

HOUSE BILL 19

Unofficial Copy
C3
HB 261/97 - ECM

1998 Regular Session
8lr0256

(PRE-FILED)

By: **Delegates Goldwater and Pitkin**

Requested: August 20, 1997

Introduced and read first time: January 14, 1998

Assigned to: Economic Matters

A BILL ENTITLED

1 AN ACT concerning

2 **Health Benefit Plans - Minimum Inpatient Hospitalization Coverage -**
3 **Treatments for Breast and Testicular Cancer**

4 FOR the purpose of requiring certain insurers, nonprofit health service plans, and
5 health maintenance organizations to provide a certain minimum length of
6 inpatient hospitalization coverage after a mastectomy, removal of a testicle,
7 lymph node dissection, or lumpectomy that is performed for the treatment of
8 breast or testicular cancer; requiring that insurers, nonprofit health service
9 plans, and health maintenance organizations provide coverage for home visits
10 under certain circumstances; requiring that certain information be provided to a
11 patient prior to the performance of certain procedures; providing for the
12 construction of this Act; requiring certain persons to provide a certain notice;
13 providing for the application of this Act; defining certain terms; providing for the
14 termination of this Act; and generally relating to requiring certain insurers,
15 nonprofit health benefit plans, and health maintenance organizations to provide
16 a certain minimum length of inpatient hospitalization coverage after a
17 mastectomy, removal of a testicle, lymph node dissection, or lumpectomy under
18 certain circumstances.

19 BY adding to
20 Article - Insurance
21 Section 15-826
22 Annotated Code of Maryland
23 (1997 Volume)

24 BY adding to
25 Article - Health - General
26 Section 19-706(y) and 20-116
27 Annotated Code of Maryland
28 (1996 Replacement Volume and 1997 Supplement)

29 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
30 MARYLAND, That the Laws of Maryland read as follows:

1

Article - Insurance

2 15-826.

3 (A) IN THIS SECTION, "MASTECTOMY" MEANS THE SURGICAL REMOVAL OF
4 ALL OR PART OF A BREAST AS A RESULT OF BREAST CANCER.

5 (B) THIS SECTION APPLIES TO:

6 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT PROVIDE
7 INPATIENT HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR
8 GROUPS ON AN EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE POLICIES
9 OR CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND

10 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE INPATIENT
11 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER
12 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.

13 (C) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE FOR
14 THE COST OF INPATIENT HOSPITALIZATION SERVICES FOR A MINIMUM OF:

15 (1) 48 HOURS OF INPATIENT HOSPITALIZATION CARE AFTER A
16 MASTECTOMY OR AFTER THE REMOVAL OF A TESTICLE DUE TO TESTICULAR
17 CANCER; AND

18 (2) 24 HOURS OF INPATIENT HOSPITALIZATION CARE AFTER A LYMPH
19 NODE DISSECTION OR LUMPECTOMY FOR THE TREATMENT OF BREAST CANCER.

20 (D) THIS SECTION MAY NOT BE CONSTRUED TO REQUIRE THE PROVISION OF
21 INPATIENT HOSPITALIZATION SERVICES IN ACCORDANCE WITH SUBSECTION (C) OF
22 THIS SECTION WHENEVER THE PATIENT DETERMINES, IN CONSULTATION WITH THE
23 PATIENT'S ATTENDING PHYSICIAN, THAT A SHORTER PERIOD OF INPATIENT
24 HOSPITALIZATION IS APPROPRIATE FOR RECOVERY OR THAT THE MASTECTOMY,
25 REMOVAL OF A TESTICLE, LYMPH NODE DISSECTION, OR LUMPECTOMY CAN BE
26 PERFORMED ON AN OUTPATIENT BASIS.

27 (E) FOR A PATIENT WHO HAS A SHORTER LENGTH OF HOSPITAL STAY THAN
28 THAT PROVIDED UNDER SUBSECTION (C) OF THIS SECTION OR DECIDES THAT THE
29 MASTECTOMY, REMOVAL OF A TESTICLE, LYMPH NODE DISSECTION, OR
30 LUMPECTOMY CAN BE PERFORMED ON AN OUTPATIENT BASIS, AN ENTITY SUBJECT
31 TO THIS SECTION SHALL PROVIDE COVERAGE FOR:

32 (1) ONE HOME VISIT SCHEDULED TO OCCUR WITHIN 24 HOURS AFTER
33 DISCHARGE FROM THE HOSPITAL OR OUTPATIENT HEALTH CARE FACILITY; AND

34 (2) AN ADDITIONAL HOME VISIT IF PRESCRIBED BY THE PATIENT'S
35 ATTENDING PHYSICIAN.

1 (F) EACH ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE NOTICE
2 ANNUALLY TO ITS ENROLLEES AND INSUREDS ABOUT THE COVERAGE REQUIRED BY
3 THIS SECTION.

4 **Article - Health - General**

5 19-706.

6 (Y) THE PROVISIONS OF § 15-826 OF THE INSURANCE ARTICLE SHALL APPLY
7 TO HEALTH MAINTENANCE ORGANIZATIONS.

8 20-116.

9 (A) IN THIS SECTION, "HEALTH CARE PRACTITIONER" MEANS AN INDIVIDUAL
10 WHO IS LICENSED, CERTIFIED, OR OTHERWISE AUTHORIZED UNDER THE HEALTH
11 OCCUPATIONS ARTICLE TO PROVIDE HEALTH CARE SERVICES IN THE ORDINARY
12 COURSE OF BUSINESS OR PRACTICE OF A PROFESSION.

13 (B) BEFORE A PATIENT UNDERGOES A MASTECTOMY, REMOVAL OF A
14 TESTICLE, LYMPH NODE DISSECTION, OR LUMPECTOMY, WITH THE ASSISTANCE OF
15 THE PATIENT'S ATTENDING PHYSICIAN, THE PATIENT SHALL RECEIVE APPROPRIATE
16 TRAINING, EDUCATIONAL MATERIALS, AND INFORMATION FROM AN APPROPRIATE
17 HEALTH CARE PRACTITIONER EXPLAINING THE PROCEDURE THAT THE PATIENT IS
18 ABOUT TO UNDERGO AND NECESSARY POSTPROCEDURE CARE.

19 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
20 new policies or health benefit plans issued or delivered in the State on or after July 1,
21 1998 and to the renewal of all policies in effect before July 1, 1998, except that any
22 policy or health benefit plan in effect before July 1, 1998 shall comply with the
23 provisions of this Act no later than July 1, 1999.

24 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
25 July 1, 1998. It shall remain effective for a period of 4 years and, at the end of June
26 30, 2002, with no further action required by the General Assembly, this Act shall be
27 abrogated and of no further force and effect.