

10536

I N A S S E M B L Y

June 4, 2012

Introduced by COMMITTEE ON RULES -- (at request of M. of A. Espinal) --
read once and referred to the Committee on Insurance

AN ACT to amend the insurance law, in relation to requiring health insurance policies to cover comprehensive ultrasound screening, genetic testing, magnetic resonance imaging and/or other screening tests for breast cancer in certain cases, requiring the provision of certain information relating to breast density to patients; and requiring health insurance policies to cover comprehensive tests for ovarian cancer in certain cases

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 Section 1. Paragraph 11 of subsection (i) of section 3216 of the
2 insurance law is amended by adding a new subparagraph (F) to read as
3 follows:
4 (F) (I) SUCH POLICY SHALL PROVIDE ADDITIONAL COVERAGE FOR COMPREHEN-
5 SIVE ULTRASOUND SCREENING, GENETIC TESTING, MAGNETIC RESONANCE IMAGING
6 (MRI), AND/OR OTHER SCREENING TESTS APPROVED BY THE AMERICAN COLLEGE OF
7 RADIOLOGY OF AN ENTIRE BREAST OR THE ENTIRETY OF BOTH BREASTS IF:
8 (I) A MAMMOGRAM DEMONSTRATES HETEROGENEOUS OR DENSE BREAST TISSUE
9 BASED ON THE BREAST IMAGING REPORTING AND DATA SYSTEM ESTABLISHED BY THE
10 AMERICAN COLLEGE OF RADIOLOGY; OR
11 (II) A WOMAN IS BELIEVED TO BE AT INCREASED RISK FOR BREAST CANCER DUE
12 TO FAMILY HISTORY OR PRIOR PERSONAL HISTORY OF BREAST CANCER, POSITIVE
13 GENETIC TESTING OR OTHER INDICATIONS AS DETERMINED BY SUCH WOMAN'S
14 PHYSICIAN OR NURSE PRACTITIONER.
15 (II) SUCH ADDITIONAL COVERAGE MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND
16 COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS
17 ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN
18 POLICY.
19 (III) EACH MAMMOGRAPHY REPORT PROVIDED TO A PATIENT SHALL INCLUDE
20 INFORMATION ABOUT BREAST DENSITY, BASED ON THE BREAST IMAGING REPORTING
21 AND DATA SYSTEM ESTABLISHED BY THE AMERICAN COLLEGE OF RADIOLOGY. WHERE
22 APPLICABLE, SUCH REPORT SHALL INCLUDE THE FOLLOWING NOTICE: "IF YOUR
23 MAMMOGRAM DEMONSTRATES THAT YOU HAVE DENSE BREAST TISSUE, WHICH COULD

EXPLANATION--Matter in *ITALICS* (underscored) is new; matter in brackets
[] is old law to be omitted.

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1 HIDE SMALL ABNORMALITIES, YOU MIGHT BENEFIT FROM SUPPLEMENTARY SCREENING
2 TESTS, DEPENDING ON YOUR INDIVIDUAL RISK FACTORS AND THE RECOMMENDATION
3 OF YOUR INTERPRETING PHYSICIAN. A REPORT OF YOUR MAMMOGRAPHY RESULTS,
4 WHICH CONTAINS INFORMATION ABOUT YOUR BREAST DENSITY, HAS BEEN SENT TO
5 YOUR TREATING PHYSICIAN'S OFFICE AND YOU SHOULD CONTACT YOUR TREATING
6 PHYSICIAN IF YOU HAVE ANY QUESTIONS OR CONCERNS ABOUT YOUR REPORT."

7 S 2. Paragraph 11 of subsection (1) of section 3221 of the insurance
8 law is amended by adding a new subparagraph (F) to read as follows:

9 (F) (I) SUCH POLICY SHALL PROVIDE ADDITIONAL COVERAGE FOR COMPREHEN-
10 SIVE ULTRASOUND SCREENING, GENETIC TESTING, MAGNETIC RESONANCE IMAGING
11 (MRI), AND/OR OTHER SCREENING TESTS APPROVED BY THE AMERICAN COLLEGE OF
12 RADIOLOGY OF AN ENTIRE BREAST OR THE ENTIRETY OF BOTH BREASTS IF:

