THE SENATE THIRTY-SECOND LEGISLATURE, 2023 STATE OF HAWAII

S.B. NO. 273

A BILL FOR AN ACT

RELATING TO BREAST CANCER SCREENING.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. Section 431:10A-116, Hawaii Revised Statutes,
is amended to read as follows:

3 "§431:10A-116 Coverage for specific services. Every 4 person insured under a policy of accident and health or sickness 5 insurance delivered or issued for delivery in this State shall 6 be entitled to the reimbursements and coverages specified below: 7 Notwithstanding any provision to the contrary, (1) 8 whenever a policy, contract, plan, or agreement 9 provides for reimbursement for any visual or optometric service [, which] that is within the lawful 10 scope of practice of a duly licensed optometrist, the 11 person entitled to benefits or the person performing 12 13 the [services] service shall be entitled to reimbursement whether the service is performed by a 14 15 licensed physician or by a licensed optometrist. Visual or optometric services shall include eye or 16 17 visual examination, or both, or a correction of any



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1 visual or muscular anomaly, and the supplying of 2 ophthalmic materials, lenses, contact lenses, 3 spectacles, eyeglasses, and appurtenances thereto; 4 (2) Notwithstanding any provision to the contrary, for all 5 policies, contracts, plans, or agreements issued on or after May 30, 1974, whenever provision is made for 6 7 reimbursement or indemnity for any service related to 8 a surgical or emergency [procedures, which] procedure 9 that is within the lawful scope of practice of any practitioner licensed to practice medicine in this 10 11 State, reimbursement or indemnification under the 12 policy, contract, plan, or agreement shall not be denied when the [services are] service is performed by 13 a dentist acting within the lawful scope of the 14 dentist's license; 15 Notwithstanding any provision to the contrary, 16 (3) 17 whenever the policy provides reimbursement or payment for any service [, which] that is within the lawful 18 19 scope of practice of a psychologist licensed in this State, the person entitled to benefits or performing 20

the service shall be entitled to reimbursement or



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1		payment, whether the service is performed by a
2		licensed physician or licensed psychologist;
3	(4)	Notwithstanding any provision to the contrary, each
4		policy, contract, plan, or agreement issued on or
5		after February 1, 1991, except for policies that only
6		provide coverage for specified diseases or other
7		limited benefit coverage, but including policies
8		issued by companies subject to chapter 431, article
9		10A, part II and chapter 432, article 1 shall provide
10		coverage for screening by low-dose mammography for
11		occult breast cancer as follows:
12		(A) For women forty years of age and older, an annual
13		mammogram; and
14		(B) For a woman of any age [with] having an
15		above-average risk of developing breast cancer as
16		determined by the use of a risk-factor modeling
17		<u>tool,</u> a history of breast cancer <u>,</u> or whose mother
18		or sister has had a history of breast cancer, $[a]$
19		an annual mammogram [upon the recommendation of
20		the woman's physician].



The services provided in this paragraph are
subject to any coinsurance provisions that may be in
force in these policies, contracts, plans, or
agreements.

5 For [the purpose] purposes of this paragraph, [the-term] "low-dose mammography" means the x-ray 6 7 examination of the breast using equipment dedicated 8 specifically for mammography, including [but-not 9 limited to] the x-ray tube, filter, compression 10 device, screens, films, and cassettes, with an average 11 radiation exposure delivery of less than one rad mid-12 breast, with two views for each breast. An insurer 13 may provide the services required by this paragraph 14 through contracts with providers; provided that the contract is determined to be a cost-effective means of 15 16 delivering the services without sacrifice of quality 17 and meets the approval of the director of health; 18 [and] 19 Notwithstanding any provision to the contrary, each (5) policy, contract, plan, or agreement issued on or 20

21 before January 1, 2024, except for policies that only



1	prov	ide coverage for specified diseases or other
2	limi	ted benefit coverage, but including policies
3	issu	ed by companies subject to chapter 431,
4	<u>arti</u>	cle 10A, part II and chapter 432, article I, shall
5	prov	ide additional breast cancer screening coverage as
6	foll	ows:
7	<u>(A)</u>	For women thirty years of age and older, a formal
8		risk factor screening assessment informed by any
9		available risk factor modeling tool; and
10	<u>(B)</u>	For a woman of any age, any additional
11		supplemental imaging deemed necessary by an
12		applicable American College of Radiology
13		guideline, including breast magnetic resonance
14		imaging, ultrasound, or digital breast
15		tomosynthesis.
16		For purposes of this paragraph, "digital breast
17	tomo	synthesis" means a radiologic procedure that
18	invo	lves the acquisition of a projection of images
19	over	the stationary breast to produce cross-sectional,
20	<u>digi</u>	tal, three-dimensional images of the breast; and



