

SENATE BILL 470

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SB 117/97 - FIN

1998 Regular Session
8r0916

By: **Senators Hollinger, Munson, Hafer, Madden, Blount, Ruben,
Teitelbaum, Conway, Derr, Lawlah, Dorman, Kelley, Green, Jimeno,
Collins, Bromwell, Middleton, Trotter, Dyson, Roesser, and Van Hollen**

Introduced and read first time: February 6, 1998

Assigned to: Finance

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 termination of this Act; providing for the construction of this Act; requiring
13 certain persons to provide a certain notice; providing for the application of this
14 Act; defining a certain term; and generally relating to requiring certain
15 insurers, nonprofit health service plans, and health maintenance organizations
16 to provide a certain minimum length of inpatient hospitalization coverage after
17 a mastectomy, removal of a testicle, lymph node dissection, or lumpectomy
18 under certain circumstances.

19 BY adding to
20 Article - Health - General
21 Section 19-706(y) and 20-116
22 Annotated Code of Maryland
23 (1996 Replacement Volume and 1997 Supplement)

24 BY adding to
25 Article - Insurance
26 Section 15-826
27 Annotated Code of Maryland
28 (1997 Volume)

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

3 **Article - Health - General**

4 19-706.

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

7 20-116.

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

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

18 **Article - Insurance**

19 15-826.

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

22 (B) THIS SECTION APPLIES TO:

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

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

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

32 (1) 48 HOURS OF INPATIENT HOSPITALIZATION CARE AFTER A
33 MASTECTOMY OR AFTER THE REMOVAL OF A TESTICLE DUE TO TESTICULAR
34 CANCER; AND

1 (2) 24 HOURS OF INPATIENT HOSPITALIZATION CARE AFTER A LYMPH
2 NODE DISSECTION OR LUMPECTOMY FOR THE TREATMENT OF BREAST CANCER.

3 (D) THIS SECTION MAY NOT BE CONSTRUED TO REQUIRE THE PROVISION OF
4 INPATIENT HOSPITALIZATION SERVICES IN ACCORDANCE WITH SUBSECTION (C) OF
5 THIS SECTION WHENEVER THE PATIENT DETERMINES, IN CONSULTATION WITH THE
6 PATIENT'S ATTENDING PHYSICIAN, THAT A SHORTER PERIOD OF INPATIENT
7 HOSPITALIZATION IS APPROPRIATE FOR RECOVERY OR THAT THE MASTECTOMY,
8 REMOVAL OF A TESTICLE, LYMPH NODE DISSECTION, OR LUMPECTOMY CAN BE
9 PERFORMED ON AN OUTPATIENT BASIS.

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

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

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

19 (F) EACH ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE NOTICE
20 ANNUALLY TO ITS ENROLLEES AND INSUREDS ABOUT THE COVERAGE REQUIRED BY
21 THIS SECTION.

22 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all
23 new policies or health benefit plans issued or delivered in the State on or after July 1,
24 1998 and to the renewal of all policies in effect before July 1, 1998, except that any
25 policy or health benefit plan in effect before July 1, 1998 shall comply with the
26 provisions of this Act no later than July 1, 1999.

27 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
28 July 1, 1998. It shall remain effective until September 30, 2002 and, at the end of
29 September 30, 2002, with no further action required by the General Assembly, this
30 Act shall be abrogated and of no further force and effect.