . . . . . No. 938**

By Representative Balsler of Newton, a petition (accompanied by bill, House, No. 938) of Ruth B. Balsler relative to breast cancer screening and early detection healthcare coverage. Financial Services.

**The Commonwealth of Massachusetts**

**In the One Hundred and Ninety-Third General Court  
(2023-2024)**

An Act relative to breast cancer screening and early detection.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1 SECTION 1. Chapter 32A of the General Laws is hereby amended by inserting after  
2 section 30 thereof the following section: -

3 Section 31. Notwithstanding any general or special law or rule or regulation to the  
4 contrary, any coverage offered by the commission to an active or retired employee of the  
5 commonwealth insured under the group insurance commission that provides medical expense  
6 coverage for screening mammograms shall provide coverage for diagnostic examinations for  
7 breast cancer, for digital breast tomosynthesis screening and medically necessary and appropriate  
8 screening with breast magnetic resonance imaging or breast ultrasound on a basis not less  
9 favorable than screening mammograms that are covered as medical benefits. An increase in  
10 patient cost sharing for screening mammograms, for digital breast tomosynthesis, for screening  
11 breast magnetic resonance imaging, for breast ultrasound or for diagnostic examinations for  
12 breast cancer shall not be allowed to achieve compliance with this section. For the purposes of

13 this section, “diagnostic examinations for breast cancer” means a medically necessary and  
14 appropriate examination for breast cancer to evaluate the abnormality in the breast that is seen or  
15 suspected from a screening examination for breast cancer, detected by another means of  
16 examination; or suspected based on the medical history or family medical history of the  
17 individual. “Examination for breast cancer” includes an examination used to evaluate an  
18 abnormality in a breast using diagnostic mammography, digital breast tomosynthesis, breast  
19 magnetic resonance imaging or breast ultrasound. “Cost sharing” shall mean a deductible,  
20 coinsurance, copayment, and any maximum limitation on the application of such a deductible,  
21 coinsurance, copayment, or similar out-of-pocket expense.

22 SECTION 2. Chapter 118E of the General Laws is hereby amended by inserting after  
23 section 10M thereof the following new section: -

24 Section 10N. Notwithstanding any general or special law or rule or regulation to the  
25 contrary, the Executive Office of Health and Human Services shall provide coverage under its  
26 Medicaid contracted health insurers, health plans, health maintenance organizations, and third  
27 party administrators under contract to a Medicaid managed care organization, the Medicaid  
28 primary care clinician plan, or an accountable care organization for diagnostic examinations for  
29 breast cancer and for digital breast tomosynthesis screening and medically necessary and  
30 appropriate screening with breast magnetic resonance imaging or breast ultrasound on a basis not  
31 less favorable than screening mammograms that are covered as medical benefits. An increase in  
32 patient cost sharing for screening mammograms, for digital breast tomosynthesis, for screening  
33 breast magnetic resonance imaging, for breast ultrasound or for diagnostic examinations for  
34 breast cancer shall not be allowed to achieve compliance with this section. An increase in patient  
35 cost sharing for screening mammograms, for digital breast tomosynthesis or for diagnostic

36 examinations for breast cancer shall not be allowed to achieve compliance with this section. For  
37 the purposes of this section, “diagnostic examinations for breast cancer” means a medically  
38 necessary and appropriate examination for breast cancer to evaluate the abnormality in the breast  
39 that is seen or suspected from a screening examination for breast cancer, detected by another  
40 means of examination; or suspected based on the medical history or family medical history of the  
41 individual. “Examination for breast cancer” includes an examination used to evaluate an  
42 abnormality in a breast using diagnostic mammography, digital breast tomosynthesis, breast  
43 magnetic resonance imaging or breast ultrasound. “Cost sharing” shall mean a deductible,  
44 coinsurance, copayment, and any maximum limitation on the application of such a deductible,  
45 coinsurance, copayment, or similar out-of-pocket expense.

46 SECTION 3. Chapter 175 of the General Laws is hereby amended by inserting after  
47 section 47LL thereof the following section: -

48 Section 47MM. Notwithstanding any general or special law or rule or regulation to the  
49 contrary, any policy, contract, agreement, plan or certificate of insurance issued, delivered or  
50 renewed within the commonwealth that provides medical expense coverage for screening  
51 mammograms shall provide coverage for diagnostic examinations for breast cancer and for  
52 digital breast tomosynthesis screening and medically necessary and appropriate screening with  
53 breast magnetic resonance imaging or breast ultrasound on a basis not less favorable than  
54 screening mammograms that are covered as medical benefits. An increase in patient cost sharing  
55 for screening mammograms, for digital breast tomosynthesis, for screening breast magnetic  
56 resonance imaging, for screening breast ultrasound or for diagnostic examinations for breast  
57 cancer shall not be allowed to achieve compliance with this section. For the purposes of this  
58 section, “diagnostic examinations for breast cancer” means a medically necessary and

59 appropriate examination for breast cancer to evaluate the abnormality in the breast that is seen or  
60 suspected from a screening examination for breast cancer, detected by another means of  
61 examination; or suspected based on the medical history or family medical history of the  
62 individual. "Examination for breast cancer" includes an examination used to evaluate an  
63 abnormality in a breast using diagnostic mammography, digital breast tomosynthesis, breast  
64 magnetic resonance imaging or breast ultrasound. "Cost sharing" shall mean a deductible,  
65 coinsurance, copayment, and any maximum limitation on the application of such a deductible,  
66 coinsurance, copayment, or similar out-of-pocket expense.