1 [(5)] (6) (A) (i) Notwithstanding any provision to the 2 contrary, whenever a policy, contract, plan, 3 or agreement provides coverage for the children of the insured, that coverage shall 4 also extend to the date of birth of any 5 newborn child to be adopted by the insured; 6 7 provided that the insured [gives] shall give 8 written notice to the insurer of the 9 insured's intent to adopt the child prior to 10 the child's date of birth or within thirty days after the child's birth or within the 11 12 time period required for enrollment of a 13 natural born child under the policy, 14 contract, plan, or agreement of the insured, whichever period is longer; provided further 15 16 that if the adoption proceedings are not successful, the insured shall reimburse the 17 18 insurer for any expenses paid for the child; 19 and 20 (ii) Where notification has not been received by

the insurer prior to the child's birth or





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1 within the specified period following the 2 child's birth, insurance coverage shall be effective from the first day following the 3 4 insurer's receipt of legal notification of 5 the insured's ability to consent for 6 treatment of the infant for whom coverage is 7 sought; and When the insured is a member of a health 8 (B) 9 maintenance organization, coverage of an adopted newborn is effective: 10 11 (i) From the date of birth of the adopted newborn when the newborn is treated from 12 birth pursuant to a provider contract with 13 14 the health maintenance organization, and written notice of enrollment in accord with 15 the health maintenance organization's usual 16 enrollment process is provided within thirty 17 days of the date the insured notifies the 18 19 health maintenance organization of the 20 insured's intent to adopt the infant for 21 whom coverage is sought; or



1 (ii) From the first day following receipt by the health maintenance organization of written 2 3 notice of the insured's ability to consent 4 for treatment of the infant for whom 5 coverage is sought and enrollment of the 6 adopted newborn in accord with the health 7 maintenance organization's usual enrollment 8 process if the newborn has been treated from 9 birth by a provider not contracting or 10 affiliated with the health maintenance 11 organization."

12 SECTION 2. Section 432:1-605, Hawaii Revised Statutes, is 13 amended to read as follows:

14 "\$432:1-605 [Mammogram] Breast cancer screening[-]; 15 mammography. (a) Notwithstanding any provision to the 16 contrary, each policy, contract, plan, or agreement issued on or 17 after February 1, 1991, except for policies that only provide 18 coverage for specified diseases or other limited benefit 19 coverage, but including policies issued by companies subject to 20 chapter 431, article 10A, part II and chapter 432, article 1



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1	shall provide coverage for screening by low-dose mammography for
2	occult breast cancer as follows:
3	(1) For women forty years of age and older, an annual
4	mammogram; and
5	(2) For a woman of any age [with] having an above-average
6	risk of developing breast cancer as determined by the
7	use of a risk-factor modeling tool, a history of
8	breast cancer, or whose mother or sister has had a
9	history of breast cancer, [a] <u>an annual</u> mammogram
10	[upon-the recommendation of the woman's physician].
11	(b) Notwithstanding any provision to the contrary, each
12	policy contract, plan, or agreement issued after December 31,
13	2023, except for policies that only provide coverage for
14	specified diseases or other limited benefit coverage, but
15	including polices issued by companies subject to chapter 431,
16	article 10A, part II and chapter 432, article 1, shall provide
17	additional breast cancer screening coverage as follows:
18	(1) For women thirty years of age and older, a formal risk
19	factor screening assessment informed by any available
20	risk factor modeling tool; and



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1	(2) For a woman of any age, any additional supplemental
2	imaging deemed necessary by an applicable American
3	College of Radiology guideline, including breast
4	magnetic resonance imaging, ultrasound, or digital
5	breast tomosynthesis.
6	[(b)] <u>(c)</u> The services provided in [subsection]
7	subsections (a) and (b) are subject to any coinsurance
8	provisions that may be in force in these policies, contracts,
9	plans, or agreements.
10	[(c)] <u>(d)</u> For purposes of this section[, "low-dose]:
11	"Digital breast tomosynthesis" means a radiologic procedure
12	that involves the acquisition of a projection of images over the
13	stationary breast to produce cross-sectional, digital, three-
14	dimensional images of the breast.
15	"Low-dose mammography" means the x-ray examination of the
16	breast using equipment dedicated specifically for mammography,
17	including but not limited to the x-ray tube, filter, compression
18	device, screens, films, and cassettes, with an average radiation
19	exposure delivery of less than one rad mid-breast, with two
20	views for each breast.



1 [(d)] (e) An insurer may provide the services required by 2 this section through contracts with providers; provided that the 3 contract is determined to be a cost-effective means of 4 delivering the services without sacrifice of quality and meets 5 the approval of the director of health." 6 SECTION 3. This Act does not affect rights and duties that 7 matured, penalties that were incurred, and proceedings that were 8 begun before its effective date. 9 SECTION 4. Statutory material to be repealed is bracketed 10 and stricken. New statutory material is underscored. 11 SECTION 5. This Act shall take effect upon its approval. INTRODUCED BY: Kust Ferle 12

Report Title:

Breast Cancer; Annual Mammography; Risk Factor Screening; Health Insurance

Description:

Expands coverage of breast cancer screening and imaging to include an annual mammogram for a woman of any age having an above-average risk for breast cancer, risk factor screening for women 30 years of age and older, and additional supplemental imaging for any woman, regardless of age, as deemed medically necessary by an applicable American College of Radiology guideline.

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