STATE OF NEW YORK

3852--A

Cal. No. 465

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2019-2020 Regular Sessions

IN SENATE

February 20, 2019

Introduced by Sens. MARTINEZ, BOYLE, BROOKS, CARLUCCI, KAMINSKY, MYRIE, RAMOS, SALAZAR, THOMAS -- read twice and ordered printed, and when printed to be committed to the Committee on Insurance -- reported favorably from said committee, ordered to first and second report, ordered to a third reading, amended and ordered reprinted, retaining its place in the order of third reading

AN ACT to amend the insurance law, in relation to enacting Law"

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

- Section 1. Short title. This act shall be known and may be cited as "Shannon's Law".
 - § 2. Subparagraph (A) of paragraph 11 of subsection (1) of section 3221 of the insurance law, as amended by chapter 414 of the laws of 2017, is amended to read as follows:
 - (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 mammography screening for occult breast cancer:
- (i) upon the recommendation of a physician, a mammogram, which may be 11 provided by breast tomosynthesis, at any age for covered persons having 12 a prior history of breast cancer or who have a first degree relative with a prior history of breast cancer;
- (ii) a single baseline mammogram, which may be provided by breast 14 15 tomosynthesis, for covered persons aged thirty-five through thirty-nine, inclusive; [and]
- 17 (iii) an annual mammogram, which may be provided by breast tomosynthe-18 sis, for covered persons aged forty and older[-]; and
- 19 (iv) for large group policies that provide coverage for hospital, 20 surgical or medical care, an annual mammogram for covered persons aged 21 thirty-five through thirty-nine, inclusive, upon the recommendation of a

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

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physician, subject to the insurer's determination that the mammogram is medically necessary.

- § 3. Subparagraphs (B), (C) and (D) of paragraph 1 of subsection (p) of section 4303 of the insurance law, subparagraphs (B) and (C) as amended by chapter 414 of the laws of 2017, subparagraph (D) as amended by chapter 74 of the laws of 2016, are amended to read as follows:
- (B) a single baseline mammogram, which may be provided by breast tomosynthesis, for covered persons aged thirty-five through thirty-nine, inclusive; [and]
- (C) an annual mammogram, which may be provided by breast tomosythesis, for covered persons aged forty and older[-];
- (D) for large group contracts offered by a medical expense indemnity corporation, a hospital service corporation or a health service corporation that provide coverage for hospital, surgical or medical care, an annual mammogram for covered persons aged thirty-five through thirty-nine, inclusive, upon the recommendation of a physician, subject to the corporation's determination that the mammogram is medically necessary; and
- 19 <u>(E)</u> The coverage required in this paragraph or paragraph two of this 20 subsection shall not be subject to annual deductibles or coinsurance.
- § 4. This act shall take effect on the thirtieth day after it shall have become a law, and shall apply to policies and contracts issued, renewed, modified, altered or amended on or after such effective date.