

# HOUSE BILL 815

J5, J4, J1

(3lr2051)

## ENROLLED BILL

— Health and Government Operations/Finance —

Introduced by ~~Delegates Fennell, D. Barnes, Ivey, and Sample-Hughes~~  
Sample-Hughes, Alston, Bagnall, Bhandari, Chisholm, Cullison, Guzzone,  
Hill, Hutchinson, S. Johnson, Kaiser, Kerr, Kipke, R. Lewis, Lopez,  
Martinez, M. Morgan, Pena-Melnyk, Reilly, Rosenberg, Szeliga, Taveras,  
White, and Woods

Read and Examined by Proofreaders:

\_\_\_\_\_  
Proofreader.

\_\_\_\_\_  
Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this  
\_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ o'clock, \_\_\_\_\_ M.

\_\_\_\_\_  
Speaker.

### CHAPTER \_\_\_\_\_

1 AN ACT concerning

2 ~~Breast and Lung Cancer – Establishment of Screening Awareness Program and~~  
3 ~~Insurance Coverage and Cost Sharing~~

4 Cancer Screening – Health Insurance and Assessment of Outreach, Education,  
5 and Health Disparities

6 FOR the purpose of ~~establishing the Breast and Lung Cancer Screening Awareness~~  
7 ~~Program in the Maryland Department of Health;~~ requiring insurers, nonprofit  
8 health service plans, and health maintenance organizations to provide coverage for  
9 ~~breast cancer diagnosis, including diagnostic imaging, and~~ certain lung cancer  
10 diagnostic imaging and limiting the copayment, coinsurance, or deductible  
11 requirement that the entities can require for ~~the diagnostic imaging for breast cancer~~

#### EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.

*Italics indicate opposite chamber/conference committee amendments.*



~~and lung cancer screening and diagnosis; requiring the Maryland Department of Health to conduct an assessment on certain outreach, education, and health disparities in cancer screening; and generally relating to breast and lung cancer screenings.~~

~~BY adding to~~

~~Article – Health – General~~

~~Section 13–4801 through 13–4803 to be under the new subtitle “Subtitle 48. Breast and Lung Cancer Screening Awareness Program”~~

~~Annotated Code of Maryland~~

~~(2019 Replacement Volume and 2022 Supplement)~~

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

~~Article – Insurance~~

~~Section 15–814~~

~~Annotated Code of Maryland~~

~~(2017 Replacement Volume and 2022 Supplement)~~

BY adding to

Article – Insurance

Section 15–859

Annotated Code of Maryland

(2017 Replacement Volume and 2022 Supplement)

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

~~Article – Health – General~~

~~SUBTITLE 48. BREAST AND LUNG CANCER SCREENING AWARENESS PROGRAM.~~

~~13–4801.~~

~~IN THIS SUBTITLE, “PROGRAM” MEANS THE BREAST AND LUNG CANCER SCREENING AWARENESS PROGRAM.~~

~~13–4802.~~

~~(A) THERE IS A BREAST AND LUNG CANCER SCREENING AWARENESS PROGRAM IN THE DEPARTMENT.~~

~~(B) THE PURPOSE OF THE PROGRAM IS TO:~~

~~(1) EDUCATE INDIVIDUALS ABOUT THE IMPORTANCE OF BREAST AND LUNG CANCER SCREENINGS AND INSURANCE BENEFITS THAT INDIVIDUALS MAY~~

1 ~~HAVE FOR THE SCREENINGS UNDER §§ 15-814 AND 15-859 OF THE INSURANCE~~  
 2 ~~ARTICLE; AND~~

3 ~~(2) ASSIST INDIVIDUALS WHO HAVE BEEN RECOMMENDED TO~~  
 4 ~~RECEIVE A BREAST OR LUNG CANCER SCREENING BY A HEALTH CARE PROVIDER~~  
 5 ~~WITH TRANSPORTATION COSTS ASSOCIATED WITH THE SCREENINGS.~~

6 ~~13-4803.~~

7 ~~THE DEPARTMENT SHALL ADOPT REGULATIONS TO IMPLEMENT THE~~  
 8 ~~PROGRAM.~~

9 ~~SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read~~  
 10 ~~as follows:~~

