

State of Vermont  
Department of Financial Regulation  
89 Main Street  
Montpelier, VT 05620-3101

For consumer assistance:  
[Banking] 888-568-4547  
[Insurance] 800-964-1784  
[Securities] 877-550-3907  
[www.dfr.vermont.gov](http://www.dfr.vermont.gov)

TO: House Committee on Health Care  
FROM: Vermont Department of Financial Regulation  
DATE: March 13, 2024  
RE: H. 621

The Department of Financial Regulation thanks the Committee for the opportunity to comment on H.621, An act relating to health insurance coverage for diagnostic breast imaging. The Department does not have a position on the bill but would like to offer comments and suggested edits. The edits are intended to avoid state defrayal and align the bill's language with existing benefit requirements. As drafted, the bill expands the existing no cost share coverage to a broader category of diagnostic breast imaging services. Existing Vermont law only requires screening mammography to be covered at no cost share. Currently diagnostic breast imaging services are subject to cost share and therefore this change is expected to increase premiums, but the Department does not know to what extent. The Department recommends the following changes to the bill:

- **Align the recommendations for screening mammograms with the United States Preventative Task Force.** This would mirror existing requirements in Federal law.
- **Change bill language from “other breast imaging services upon recommendation of a health care provider as needed to detect” to “other medically necessary breast imaging services upon recommendation of a health care provider”.** The addition of “medically necessary” would align Vermont’s bill with Maine’s enacted law which has expanded no cost share coverage for mammography, as well as reflect how diagnostic breast imaging services are currently operationalized in Vermont. Without the additional language, the coverage could be inadvertently expanded and require cost defrayal by the state as well as result in potentially greater increases in premiums.
- **Change the open-ended definition of “Other breast imaging services” and delete “and other imaging services and technologies”.** This definition could inadvertently include services not currently covered under the Essential Health Benefit Benchmark plan and lead to required cost defrayal by the State of Vermont. The Committee could look to [Maine](#)’s recently enacted statute and an introduced bill in [Massachusetts](#) which adopted the clearer definition of what breast imaging services are covered.
- **Add an Exception for High-Deductible Health Plans.** Because first-dollar coverage for services that are not preventative under the ACA could disqualify high-deductible health plans from tax-advantaged status, the Department recommends language stating that the benefit “shall apply to a high-deductible health plan only to the extent that it would not disqualify the plan from eligibility for a health savings account pursuant to 26 U.S.C. § 223.”

