# HOUSE . . . . . . . . . . . . No. 2176

### The Commonwealth of Massachusetts

PRESENTED BY:

Louis L. Kafka

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 insurance coverage for mammograms and breast cancer screening.

#### PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Louis L. Kafka	8th Norfolk	1/19/2017
Claire D. Cronin	11th Plymouth	2/1/2017
Elizabeth A. Poirier	14th Bristol	1/20/2017
Chris Walsh	6th Middlesex	2/2/2017
Brian M. Ashe	2nd Hampden	2/2/2017
Kenneth I. Gordon	21st Middlesex	1/27/2017
Kay Khan	11th Middlesex	1/30/2017
Denise Provost	27th Middlesex	1/24/2017
Keiko M. Orrall	12th Bristol	
Daniel Cahill	10th Essex	
James J. Dwyer	30th Middlesex	
Carmine L. Gentile	13th Middlesex	
Thomas A. Golden, Jr.	16th Middlesex	
Thomas J. Calter	12th Plymouth	
Barbara A. L'Italien	Second Essex and Middlesex	·
Kate Hogan	3rd Middlesex	
Kathleen O'Connor Ives	First Essex	
James E. Timilty	Bristol and Norfolk	

Gerard Cassidy	9th Plymouth	
Carole A. Fiola	6th Bristol	

## **HOUSE . . . . . . . . . . . . . . . No. 2176**

By Mr. Kafka of Stoughton, a petition (accompanied by bill, House, No. 2176) of Louis L. Kafka and others relative to insurance coverage for mammograms and breast cancer screening. Financial Services.

### The Commonwealth of Alassachusetts

In the One Hundred and Ninetieth General Court (2017-2018)

An Act relative to insurance coverage for mammograms and breast cancer screening.

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: Section 47G of Chapter 175 of the General Laws, as appearing in the 2012
- 2 Official Edition, is hereby amended, in line 20, by striking the language after the word
- 3 "examination" and inserting in place thereof the following language:-
- 4 : (1) said benefits shall provide: (i) for a baseline mammogram, which may include
- 5 tomosynthesis, for women between the ages of thirty-five and forty and for a mammogram on an
- 6 annual basis, which may include tomosynthesis, for women forty years of age or older; (ii) in the
- 7 case of a woman under forty years of age who has a family history of breast cancer or other
- 8 breast cancer risk factors, a mammogram examination, which may include tomosynthesis, at
- 9 such age and intervals as deemed medically necessary by the woman's health care provider; (iii)
- 10 ultrasound evaluation, magnetic resonance imaging scan or additional mammography testing,
- which may include tmosynthesis, of an entire breast or breasts if the screening mammogram,
- screening ultrasound or MRI shows any abnormality where additional examination is deemed

medically necessary by the radiologist or the patient's health care provider, (iv) screening breast ultrasound or screening breast magnetic resonance imaging examination if the patient has additional risk factors for breast cancer including, but not limited to, family history, prior personal history of breast cancer, positive genetic testing, heterogeneously or extremely dense breast tissue based on the Breast Imaging Reporting and Data System established by the American College of Radiology, or other indications as determined by the patient's health care provider, (v) for a diagnostic mammogram, which may include tomosynthesis, diagnostic breast ultrasound evaluation or breast magnetic resonance imaging scan if the patient has a history of breast cancer, (vi) for magnetic resonance imaging in place of, or in addition to, a mammogram when a mammogram is unable to detect cancers due to insufficient breast tissue as ordered by a patient's physician. Said benefits shall be exempt from any co-payment, co-insurance, deductible or dollar limit provisions in a policy or contract.

Section 2: Section 110 of Chapter 175 of the General Laws, as appearing in the 2012 Official Edition, is hereby amended, in line 322, by striking the language after the word "examination" and inserting in place thereof the following language:-

