

1 TO THE HONORABLE SENATE:

2 The Committee on Health and Welfare to which was referred House Bill  
3 No. 639 entitled “An act relating to banning cost-sharing for all breast imaging  
4 services” respectfully reports that it has considered the same and recommends  
5 that the Senate propose to the House that the bill be amended by striking out all  
6 after the enacting clause and inserting in lieu thereof the following:

7 Sec. 1. 8 V.S.A. § 4100a is amended to read:

8 § 4100a. MAMMOGRAMS; COVERAGE REQUIRED

9 (a) Insurers shall provide coverage for screening by mammography for the  
10 presence of  ~~occult breast cancer, as provided by this subchapter.~~ In addition,  
11 insurers shall provide coverage for screening by ultrasound for a patient for  
12 whom the results of a screening mammogram were inconclusive or who has  
13 dense breast tissue, or both. Benefits provided shall cover the full cost of the  
14 mammography service or ultrasound, as applicable, and shall not be subject to  
15 any co-payment, deductible, coinsurance, or other cost-sharing requirement or  
16 additional charge.

17 (b) ~~For females 40 years or older, coverage shall be provided for an annual~~  
18 ~~screening. For females less than 40 years of age, coverage for screening shall~~  
19 ~~be provided upon recommendation of a health care provider. [Repealed.]~~

1 (c) ~~After January 1, 1994, this~~ This section shall apply only to screening  
2 procedures conducted by test facilities accredited by the American College of  
3 Radiologists.

4 (d) As used in this subchapter:

5 (1) “Insurer” means any insurance company ~~which~~ that provides health  
6 insurance as defined in subdivision 3301(a)(2) of this title, nonprofit hospital  
7 and medical service corporations, and health maintenance organizations. The  
8 term does not apply to coverage for specified ~~disease~~ diseases or other limited  
9 benefit coverage.

10 (2) “Mammography” means the x-ray examination of the breast using  
11 equipment dedicated specifically for mammography, including the x-ray tube,  
12 filter, compression device, ~~screens, films, and cassettes~~ and digital detector.  
13 The term includes breast tomosynthesis.

14 (3) “Screening” includes the mammography or ultrasound test procedure  
15 and a qualified physician’s interpretation of the results of the procedure,  
16 including additional views and interpretation as needed.

17 Sec. 2. MAMMOGRAPHY COVERAGE; DEPARTMENT OF FINANCIAL  
18 REGULATION

19 On or before October 1, 2018, the Department of Financial Regulation shall  
20 issue a bulletin to provide clarification to health insurers regarding the coding  
21 structure for screening mammograms and ultrasounds and for call-back

1 screenings, including clarifying that call-back mammograms and ultrasounds  
2 for patients for whom the results of a screening mammogram were  
3 inconclusive or who have dense breast tissue, or both, shall be covered without  
4 cost-sharing.

5 Sec. 3. EFFECTIVE DATE

6 (a) Sec. 1 (8 V.S.A. § 4100a) shall take effect on January 1, 2019 and shall  
7 apply to all health insurance plans issued on and after January 1, 2019 on such  
8 date as a health insurer offers, issues, or renews the health insurance plan, but  
9 in no event later than January 1, 2020.

10 (b) Sec. 2 (mammography coverage; Department of Financial Regulation)  
11 and this section shall take effect on passage.

12 and that after passage the title of the bill be amended to read: “An act relating  
13 to eliminating cost-sharing for certain breast imaging services”

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17 (Committee vote: \_\_\_\_\_)

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Senator \_\_\_\_\_

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FOR THE COMMITTEE