

## CHAPTER 670

(House Bill 405)

AN ACT concerning

### **Health Insurance – Mandated Benefits – Breast Cancer Screening**

FOR the purpose of requiring certain insurers, nonprofit health service plans, and health maintenance organizations, ~~and the State Employee and Retiree Health and Welfare Benefits Program~~ to provide coverage for breast cancer screening in accordance with certain guidelines; repealing certain requirements for coverage of certain mammograms by certain insurance policies and nonprofit health service plans; repealing a certain definition; making certain requirements applicable to health maintenance organizations; making certain conforming changes; providing for the applicability of this Act; and generally relating to health insurance coverage for breast cancer screening.

BY repealing and reenacting, with amendments,

Article – Insurance

Section 15–814

Annotated Code of Maryland

(2006 Replacement Volume and 2008 Supplement)

~~BY repealing and reenacting, with amendments,~~

~~Article – State Personnel and Pensions~~

~~Section 2–502 and 2–503(b)~~

~~Annotated Code of Maryland~~

~~(2004 Replacement Volume and 2008 Supplement)~~

~~BY repealing and reenacting, without amendments,~~

~~Article – State Personnel and Pensions~~

~~Section 2–503(a)~~

~~Annotated Code of Maryland~~

~~(2004 Replacement Volume and 2008 Supplement)~~

BY adding to

Article – Health – General

Section 19–706(ttt)

Annotated Code of Maryland

(2005 Replacement Volume and 2008 Supplement)

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

**Article – Insurance**

15–814.

(a) [In this section, “mammogram” means an x-ray examination of the breast using dedicated equipment, including an x-ray tube, filter, compression device, screens, films, and cassettes, specifically for mammography that delivers an average radiation exposure of less than one rad mid–breast with two views for each breast.

(b)] This section applies to [each individual hospital or major medical insurance policy, group or blanket health insurance policy, and nonprofit health service plan that is delivered or issued for delivery in the State and is written on an expense–incurred basis]:

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

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

[(c)] **(B)** [A policy or plan] **AN ENTITY** subject to this section shall provide coverage for[:

(1) a baseline mammogram for women who are 35 to 39 years old;

(2) a mammogram every 2 years, or more frequently if recommended by a physician, for women who are 40 to 49 years old; and

(3) an annual mammogram for women who are at least 50 years old]  
**BREAST CANCER SCREENING IN ACCORDANCE WITH THE LATEST SCREENING GUIDELINES ISSUED BY THE AMERICAN CANCER SOCIETY.**

[(d)] **(C)** [A policy or plan] **AN ENTITY** subject to this section is not required to cover [screening mammograms] **BREAST CANCER SCREENINGS** used to identify breast cancer in asymptomatic women that are provided by a facility that is not accredited by the American College of Radiology or certified or licensed under a program established by the State.

[(e)] **(D)** (1) [A policy or plan] **AN ENTITY** subject to this section may not impose a deductible on the coverage required under this section.

(2) Each health insurance policy and certificate **ISSUED BY AN ENTITY SUBJECT TO THIS SECTION** shall contain a notice of the prohibition established by paragraph (1) of this subsection in a form approved by the Commissioner.

# **~~Article — State Personnel and Pensions~~**

## **~~2-502.~~**

~~(a) There is a State Employee and Retiree Health and Welfare Benefits Program, to be developed and administered by the Secretary.~~

~~(b) (1) The Program:~~

~~(i) subject to the regulations adopted under § 2-503 of this subtitle, shall encompass all units in the Executive, Judicial, and Legislative branches of State government, including any unit with an independent personnel system;~~

~~(ii) SUBJECT TO SUBSECTION (C) OF THIS SECTION, shall include the health insurance benefit options established by the Secretary; and~~

~~(iii) except as provided in paragraph (2) of this subsection, may include any other benefit option that the Secretary considers appropriate.~~

~~(2) The Program may not contain any of the benefits provided under Division II or Title 35 or Title 37 of this article.~~

~~(C) THE PROGRAM SHALL PROVIDE COVERAGE FOR BREAST CANCER SCREENING IN ACCORDANCE WITH THE LATEST SCREENING GUIDELINES ISSUED BY THE AMERICAN CANCER SOCIETY.~~

## **~~2-503.~~**

~~(a) The Secretary shall:~~

~~(1) adopt regulations for the administration of the Program;~~

~~(2) ensure that the Program complies with all federal and State laws governing employee benefit plans; and~~

~~(3) each year, recommend to the Governor the State share of the costs of the Program.~~

~~(b) [The] EXCEPT AS OTHERWISE PROVIDED BY LAW, THE Secretary may arrange as the Secretary considers appropriate any benefit option for inclusion in the Program.~~

**Article – Health – General**

19–706.

**(TTT) THE PROVISIONS OF § 15–814 OF THE INSURANCE ARTICLE APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.**

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after October 1, 2009.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2009.

**Approved by the Governor, May 19, 2009.**