13 (I) A MAMMOGRAM DEMONSTRATES HETEROGENEOUS OR DENSE BREAST TISSUE
14 BASED ON THE BREAST IMAGING REPORTING AND DATA SYSTEM ESTABLISHED BY THE
15 AMERICAN COLLEGE OF RADIOLOGY; OR

16 (II) A WOMAN IS BELIEVED TO BE AT AN INCREASED RISK FOR BREAST CANCER
17 DUE TO FAMILY HISTORY OR PRIOR PERSONAL HISTORY OF BREAST CANCER, POSI-
18 TIVE GENETIC TESTING OR OTHER INDICATIONS AS DETERMINED BY SUCH WOMAN'S
19 PHYSICIAN OR NURSE PRACTITIONER.

20 (II) SUCH ADDITIONAL COVERAGE MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND
21 COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS
22 ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN
23 POLICY.

24 (III) EACH MAMMOGRAPHY REPORT PROVIDED TO A PATIENT SHALL INCLUDE
25 INFORMATION ABOUT BREAST DENSITY, BASED ON THE BREAST IMAGING REPORTING
26 AND DATA SYSTEM ESTABLISHED BY THE AMERICAN COLLEGE OF RADIOLOGY. WHERE
27 APPLICABLE, SUCH REPORT SHALL INCLUDE THE FOLLOWING NOTICE: "IF YOUR
28 MAMMOGRAM DEMONSTRATES THAT YOU HAVE DENSE BREAST TISSUE, WHICH COULD
29 HIDE SMALL ABNORMALITIES, YOU MIGHT BENEFIT FROM SUPPLEMENTARY SCREENING
30 TESTS, DEPENDING ON YOUR INDIVIDUAL RISK FACTORS AND THE RECOMMENDATION
31 OF YOUR INTERPRETING PHYSICIAN. A REPORT OF YOUR MAMMOGRAPHY RESULTS,
32 WHICH CONTAINS INFORMATION ABOUT YOUR BREAST DENSITY, HAS BEEN SENT TO
33 YOUR TREATING PHYSICIAN'S OFFICE AND YOU SHOULD CONTACT YOUR TREATING
34 PHYSICIAN IF YOU HAVE ANY QUESTIONS OR CONCERNS ABOUT YOUR REPORT."

35 S 3. Subsection (p) of section 4303 of the insurance law is amended by
36 adding a new paragraph 5 to read as follows:

37 (5) (A) SUCH COVERAGE SHALL PROVIDE ADDITIONAL COVERAGE FOR COMPREHEN-
38 SIVE ULTRASOUND SCREENING, GENETIC TESTING, MAGNETIC RESONANCE IMAGING
39 (MRI), AND/OR OTHER SCREENING TESTS APPROVED BY THE AMERICAN COLLEGE OF
40 RADIOLOGY OF AN ENTIRE BREAST OR THE ENTIRETY OF BOTH BREASTS IF:

41 (I) A MAMMOGRAM DEMONSTRATES HETEROGENEOUS OR DENSE BREAST TISSUE
42 BASED ON THE BREAST IMAGING REPORTING AND DATA SYSTEM ESTABLISHED BY THE
43 AMERICAN COLLEGE OF RADIOLOGY; OR

44 (II) A WOMAN IS BELIEVED TO BE AT INCREASED RISK FOR BREAST CANCER DUE
45 TO FAMILY HISTORY OR PRIOR PERSONAL HISTORY OF BREAST CANCER, POSITIVE
46 GENETIC TESTING OR OTHER INDICATIONS AS DETERMINED BY SUCH WOMAN'S
47 PHYSICIAN OR NURSE PRACTITIONER.

48 THE ADDITIONAL COVERAGE REQUIRED IN THIS SUBPARAGRAPH MAY BE SUBJECT
49 TO ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY
50 THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR
51 OTHER BENEFITS WITHIN A GIVEN POLICY.

