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 guidelines 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 guidelines were 15 implemented, insurance plans would no longer be required to 16 cover annual mammography without cost sharing for millions of 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 13 and adversely impacted by United States preventive services task 14 force guidelines limiting their access to life-saving screening.

15 The purpose of this Act is to improve breast cancer 16 detection rates in the State by:

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

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

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1 Defining "digital breast tomosynthesis". (3)2 SECTION 2. Section 431:10A-116, Hawaii Revised Statutes, 3 is amended to read as follows: 4 "§431:10A-116 Coverage for specific services. Every 5 person insured under a policy of accident and health or sickness insurance delivered or issued for delivery in this State shall 6 7 be entitled to the reimbursements and coverages specified below: 8 (1)Notwithstanding any provision to the contrary, 9 whenever a policy, contract, plan, or agreement 10 provides for reimbursement for any visual or 11 optometric service [r - which] that is within the lawful 12 scope of practice of a duly licensed optometrist, the 13 person entitled to benefits or the person performing 14 the [services] service shall be entitled to 15 reimbursement whether the service is performed by a 16 licensed physician or by a licensed optometrist. 17 Visual or optometric services shall include eye or 18 visual examination, or both, or a correction of any 19 visual or muscular anomaly, and the supplying of 20 ophthalmic materials, lenses, contact lenses, 21 spectacles, eyeglasses, and appurtenances thereto;

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

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1	(4)	Notw	ithstanding any provision to the contrary, each			
2		polid	cy, contract, plan, or agreement issued on or			
3		after February 1, 1991, except for policies that only				
4		provide coverage for specified diseases or other				
5		limited benefit coverage, but including policies				
6		issued by companies subject to chapter 431, article				
7		10A, part II and chapter 432, article 1, shall provide				
8		coverage for screening by low-dose mammography for				
9		occult breast cancer as follows:				
10		(A)	[For] <u>All</u> women <u>should be evaluated for breast</u>			
11			cancer risk by age thirty, so that those at			
12			increased risk, per appropriate American College			
13			of Radiology guidelines, can be identified and			
14			begin screening before age forty;			
15		<u>(B)</u>	In accordance with American College of Radiology			
16			guidelines, for women at an average risk of			
17			breast cancer forty years of age and older, an			
18			annual <u>screening</u> mammogram; [and			
19	(B)] <u>(C)</u>	In accordance with American College of Radiology			
20			guidelines, for women thirty years of age or			
21			older who are deemed by a licensed physician or			

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1		clinician to have an increased risk for breast		
2		cancer, an annual mammogram;		
3	(D)	For [a woman] <u>women</u> of any age [with] <u>having</u> a		
4		history of breast cancer [or whose mother or		
5		sister has had a history of breast cancer, a], an		
6		annual mammogram [upon the recommendation of the		
7		woman's physician.]; and		
8	<u>(E)</u>	For women of any age, any additional or		
9		supplemental imaging, including breast magnetic		
10		resonance imaging or ultrasound, deemed medically		
11		necessary by an applicable American College of		
12		Radiology guideline.		
13		The services provided in this paragraph are		
14	subject to any coinsurance provisions that may be in			
15	force in these policies, contracts, plans, or			
16	agreements $[-,]$ and shall be at least as favorable and			
17	subject to the same dollar limits, deductibles, and			
18	co-payments as other radiological examinations;			
19	For [the purpose] purposes of this paragraph[$_{ au}$			
20	the term "low-dose]:			

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

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

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

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

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1 "Low-dose mammography" means the x-ray examination of the 2 breast using equipment dedicated specifically for mammography, 3 including but not limited to the x-ray tube, filter, compression 4 device, screens, films, and cassettes, with an average radiation 5 exposure delivery of less than one rad mid-breast, with two views for each breast. "Low-dose mammography" includes digital 6 mammography, digital breast tomosynthesis, and the practice of 7 interpreting and rendering a report by a radiologist or other 8 9 physician based on the screening." 10 SECTION 4. Statutory material to be repealed is bracketed 11 and stricken. New statutory material is underscored. 12 SECTION 5. This Act shall take effect on June 30, 3000. 13

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Report Title:

Insurance; Breast Cancer Detection; Covered Service; Digital Mammography; Digital 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 digital breast tomosynthesis. Defines "digital breast tomosynthesis". Effective 6/30/3000. (HD1)

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