11 Article - Insurance

12 ~~15-814.~~

13 (a) ~~(1) In this section, ["digital tomosynthesis"] THE FOLLOWING WORDS~~  
 14 ~~HAVE THE MEANINGS INDICATED.~~

15 ~~(2) "DIAGNOSTIC IMAGING" MEANS AN IMAGING EXAMINATION~~  
 16 ~~INCLUDING MAMMOGRAPHY, ULTRASOUND IMAGING, MAGNETIC RESONANCE~~  
 17 ~~IMAGING, IMAGE-GUIDED BREAST BIOPSY, OR OTHER IMAGING, USED TO EVALUATE:~~

18 ~~(I) A SUBJECTIVE OR OBJECTIVE ABNORMALITY DETECTED BY~~  
 19 ~~A PHYSICIAN OR PATIENT IN A BREAST;~~

20 ~~(II) AN ABNORMALITY SEEN BY A PHYSICIAN ON A SCREENING~~  
 21 ~~MAMMOGRAM;~~

22 ~~(III) AN ABNORMALITY PREVIOUSLY IDENTIFIED BY A PHYSICIAN~~  
 23 ~~AS PROBABLY BENIGN IN A BREAST FOR WHICH FOLLOW-UP IMAGING IS~~  
 24 ~~RECOMMENDED BY A PHYSICIAN; OR~~

25 ~~(IV) AN INDIVIDUAL WITH A PERSONAL HISTORY OF BREAST~~  
 26 ~~CANCER OR DENSE BREAST TISSUE.~~

27 ~~(3) "DIGITAL TOMOSYNTHESIS" means a radiologic procedure that~~  
 28 ~~involves the acquisition of projection images over the stationary breast to produce~~  
 29 ~~cross-sectional digital three-dimensional images of the breast.~~

30 (b) ~~This section applies to:~~

~~(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.~~

~~(e) (1) Subject to paragraph (2) of this subsection, an entity subject to this section shall provide coverage for breast cancer screening AND DIAGNOSIS in accordance with the latest screening AND DIAGNOSTIC guidelines issued by the American Cancer Society.~~

~~(2) The coverage required under this section shall include coverage for digital tomosynthesis AND DIAGNOSTIC IMAGING that, under accepted standards in the practice of medicine, the [treating physician] HEALTH CARE PROVIDER determines is medically appropriate and necessary for an enrollee or insured.~~

~~(d) An entity subject to this section is not required to cover 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) (1) [An] SUBJECT TO PARAGRAPH (4) OF THIS SUBSECTION, 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.~~

~~(3) An entity subject to this section may not impose a copayment or coinsurance requirement for digital tomosynthesis OR DIAGNOSTIC IMAGING that is greater than a copayment or coinsurance requirement for other breast cancer screenings for which coverage is required under this section.~~

~~(4) IF THE APPLICATION OF PARAGRAPH (1) OR (3) OF THIS SUBSECTION TO A HEALTH SAVINGS ACCOUNT QUALIFIED HIGH DEDUCTIBLE HEALTH PLAN WOULD RESULT IN HEALTH SAVINGS ACCOUNT INELIGIBILITY UNDER § 223 OF THE INTERNAL REVENUE CODE, PARAGRAPH (1) OR (3) OF THIS SUBSECTION SHALL APPLY ONLY WITH RESPECT TO THE DEDUCTIBLE OF THE PLAN AFTER THE ENROLLEE HAS SATISFIED THE MINIMUM DEDUCTIBLE UNDER § 223 OF THE INTERNAL REVENUE CODE.~~

1 (A) THIS SECTION APPLIES TO:

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

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

9 (B) (1) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE  
10 COVERAGE FOR RECOMMENDED FOLLOW-UP DIAGNOSTIC IMAGING TO ASSIST IN  
11 THE DIAGNOSIS OF LUNG CANCER FOR INDIVIDUALS FOR WHICH LUNG CANCER  
12 SCREENING IS RECOMMENDED BY THE U.S. PREVENTATIVE SERVICES TASK  
13 FORCE.

