SENATE No. 726

The Commonwealth of Massachusetts

PRESENTED BY:

Michael F. Rush

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 equity and early detection.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
Michael F. Rush	Norfolk and Suffolk	
Thomas A. Golden, Jr.	16th Middlesex	
William M. Straus	10th Bristol	2/19/2021
Jessica Ann Giannino	16th Suffolk	2/23/2021
Michael O. Moore	Second Worcester	2/23/2021
Susan L. Moran	Plymouth and Barnstable	3/1/2021
Jacob R. Oliveira	7th Hampden	4/15/2021
Jason M. Lewis	Fifth Middlesex	4/15/2021
Carmine Lawrence Gentile	13th Middlesex	9/23/2021
Patrick M. O'Connor	Plymouth and Norfolk	11/9/2021
Steven S. Howitt	4th Bristol	12/29/2021

SENATE No. 726

By Mr. Rush, a petition (accompanied by bill, Senate, No. 726) of Michael F. Rush, Thomas A. Golden, Jr., William M. Straus, Jessica Ann Giannino and other members of the General Court for legislation relative to breast cancer equity and early detection. Financial Services.

The Commonwealth of Alassachusetts

In the One Hundred and Ninety-Second General Court (2021-2022)

An Act relative to breast cancer equity and early detection.

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

SECTION 1. Chapter 32A of the General Laws is hereby amended by inserting after section 28 the following section: -

Section 29. Notwithstanding any general or special law or rule or regulation to the contrary, any coverage offered by the commission to an active or retired employee of the commonwealth insured under the group insurance commission that provides medical expense coverage for screening mammograms shall provide coverage for diagnostic examinations for breast cancer, on a basis not less favorable than screening mammograms that are covered as medical benefits. An increase in patient cost sharing for screening mammograms and diagnostic examinations for breast cancer shall not be allowed to achieve compliance with this section. For the purposes of this section, "diagnostic examinations for breast cancer" means a medically necessary and appropriate examination for breast cancer to evaluate the abnormality in the breast that is seen or suspected from a screening examination for breast cancer, detected by another

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

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SECTION 2. Chapter 118E of the General Laws, as so appearing, is hereby amended by inserting at the end thereof the following new section: -

Section 13C1/2. Notwithstanding any general or special law or rule or regulation to the contrary, the Executive Office of Health and Human Services shall provide coverage under its Medicaid contracted health insurers, health plans, health maintenance organizations, and third party administrators under contract to a Medicaid managed care organization, the Medicaid primary care clinician plan, or an accountable care organization for diagnostic examinations for breast cancer, on a basis not less favorable than screening mammograms that are covered as medical benefits. An increase in patient cost sharing for screening mammograms and diagnostic examinations for breast cancer shall not be allowed to achieve compliance with this section. For the purposes of this section, "diagnostic examinations for breast cancer" means a medically necessary and appropriate examination for breast cancer to evaluate the abnormality in the breast that is seen or suspected from a screening examination for breast cancer, detected by another means of examination; or suspected based on the medical history or family medical history of the individual. "Examination for breast cancer" includes an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. "Cost sharing" shall mean a deductible, coinsurance, copayment, and any

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

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SECTION 3. Chapter 175 of the General Laws is hereby amended by inserting after section 47KK, the second time it appears, the following section: -

Section 47LL. Notwithstanding any general or special law or rule or regulation to the contrary, any policy, contract, agreement, plan or certificate of insurance issued, delivered or renewed within the commonwealth that provides medical expense coverage for screening mammograms shall provide coverage for diagnostic examinations for breast cancer, on a basis not less favorable than screening mammograms that are covered as medical benefits. An increase in patient cost sharing for screening mammograms and diagnostic examinations for breast cancer shall not be allowed to achieve compliance with this section. For the purposes of this section, "diagnostic examinations for breast cancer" means a medically necessary and appropriate examination for breast cancer to evaluate the abnormality in the breast that is seen or suspected from a screening examination for breast cancer, detected by another means of examination; or suspected based on the medical history or family medical history of the individual. "Examination for breast cancer" includes an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. "Cost sharing" shall mean a deductible, coinsurance, copayment, and any maximum limitation on the application of such a deductible, coinsurance, copayment, or similar out-of-pocket expense.

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

Section 8NN. Notwithstanding any general or special law or rule or regulation to the contrary, any contract between a subscriber and the corporation under an individual or group hospital service plan which is delivered, issued or renewed within the commonwealth that provides coverage for screening mammograms shall provide coverage for diagnostic examinations for breast cancer, on a basis not less favorable than screening mammograms that are covered as medical benefits. An increase in patient cost sharing for screening mammograms and diagnostic examinations for breast cancer shall not be allowed to achieve compliance with this section. For the purposes of this section, "diagnostic examinations for breast cancer" means a medically necessary and appropriate examination for breast cancer to evaluate the abnormality in the breast that is seen or suspected from a screening examination for breast cancer, detected by another means of examination; or suspected based on the medical history or family medical history of the individual. "Examination for breast cancer" includes an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. "Cost sharing" shall mean a deductible, coinsurance, copayment, and any maximum limitation on the application of such a deductible, coinsurance, copayment, or similar out-of-pocket expense.

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SECTION 5. Chapter 176B of the General Laws is hereby amended by inserting after section 4MM, the second time it appears, the following section: -

Section 4NN. Notwithstanding any general or special law or rule or regulation to the contrary, any subscription certificate under an individual or group medical service agreement delivered, issued or renewed within the commonwealth that provides coverage for screening mammograms shall provide coverage for diagnostic examinations for breast cancer, on a basis not less favorable than screening mammograms that are covered as medical benefits. An increase

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

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

Section 4FF. Notwithstanding any general or special law or rule or regulation to the contrary, any individual or group health maintenance contract that provides coverage for screening mammograms shall provide coverage for diagnostic examinations for breast cancer, on a basis not less favorable than screening mammograms that are covered as medical benefits. An increase in patient cost sharing for screening mammograms and diagnostic examinations for breast cancer shall not be allowed to achieve compliance with this section. For the purposes of this section, "diagnostic examinations for breast cancer" means a medically necessary and appropriate examination for breast cancer to evaluate the abnormality in the breast that is seen or suspected from a screening examination for breast cancer, detected by another means of examination; or suspected based on the medical history or family medical history of the individual. "Examination for breast cancer" includes an examination used to evaluate an

abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. "Cost sharing" shall mean a deductible, coinsurance, copayment, and any maximum limitation on the application of such a deductible, coinsurance, copayment, or similar out-of-pocket expense.

SECTION 7. The provisions of this Act shall be effective for all contracts which are entered into, renewed, or amended one year after its effective date.