HOUSE DOCKET, NO. 2175 FILED ON: 1/19/2023

HOUSE . . . . . No. 1043

The Commonwealth of Massachusetts

PRESENTED BY:

Vanna Howard

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:	DATE ADDED:
Vanna Howard	*17th Middlesex*	*1/19/2023*
Lindsay N. Sabadosa	*1st Hampshire*	*1/20/2023*
James K. Hawkins	*2nd Bristol*	*1/27/2023*
Michelle M. DuBois	*10th Plymouth*	*2/7/2023*

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HOUSE . . . . . No. 1043

By Representative Howard of Lowell, a petition (accompanied by bill, House, No. 1043) of Vanna Howard and others relative to breast cancer equity 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 equity 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:

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

Section 28A. 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” shall mean 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. For the purposes of this section, “examination for breast cancer” shall include an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. For the purposes of this section, “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 2. Chapter 118E of the General Laws is hereby amended by inserting after section 10Q the following section:-

Section 10R. The division and its contracted health insurers, health plans, health maintenance organizations, behavioral health management firms and third party administrators under contract to a

Medicaid managed care organization or primary care clinician plan or an accountable care organization 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” shall mean 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. For the purposes of this section, “examination for breast cancer” shall include an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. For the purposes of this section, “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 3. Chapter 175 of the General Laws is hereby amended by inserting after section 47TT the following section:-

Section 47UU. 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" shall mean 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. For the purposes of this section, "examination for breast cancer" shall include an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. For the purposes of this section, "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 8UU the following section: -

Section 8VV. A contract between a subscriber and the corporation under an individual or group hospital service plan that 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" shall mean 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. For the purposes of this section "examination for breast cancer" shall include an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. For the purposes of this section, "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 5. Chapter 176B of the General Laws is hereby amended by inserting after section 4UU the following section: -

Section 4VV. 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” shall mean 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. For the purposes of this section, “examination for breast cancer” shall include an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. For the purposes of this section, “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 4MM the following section: -

Section 4NN. 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” shall mean 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. For the purposes of this section,

"examination for breast cancer" shall include an examination used to evaluate an abnormality in a breast using diagnostic mammography, breast magnetic resonance imaging or breast ultrasound. For the purposes of this section, "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 that are entered into, renewed or amended 1 year after the effective date of this act.