: (1) said benefits shall provide: (i) for a baseline mammogram, which may include tomosynthesis, for women between the ages of thirty-five and forty and for a mammogram on an annual basis, which may include tomosynthesis, for women forty years of age or older; (ii) in the case of a woman under forty years of age who has a family history of breast cancer or other breast cancer risk factors, a mammogram examination, which may include tomosynthesis, at such age and intervals as deemed medically necessary by the woman's health care provider; (iii) ultrasound evaluation, magnetic resonance imaging scan or additional mammography testing, which may include tmosynthesis, of an entire breast or breasts if the screening mammogram,

screening ultrasound or MRI shows any abnormality where additional examination is deemed medically necessary by the radiologist or the patient's health care provider, (iv) screening breast ultrasound or screening breast magnetic resonance imaging examination if the patient has additional risk factors for breast cancer including, but not limited to, family history, prior personal history of breast cancer, positive genetic testing, heterogeneously or extremely dense breast tissue based on the Breast Imaging Reporting and Data System established by the American College of Radiology, or other indications as determined by the patient's health care provider, (v) for a diagnostic mammogram, which may include tomosynthesis, diagnostic breast ultrasound evaluation or breast magnetic resonance imaging scan if the patient has a history of breast cancer, (vi) for magnetic resonance imaging in place of, or in addition to, a mammogram when a mammogram is unable to detect cancers due to insufficient breast tissue as ordered by a patient's physician. Said benefits shall be exempt from any co-payment, co-insurance, deductible or dollar limit provisions in a policy or contract.

Section 3: Section 8J of Chapter 176A of the General Laws, as appearing in the 2012 Official Edition, is hereby amended, in line 12, by striking the language after the word "examination" and inserting in place thereof the following language:-

: (1) said benefits shall provide: (i) for a baseline mammogram, which may include tomosynthesis, for women between the ages of thirty-five and forty and for a mammogram on an annual basis, which may include tomosynthesis, for women forty years of age or older; (ii) in the case of a woman under forty years of age who has a family history of breast cancer or other breast cancer risk factors, a mammogram examination, which may include tomosynthesis, at such age and intervals as deemed medically necessary by the woman's health care provider; (iii) ultrasound evaluation, magnetic resonance imaging scan or additional mammography testing,

which may include tmosynthesis, of an entire breast or breasts if the screening mammogram, screening ultrasound or MRI shows any abnormality where additional examination is deemed medically necessary by the radiologist or the patient's health care provider, (iv) screening breast ultrasound or screening breast magnetic resonance imaging examination if the patient has additional risk factors for breast cancer including, but not limited to, family history, prior personal history of breast cancer, positive genetic testing, heterogeneously or extremely dense breast tissue based on the Breast Imaging Reporting and Data System established by the American College of Radiology, or other indications as determined by the patient's health care provider, (v) for a diagnostic mammogram, which may include tomosynthesis, diagnostic breast ultrasound evaluation or breast magnetic resonance imaging scan if the patient has a history of breast cancer, (vi) for magnetic resonance imaging in place of, or in addition to, a mammogram when a mammogram is unable to detect cancers due to insufficient breast tissue as ordered by a patient's physician. Said benefits shall be exempt from any co-payment, co-insurance, deductible or dollar limit provisions in a policy or contract.

Section 4: Section 4I of Chapter 176B of the General Laws, as appearing in the 2012 Official Edition, is hereby amended, in line 12, by striking the language after the word "examination" and inserting in place thereof the following language:-

: (1) said benefits shall provide: (i) for a baseline mammogram, which may include tomosynthesis, for women between the ages of thirty-five and forty and for a mammogram on an annual basis, which may include tomosynthesis, for women forty years of age or older; (ii) in the case of a woman under forty years of age who has a family history of breast cancer or other breast cancer risk factors, a mammogram examination, which may include tomosynthesis, at such age and intervals as deemed medically necessary by the woman's health care provider; (iii)

ultrasound evaluation, magnetic resonance imaging scan or additional mammography testing, which may include tmosynthesis, of an entire breast or breasts if the screening mammogram, screening ultrasound or MRI shows any abnormality where additional examination is deemed medically necessary by the radiologist or the patient's health care provider, (iv) screening breast ultrasound or screening breast magnetic resonance imaging examination if the patient has additional risk factors for breast cancer including, but not limited to, family history, prior personal history of breast cancer, positive genetic testing, heterogeneously or extremely dense breast tissue based on the Breast Imaging Reporting and Data System established by the American College of Radiology, or other indications as determined by the patient's health care provider, (v) for a diagnostic mammogram, which may include tomosynthesis, diagnostic breast ultrasound evaluation or breast magnetic resonance imaging scan if the patient has a history of breast cancer, (vi) for magnetic resonance imaging in place of, or in addition to, a mammogram when a mammogram is unable to detect cancers due to insufficient breast tissue as ordered by a patient's physician. Said benefits shall be exempt from any co-payment, co-insurance, deductible or dollar limit provisions in a policy or contract.

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