67 SECTION 4. Chapter 176A of the General Laws is hereby amended by inserting after  
68 section 8NN thereof the following section: -

69 Section 8OO. Notwithstanding any general or special law or rule or regulation to the  
70 contrary, any contract between a subscriber and the corporation under an individual or group  
71 hospital service plan which is delivered, issued or renewed within the commonwealth that  
72 provides coverage for screening mammograms shall provide coverage for diagnostic  
73 examinations for breast cancer and for digital breast tomosynthesis screening and medically  
74 necessary and appropriate screening with breast magnetic resonance imaging or breast  
75 ultrasound on a basis not less favorable than screening mammograms that are covered as medical  
76 benefits. An increase in patient cost sharing for screening mammograms, for digital breast  
77 tomosynthesis, for screening breast magnetic resonance imaging, for breast ultrasound or for  
78 diagnostic examinations for breast cancer shall not be allowed to achieve compliance with this  
79 section. For the purposes of this section, "diagnostic examinations for breast cancer" means a  
80 medically necessary and appropriate examination for breast cancer to evaluate the abnormality in  
81 the breast that is seen or suspected from a screening examination for breast cancer, detected by

82 another means of examination; or suspected based on the medical history or family medical  
83 history of the individual. “Examination for breast cancer” includes an examination used to  
84 evaluate an abnormality in a breast using diagnostic mammography, digital breast tomosynthesis,  
85 breast magnetic resonance imaging or breast ultrasound. “Cost sharing” shall mean a deductible,  
86 coinsurance, copayment, and any maximum limitation on the application of such a deductible,  
87 coinsurance, copayment, or similar out-of-pocket expense.

88 SECTION 5. Chapter 176B of the General Laws is hereby amended by inserting after  
89 section 4NN thereof the following section: -

90 Section 4OO. Notwithstanding any general or special law or rule or regulation to the  
91 contrary, any subscription certificate under an individual or group medical service agreement  
92 delivered, issued or renewed within the commonwealth that provides coverage for screening  
93 mammograms shall provide coverage for diagnostic examinations for breast cancer and for  
94 digital breast tomosynthesis screening and medically necessary and appropriate screening with  
95 breast magnetic resonance imaging or breast ultrasound on a basis not less favorable than  
96 screening mammograms that are covered as medical benefits. An increase in patient cost sharing  
97 for screening mammograms, for digital breast tomosynthesis, for screening breast magnetic  
98 resonance imaging, for breast ultrasound or for diagnostic examinations for breast cancer shall  
99 not be allowed to achieve compliance with this section. For the purposes of this section,  
100 “diagnostic examinations for breast cancer” means a medically necessary and appropriate  
101 examination for breast cancer to evaluate the abnormality in the breast that is seen or suspected  
102 from a screening examination for breast cancer, detected by another means of examination; or  
103 suspected based on the medical history or family medical history of the individual. “Examination  
104 for breast cancer” includes an examination used to evaluate an abnormality in a breast using

105 diagnostic mammography, digital breast tomosynthesis, breast magnetic resonance imaging or  
106 breast ultrasound. “Cost sharing” shall mean a deductible, coinsurance, copayment, and any  
107 maximum limitation on the application of such a deductible, coinsurance, copayment, or similar  
108 out-of-pocket expense.

109 SECTION 6. Chapter 176G of the General Laws is hereby amended by inserting after  
110 section 4FF thereof the following section: -

111 Section 4GG. Notwithstanding any general or special law or rule or regulation to the  
112 contrary, any individual or group health maintenance contract that provides coverage for  
113 screening mammograms shall provide coverage for diagnostic examinations for breast cancer  
114 and for digital breast tomosynthesis screening and medically necessary and appropriate screening  
115 with breast magnetic resonance imaging or breast ultrasound on a basis not less favorable than  
116 screening mammograms that are covered as medical benefits. An increase in patient cost sharing  
117 for screening mammograms, for digital breast tomosynthesis, for screening breast magnetic  
118 resonance imaging, for breast ultrasound or for diagnostic examinations for breast cancer shall  
119 not be allowed to achieve compliance with this section. For the purposes of this section,  
120 “diagnostic examinations for breast cancer” means a medically necessary and appropriate  
121 examination for breast cancer to evaluate the abnormality in the breast that is seen or suspected  
122 from a screening examination for breast cancer, detected by another means of examination; or  
123 suspected based on the medical history or family medical history of the individual. “Examination  
124 for breast cancer” includes an examination used to evaluate an abnormality in a breast using  
125 diagnostic mammography, digital breast tomosynthesis, breast magnetic resonance imaging or  
126 breast ultrasound. “Cost sharing” shall mean a deductible, coinsurance, copayment, and any

127 maximum limitation on the application of such a deductible, coinsurance, copayment, or similar  
128 out-of-pocket expense.

129 SECTION 7. The provisions of this Act shall be effective for all contracts which are  
130 entered into, renewed, or amended on or after January 1, 2024

131

132

133

134