52 (B) EACH MAMMOGRAPHY REPORT PROVIDED TO A PATIENT SHALL INCLUDE INFOR-
53 MATION ABOUT BREAST DENSITY, BASED ON THE BREAST IMAGING REPORTING AND
54 DATA SYSTEM ESTABLISHED BY THE AMERICAN COLLEGE OF RADIOLOGY. WHERE
55 APPLICABLE, SUCH REPORT SHALL INCLUDE THE FOLLOWING NOTICE: "IF YOUR
56 MAMMOGRAM DEMONSTRATES THAT YOU HAVE DENSE BREAST TISSUE, WHICH COULD

HIDE SMALL ABNORMALITIES, YOU MIGHT BENEFIT FROM SUPPLEMENTARY SCREENING TESTS, DEPENDING ON YOUR INDIVIDUAL RISK FACTORS AND THE RECOMMENDATION OF YOUR INTERPRETING PHYSICIAN. A REPORT OF YOUR MAMMOGRAPHY RESULTS, WHICH CONTAINS INFORMATION ABOUT YOUR BREAST DENSITY, HAS BEEN SENT TO YOUR TREATING PHYSICIAN'S OFFICE AND YOU SHOULD CONTACT YOUR TREATING PHYSICIAN IF YOU HAVE ANY QUESTIONS OR CONCERNS ABOUT YOUR REPORT."

S 4. Paragraph 7 of subsection (d) of section 4326 of the insurance law, as added by chapter 1 of the laws of 1999, is amended to read as follows:

(7) adult preventive health services consisting of mammography screening, AS PROVIDED IN SUBSECTION (P) OF SECTION FOUR THOUSAND THREE HUNDRED THREE OF THIS ARTICLE; OVARIAN CANCER SCREENING AS PROVIDED IN SUBSECTION (P-1) OF SECTION FOUR THOUSAND THREE HUNDRED THREE OF THIS ARTICLE; cervical cytology screening; periodic physical examinations no more than once every three years; and adult immunizations;

S 5. Subsection (i) of section 3216 of the insurance law is amended by adding a new paragraph 11-b to read as follows:

(11-B) (A) EVERY POLICY THAT PROVIDES COVERAGE FOR HOSPITAL, SURGICAL OR MEDICAL CARE SHALL PROVIDE THE FOLLOWING COVERAGE FOR SCREENING FOR OVARIAN CANCER:

(I) UPON THE RECOMMENDATION OF A PHYSICIAN, A PELVIC EXAM, GENETIC TESTING, ULTRASOUND AND BLOOD TESTING AT ANY AGE FOR COVERED PERSONS HAVING A HIGH RISK OF DEVELOPING OVARIAN CANCER OR WHO HAVE A FIRST DEGREE RELATIVE WITH A PRIOR HISTORY OF OVARIAN CANCER;

(II) A SINGLE BASELINE ULTRASOUND FOR COVERED PERSONS AGED THIRTY-FIVE THROUGH THIRTY-NINE, INCLUSIVE; AND

(III) AN ANNUAL ULTRASOUND FOR COVERED PERSONS AGED FORTY AND OLDER.

(B) SUCH COVERAGE REQUIRED PURSUANT TO SUBPARAGRAPH (A) OF THIS PARAGRAPH MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

(C) (I) SUCH POLICY SHALL PROVIDE FOR ADDITIONAL COVERAGE FOR COMPUTED TOMOGRAPHY, BARIUM ENEMA X-RAYS, MAGNETIC RESONANCE IMAGING (MRI), POSITRON EMISSION TOMOGRAPHY, LAPAROSCOPY, COLONOSCOPY AND BIOPSY IF A PERSON IS BELIEVED TO BE AT INCREASED RISK FOR OVARIAN CANCER DUE TO FAMILY HISTORY OR PRIOR PERSONAL HISTORY OF OVARIAN CANCER, POSITIVE GENETIC TESTING OR OTHER INDICATIONS AS DETERMINED BY SUCH PERSON'S PHYSICIAN OR NURSE PRACTITIONER.

(II) SUCH ADDITIONAL COVERAGE MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

S 6. Subsection (1) of section 3221 of the insurance law is amended by adding a new paragraph 11-b to read as follows:

(11-B) (A) EVERY INSURER DELIVERING A GROUP OR BLANKET POLICY OR ISSUING A GROUP OR BLANKET POLICY FOR DELIVERY IN THIS STATE THAT PROVIDES COVERAGE FOR HOSPITAL, SURGICAL OR MEDICAL CARE SHALL PROVIDE THE FOLLOWING COVERAGE FOR SCREENING FOR OVARIAN CANCER:

