THE SENATE THIRTY-SECOND LEGISLATURE, 2023 STATE OF HAWAII

S.B. NO. 600

JAN 2 0 2023

A BILL FOR AN ACT

RELATING TO BREAST CANCER SCREENING.

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

SECTION 1. The legislature is committed to ensuring that
 all women have ready access to breast cancer screening,
 regardless of age and ethnicity, provided that these screenings
 are requested by state licensed and authorized medical
 practitioners.

6 The legislature has serious reservations about the 7 implementation of United States preventive services task force 8 quidelines with respect to breast cancer screening. In 2009 and 9 2016, the United States preventive services task force released 10 recommendations that were a significant departure from screening 11 quidelines issued by leading clinical organizations, including 12 the American College of Radiology, the National Comprehensive 13 Cancer Network, and the American Medical Association. If the 14 United States preventive services task force quidelines were 15 implemented, insurance plans would no longer be required to cover annual mammography without cost sharing for millions of 16 17 women forty to forty-nine years of age.

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The legislature recognizes that the federal government has
 delayed implementation of United States preventive services task
 force guidelines through legislatively enacted moratoriums, the
 most recent of which is scheduled to expire January 1, 2025.

5 The legislature finds that there is ample data showing that 6 annual mammographic screenings significantly reduce breast 7 cancer deaths and morbidity and that effective screening 8 programs are in the best interest of the State and its 9 residents. The legislature further recognizes that certain 10 ethnic groups suffer a disproportionately higher rate of breast 11 cancer diagnoses before the age of fifty. The legislature is 12 concerned that minority women would also be disproportionately and adversely impacted by United States preventive services task 13 14 force guidelines limiting their access to life saving screening.

15 The purpose of this Act is to improve breast cancer16 detection rates in the State by:

17 (1) Increasing the categories of women required to be18 covered for mammogram screenings;

19 (2) Requiring the existing health insurance mandate for
20 coverage of low-dose mammography to include digital
21 mammography and breast tomosynthesis;



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(3) Defining "digital breast tomosynthesis"; and
 (4) Requiring health care providers to be reimbursed at
 rates accurately reflecting the resource costs
 specific to each service, including any increased
 resource cost after January 1, 2023.

6 SECTION 2. Section 431:10A-116, Hawaii Revised Statutes,
7 is amended to read as follows:

8 "§431:10A-116 Coverage for specific services. Every 9 person insured under a policy of accident and health or sickness 10 insurance delivered or issued for delivery in this State shall 11 be entitled to the reimbursements and coverages specified below: 12 (1) Notwithstanding any provision to the contrary, 13 whenever a policy, contract, plan, or agreement 14 provides for reimbursement for any visual or optometric service, [, which] that is within the 15 lawful scope of practice of a duly licensed 16 17 optometrist, the person entitled to benefits or the 18 person performing the [services] service shall be 19 entitled to reimbursement whether the service is performed by a licensed physician or by a licensed 20 21 optometrist. Visual or optometric services shall

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include eye or visual examination, or both, or a correction of any visual or muscular anomaly, and the supplying of ophthalmic materials, lenses, contact lenses, spectacles, eyeglasses, and appurtenances thereto;

(2) Notwithstanding any provision to the contrary, for all 6 7 policies, contracts, plans, or agreements issued on or after May 30, 1974, whenever provision is made for 8 9 reimbursement or indemnity for any service related to 10 a surgical or emergency [procedures, which] procedure 11 that is within the lawful scope of practice of any 12 practitioner licensed to practice medicine in this 13 State, reimbursement or indemnification under the 14 policy, contract, plan, or agreement shall not be denied when the [services are] service is performed by 15 16 a dentist acting within the lawful scope of the 17 dentist's license;

18 (3) Notwithstanding any provision to the contrary,
19 whenever the policy provides reimbursement or payment
20 for any service, [, which] that is within the lawful
21 scope of practice of a psychologist licensed in this

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1		State, the person entitled to benefits or performing	
2		the service shall be entitled to reimbursement or	
3		payment, whether the service is performed by a	
4		licensed physician or licensed psychologist;	
5	(4)	Notwithstanding any provision to the contrary, each	
6		policy, contract, plan, or agreement issued on or	
7		after February 1, 1991, except for policies that only	
8		provide coverage for specified diseases or other	
9		limited benefit coverage, but including policies	
10		issued by companies subject to chapter 431, article	
11		10A, part II and chapter 432, article 1 <u>,</u> shall provide	
12		coverage for screening by low-dose mammography for	
13		occult breast cancer as follows:	
14		(A) For women thirty-five years of age through	
15		thirty-nine years of age, a baseline mammogram;	
16		(B) For women forty years of age and older, an annual	
17		mammogram; [and	
18	(B)]	(C) For women thirty years of age or older that are	
19		deemed by a licensed physician or clinician to	
20		have an above-average risk for breast cancer, an	
21		annual mammogram;	



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1	(D) For [a woman] women of any age [with] having a		
2	history of breast cancer or whose mother or		
3	sister has had a history of breast cancer, a		
4	mammogram upon the recommendation of the woman's		
5	physician[+]; and		
6	(E) For women of any age, any additional or		
7	supplemental imaging, including breast magnetic		
8	resonance imaging or ultrasound, deemed medically		
9	necessary by an applicable American College of		
10	Radiology guideline.		
11	The services provided in this paragraph are		
12	subject to any coinsurance provisions that may be in		
13	force in these policies, contracts, plans, or		
14	agreements[+], and shall be at least as favorable and		
15	subject to the same dollar limits, deductibles, and		
16	co-payments as other radiological examinations;		
17	provided, however, that on and after January 1, 2023,		
18	providers of health care services specified under this		
19	section shall be reimbursed at rates accurately		
20	reflecting the resource costs specific to each		
21	modality, including any increased resource cost.		