14 (2) THE COVERAGE REQUIRED UNDER PARAGRAPH (1) OF THIS  
15 SUBSECTION SHALL INCLUDE DIAGNOSTIC ULTRASOUND, MAGNETIC RESONANCE  
16 IMAGING, COMPUTED TOMOGRAPHY, AND IMAGE-GUIDED BIOPSY.

17 (C) (1) ~~SUBJECT TO~~ EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS  
18 SUBSECTION, AN ENTITY SUBJECT TO THIS SECTION MAY NOT IMPOSE A  
19 COPAYMENT, COINSURANCE, OR DEDUCTIBLE REQUIREMENT ON COVERAGE FOR  
20 LUNG CANCER SCREENING AND DIAGNOSIS THAT IS GREATER THAN THE COPAY ~~OR~~  
21 ~~COINSURANCE, COINSURANCE, OR DEDUCTIBLE~~ REQUIREMENT FOR BREAST  
22 CANCER SCREENING AND DIAGNOSIS.

23 (2) ~~IF THE APPLICATION OF PARAGRAPH (1) OF THIS SUBSECTION TO~~  
24 ~~A HEALTH SAVINGS ACCOUNT QUALIFIED HIGH DEDUCTIBLE HEALTH PLAN WOULD~~  
25 ~~RESULT IN HEALTH SAVINGS ACCOUNT INELIGIBILITY UNDER § 223 OF THE~~  
26 ~~INTERNAL REVENUE CODE, PARAGRAPH (1) OF THIS SUBSECTION SHALL APPLY~~  
27 ~~ONLY WITH RESPECT TO THE DEDUCTIBLE OF THE PLAN AFTER THE ENROLLEE HAS~~  
28 ~~SATISFIED THE MINIMUM DEDUCTIBLE UNDER § 223 OF THE INTERNAL REVENUE~~  
29 ~~CODE~~ IF AN INSURED OR ENROLLEE IS COVERED UNDER A HIGH-DEDUCTIBLE  
30 HEALTH PLAN, AS DEFINED IN 26 U.S.C. § 223, AN ENTITY SUBJECT TO THIS  
31 SECTION MAY SUBJECT FOLLOW-UP DIAGNOSTIC LUNG IMAGING TO THE  
32 DEDUCTIBLE REQUIREMENT OF THE HIGH-DEDUCTIBLE HEALTH PLAN.

33 SECTION 2. AND BE IT FURTHER ENACTED, That:

34 (a) The Maryland Department of Health shall conduct an assessment on current  
35 outreach, education, and health disparities in cancer screening, including the availability  
36 of biomarker testing, in the State.

1           (b) The assessment required under subsection (a) of this section shall include an  
2 examination of current programs overseen by the Department and local health  
3 departments.

4           (c) (1) In conducting the assessment required under subsection (a) of this  
5 section, the Department shall establish a stakeholder workgroup to advise on the current  
6 state of cancer screening in the State and make recommendations on the development of  
7 an outreach plan to educate communities negatively impacted by health disparities in  
8 cancer screening and cancer care.

9           (2) The stakeholder workgroup established under paragraph (1) of this  
10 subsection shall include:

11                   (i) representatives of communities traditionally underserved by the  
12 health care system;

13                   (ii) representatives of organizations, networks, or associations of  
14 health care professionals that are composed of a majority of Black and Indigenous people  
15 of color; and

16                   (iii) representatives of religious organizations, health educators,  
17 community health workers, and peer outreach workers with experience in engaging  
18 communities of color in health care.

19           (d) On or before January 1, 2024, the Department shall report to the General  
20 Assembly, in accordance with § 2–1257 of the State Government Article, on the assessment  
21 required under subsection (a) of this section.

22           SECTION 3. AND BE IT FURTHER ENACTED, That Section ~~2~~ 1 of this Act shall  
23 apply to all policies, contracts, and health benefit plans issued, delivered, or renewed in the  
24 State on or after January 1, 2024.

25           SECTION 4. AND BE IT FURTHER ENACTED, That Section ~~2~~ 1 of this Act shall  
26 take effect January 1, 2024.

27           SECTION 5. AND BE IT FURTHER ENACTED, That, except as provided in Section  
28 4 of this Act, this Act shall take effect ~~October~~ July 1, 2023.