

JAN 19 2023

A BILL FOR AN ACT

RELATING TO INSURANCE COVERAGE FOR MAMMOGRAPHY.

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

1 SECTION 1. Section 431:10A-116, Hawaii Revised Statutes,
2 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 (1) Notwithstanding any provision to the contrary,
8 whenever a policy, contract, plan, or agreement
9 provides for reimbursement for any visual or
10 optometric service[~~, which~~] that is within the lawful
11 scope of practice of a duly licensed optometrist, the
12 person entitled to benefits or the person performing
13 the [~~services~~] service shall be entitled to
14 reimbursement whether the service is performed by a
15 licensed physician or by a licensed optometrist.
16 Visual or optometric services shall include eye or
17 visual examination, or both, or a correction of any



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
6 after May 30, 1974, whenever provision is made for
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
10 practitioner licensed to practice medicine in this
11 State, reimbursement or indemnification under the
12 policy, contract, plan, or agreement shall not be
13 denied when the [~~services are~~] service is performed by
14 a dentist acting within the lawful scope of the
15 dentist's license;

16 (3) Notwithstanding any provision to the contrary,
17 whenever the policy provides reimbursement or payment
18 for any service[~~, which~~] that is within the lawful
19 scope of practice of a psychologist licensed in this
20 State, the person entitled to benefits or performing
21 the service shall be entitled to reimbursement or



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 a history of breast
15 cancer or whose mother or sister has had a
16 history of breast cancer, a mammogram upon the
17 recommendation of the woman's physician.

18 The services provided in this paragraph are
19 subject to any coinsurance provisions that may be in
20 force in these policies, contracts, plans, or
21 agreements[-]; provided that the insured's dollar



1 limits, deductibles, and copayments for services shall
2 be on terms at least as favorable to the insured as
3 those applicable to other radiological examinations.

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

- 18 (5) (A) (i) Notwithstanding any provision to the
19 contrary, whenever a policy, contract, plan,
20 or agreement provides coverage for the
21 children of the insured, that coverage shall



1 also extend to the date of birth of any
2 newborn child to be adopted by the insured;
3 provided that the insured [~~gives~~] shall give
4 written notice to the insurer of the
5 insured's intent to adopt the child prior to
6 the child's date of birth or within thirty
7 days after the child's birth or within the
8 time period required for enrollment of a
9 natural born child under the policy,
10 contract, plan, or agreement of the insured,
11 whichever period is longer; provided further
12 that if the adoption proceedings are not
13 successful, the insured shall reimburse the
14 insurer for any expenses paid for the child;
15 and

16 (ii) Where notification has not been received by
17 the insurer prior to the child's birth or
18 within the specified period following the
19 child's birth, insurance coverage shall be
20 effective from the first day following the
21 insurer's receipt of legal notification of



1 the insured's ability to consent for
2 treatment of the infant for whom coverage is
3 sought; and

4 (B) When the insured is a member of a health
5 maintenance organization, coverage of an adopted
6 newborn is effective:

7 (i) From the date of birth of the adopted
8 newborn when the newborn is treated from
9 birth pursuant to a provider contract with
10 the health maintenance organization, and
11 written notice of enrollment in accord with
12 the health maintenance organization's usual
13 enrollment process is provided within thirty
14 days of the date the insured notifies the
15 health maintenance organization of the
16 insured's intent to adopt the infant for
17 whom coverage is sought; or

18 (ii) From the first day following receipt by the
19 health maintenance organization of written
20 notice of the insured's ability to consent
21 for treatment of the infant for whom



1 coverage is sought and enrollment of the
2 adopted newborn in accord with the health
3 maintenance organization's usual enrollment
4 process if the newborn has been treated from
5 birth by a provider not contracting or
6 affiliated with the health maintenance
7 organization."

8 SECTION 2. Section 432:1-605, Hawaii Revised Statutes, is
9 amended by amending subsection (b) to read as follows:

10 "(b) The services provided in subsection (a) are subject
11 to any coinsurance provisions that may be in force in these
12 policies, contracts, plans, or agreements[-]; provided that the
13 member's dollar limits, deductibles, and copayments for services
14 shall be on terms at least as favorable to the member as those
15 applicable to other radiological examinations."

16 SECTION 3. Statutory material to be repealed is bracketed
17 and stricken. New statutory material is underscored.



1 SECTION 4. This Act shall take effect upon its approval.

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INTRODUCED BY: *Kurt Favelle*



S.B. NO. 272

Report Title:

Health Insurance; Coverage; Mammography; Radiological Examinations

Description:

Requires health insurers, mutual benefit societies, and health maintenance organizations to cover mandated services for mammography on terms at least as favorable as the terms for other radiological examinations

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