1 For [the purpose] purposes of this paragraph[τ 2 the_term_"low_dose]: "Digital breast tomosynthesis" means a radiologic 3 4 procedure that allows a volumetric reconstruction of the whole breast from a finite number of low-dose, 5 two-dimensional projections obtained by different 6 7 x-ray tube angles, creating a series of images forming 8 a three-dimensional representation of the breast. 9 "Low-dose mammography" means the x-ray 10 examination of the breast using equipment dedicated 11 specifically for mammography, including but not 12 limited to the x-ray tube, filter, compression device, 13 screens, films, and cassettes, with an average radiation exposure delivery of less than one rad 14 15 mid-breast, with two views for each breast. "Low-dose 16 mammography" includes digital mammography, digital breast tomosynthesis, and the practice of interpreting 17 18 and rendering a report by a radiologist or other 19 physician based on the screening. 20 An insurer may provide the services required by this paragraph through contracts with providers; 21



1 provided that the contract is determined to be a 2 cost-effective means of delivering the services without sacrifice of quality and meets the approval of 3 4 the director of health; and 5 (5) (A) (i) Notwithstanding any provision to the contrary, whenever a policy, contract, plan, 6 7 or agreement provides coverage for the 8 children of the insured, that coverage shall 9 also extend to the date of birth of any 10 newborn child to be adopted by the insured; provided that the insured [gives] shall give 11 12 written notice to the insurer of the 13 insured's intent to adopt the child prior to 14 the child's date of birth or within thirty days after the child's birth or within the 15 16 time period required for enrollment of a 17 natural born child under the policy, contract, plan, or agreement of the insured, 18 19 whichever period is longer; provided further 20 that if the adoption proceedings are not 21 successful, the insured shall reimburse the



1insurer for any expenses paid for the child;2and

- 3 (ii) Where notification has not been received by 4 the insurer prior to the child's birth or 5 within the specified period following the 6 child's birth, insurance coverage shall be 7 effective from the first day following the 8 insurer's receipt of legal notification of 9 the insured's ability to consent for 10 treatment of the infant for whom coverage is 11 sought; and
- 12 (B) When the insured is a member of a health
 13 maintenance organization, coverage of an adopted
 14 newborn is effective:
- 15 (i) From the date of birth of the adopted
 16 newborn when the newborn is treated from
 17 birth pursuant to a provider contract with
 18 the health maintenance organization, and
 19 written notice of enrollment in accord with
 20 the health maintenance organization's usual
 21 enrollment process is provided within thirty



1		days of the date the insured notifies the
2		health maintenance organization of the
3		insured's intent to adopt the infant for
4		whom coverage is sought; or
5	(ii)	From the first day following receipt by the
6		health maintenance organization of written
7		notice of the insured's ability to consent
8		for treatment of the infant for whom
9		coverage is sought and enrollment of the
10		adopted newborn in accord with the health
11		maintenance organization's usual enrollment
12		process if the newborn has been treated from
13		birth by a provider not contracting or
14		affiliated with the health maintenance
15		organization."
16	SECTION 3. Se	ction 432:1-605, Hawaii Revised Statutes, is
17	amended by amending	subsection (c) to read as follows:
18	"(c) For purp	oses of this section[, "low dose]:
19	"Digital breas	t tomosynthesis" means a radiologic procedure
20	that allows a volum	etric reconstruction of the whole breast from
21	a finite number of	low-dose, two-dimensional projections



obtained by different x-ray tube angles, creating a series of 1 images forming a three-dimensional representation of the breast. 2 "Low-dose mammography" means the x-ray examination of the 3 4 breast using equipment dedicated specifically for mammography, 5 including but not limited to the x-ray tube, filter, compression 6 device, screens, films, and cassettes, with an average radiation 7 exposure delivery of less than one rad mid-breast, with two 8 views for each breast. "Low-dose mammography" includes digital 9 mammography, digital breast tomosynthesis, and the practice of interpreting and rendering a report by a radiologist or other 10 11 physician based on the screening." 12 SECTION 4. Statutory material to be repealed is bracketed and stricken. New statutory material is underscored. 13 SECTION 5. This Act shall take effect upon its approval. 14 15 INTRODUCED BY:

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Report Title:

Insurance; Breast Cancer Detection; Covered Service; Digital Mammography; Breast Tomosynthesis

Description:

Increases the categories of women required to be covered for mammogram screenings. Requires the existing health insurance mandate for coverage of low-dose mammography to include digital mammography and breast tomosynthesis. Defines "digital breast tomosynthesis". Requires health care providers to be reimbursed at rates accurately reflecting the resource costs specific to each service, including any increased resource cost after 1/1/2023.

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