(I) UPON THE RECOMMENDATION OF A PHYSICIAN, A PELVIC EXAM, GENETIC TESTING, ULTRASOUND AND BLOOD TESTING AT ANY AGE FOR COVERED PERSONS HAVING A HIGH RISK OF DEVELOPING OVARIAN CANCER OR WHO HAVE A FIRST DEGREE RELATIVE WITH A PRIOR HISTORY OF OVARIAN CANCER;

(II) A SINGLE BASELINE ULTRASOUND FOR COVERED PERSONS AGED THIRTY-FIVE THROUGH THIRTY-NINE, INCLUSIVE; AND

(III) AN ANNUAL ULTRASOUND FOR COVERED PERSONS AGED FORTY AND OLDER.

(B) SUCH COVERAGE REQUIRED PURSUANT TO SUBPARAGRAPH (A) OF THIS PARAGRAPH MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

(C) (I) SUCH POLICY SHALL PROVIDE FOR ADDITIONAL COVERAGE FOR COMPUTED TOMOGRAPHY, BARIUM ENEMA X-RAYS, MAGNETIC RESONANCE IMAGING (MRI), POSITRON EMISSION TOMOGRAPHY, LAPAROSCOPY, COLONOSCOPY AND BIOPSY IF A PERSON IS BELIEVED TO BE AT INCREASED RISK FOR OVARIAN CANCER DUE TO FAMILY HISTORY OR PRIOR PERSONAL HISTORY OF OVARIAN CANCER, POSITIVE GENETIC TESTING OR OTHER INDICATIONS AS DETERMINED BY SUCH PERSON'S PHYSICIAN OR NURSE PRACTITIONER.

(II) SUCH ADDITIONAL COVERAGE MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

S 7. Section 4303 of the insurance law is amended by adding a new subsection (p-1) to read as follows:

(P-1) (1) A MEDICAL EXPENSE INDEMNITY CORPORATION, A HOSPITAL SERVICE CORPORATION OR A HEALTH SERVICE CORPORATION THAT PROVIDES COVERAGE FOR HOSPITAL, SURGICAL OR MEDICAL CARE SHALL PROVIDE THE FOLLOWING COVERAGE FOR SCREENING FOR OVARIAN CANCER:

(A) UPON THE RECOMMENDATION OF A PHYSICIAN, A PELVIC EXAM, GENETIC TESTING, ULTRASOUND AND BLOOD TESTING AT ANY AGE FOR COVERED PERSONS HAVING A HIGH RISK OF DEVELOPING OVARIAN CANCER OR WHO HAVE A FIRST DEGREE RELATIVE WITH A PRIOR HISTORY OF OVARIAN CANCER;

(B) A SINGLE BASELINE ULTRASOUND FOR COVERED PERSONS AGED THIRTY-FIVE THROUGH THIRTY-NINE, INCLUSIVE; AND

(C) AN ANNUAL ULTRASOUND FOR COVERED PERSONS AGED FORTY AND OLDER.

(2) SUCH COVERAGE REQUIRED PURSUANT TO SUBPARAGRAPH (A) OF THIS PARAGRAPH MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

(3) (A) SUCH POLICY SHALL PROVIDE FOR ADDITIONAL COVERAGE FOR COMPUTED TOMOGRAPHY, BARIUM ENEMA X-RAYS, MAGNETIC RESONANCE IMAGING (MRI), POSITRON EMISSION TOMOGRAPHY, LAPAROSCOPY, COLONOSCOPY AND BIOPSY IF A PERSON IS BELIEVED TO BE AT INCREASED RISK FOR OVARIAN CANCER DUE TO FAMILY HISTORY OR PRIOR PERSONAL HISTORY OF OVARIAN CANCER, POSITIVE GENETIC TESTING OR OTHER INDICATIONS AS DETERMINED BY SUCH PERSON'S PHYSICIAN OR NURSE PRACTITIONER.

(B) SUCH ADDITIONAL COVERAGE MAY BE SUBJECT TO ANNUAL DEDUCTIBLES AND COINSURANCE AS MAY BE DEEMED APPROPRIATE BY THE SUPERINTENDENT AND AS ARE CONSISTENT WITH THOSE ESTABLISHED FOR OTHER BENEFITS WITHIN A GIVEN POLICY.

S 8. This act shall take effect on the sixtieth day after it shall have become a law.