

# SENATE BILL 965

J5, J4, J1

3lr2949  
CF HB 815

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By: **Senators Benson, Carter, and Lewis Young**

Introduced and read first time: February 27, 2023

Assigned to: Rules

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## A BILL ENTITLED

1 AN ACT concerning

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

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

12 BY adding to

13 Article – Health – General  
14 Section 13–4801 through 13–4803 to be under the new subtitle “Subtitle 48. Breast  
15 and Lung Cancer Screening Awareness Program”  
16 Annotated Code of Maryland  
17 (2019 Replacement Volume and 2022 Supplement)

18 BY repealing and reenacting, with amendments,

19 Article – Insurance  
20 Section 15–814  
21 Annotated Code of Maryland  
22 (2017 Replacement Volume and 2022 Supplement)

23 BY adding to

24 Article – Insurance  
25 Section 15–859  
26 Annotated Code of Maryland  
27 (2017 Replacement Volume and 2022 Supplement)

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



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

3 **Article – Health – General**

4 **SUBTITLE 48. BREAST AND LUNG CANCER SCREENING AWARENESS PROGRAM.**

5 **13-4801.**

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

8 **13-4802.**

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

11 **(B) THE PURPOSE OF THE PROGRAM IS TO:**

12 **(1) EDUCATE INDIVIDUALS ABOUT THE IMPORTANCE OF BREAST AND**  
13 **LUNG CANCER SCREENINGS AND INSURANCE BENEFITS THAT INDIVIDUALS MAY**  
14 **HAVE FOR THE SCREENINGS UNDER §§ 15-814 AND 15-859 OF THE INSURANCE**  
15 **ARTICLE; AND**

16 **(2) ASSIST INDIVIDUALS WHO HAVE BEEN RECOMMENDED TO**  
17 **RECEIVE A BREAST OR LUNG CANCER SCREENING BY A HEALTH CARE PROVIDER**  
18 **WITH TRANSPORTATION COSTS ASSOCIATED WITH THE SCREENINGS.**

19 **13-4803.**

20 **THE DEPARTMENT SHALL ADOPT REGULATIONS TO IMPLEMENT THE**  
21 **PROGRAM.**

22 SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read  
23 as follows:

24 **Article – Insurance**

25 **15-814.**

26 **(a) (1) In this section[“digital tomosynthesis”] THE FOLLOWING WORDS**  
27 **HAVE THE MEANINGS INDICATED.**

28 **(2) “DIAGNOSTIC IMAGING” MEANS AN IMAGING EXAMINATION**

1 INCLUDING MAMMOGRAPHY, ULTRASOUND IMAGING, MAGNETIC RESONANCE  
2 IMAGING, IMAGE-GUIDED BREAST BIOPSY, OR OTHER IMAGING, USED TO EVALUATE:

3 (I) A SUBJECTIVE OR OBJECTIVE ABNORMALITY DETECTED BY  
4 A PHYSICIAN OR PATIENT IN A BREAST;

5 (II) AN ABNORMALITY SEEN BY A PHYSICIAN ON A SCREENING  
6 MAMMOGRAM;

7 (III) AN ABNORMALITY PREVIOUSLY IDENTIFIED BY A PHYSICIAN  
8 AS PROBABLY BENIGN IN A BREAST FOR WHICH FOLLOW-UP IMAGING IS  
9 RECOMMENDED BY A PHYSICIAN; OR

10 (IV) AN INDIVIDUAL WITH A PERSONAL HISTORY OF BREAST  
11 CANCER OR DENSE BREAST TISSUE.

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

15 (b) This section applies to:

16 (1) insurers and nonprofit health service plans that provide hospital,  
17 medical, or surgical benefits to individuals or groups on an expense-incurred basis under  
18 health insurance policies or contracts that are issued or delivered in the State; and

19 (2) health maintenance organizations that provide hospital, medical, or  
20 surgical benefits to individuals or groups under contracts that are issued or delivered in  
21 the State.

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

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

30 (d) An entity subject to this section is not required to cover breast cancer  
31 screenings used to identify breast cancer in asymptomatic women that are provided by a  
32 facility that is not accredited by the American College of Radiology or certified or licensed  
33 under a program established by the State.

1 (e) (1) [An] SUBJECT TO PARAGRAPH (4) OF THIS SUBSECTION, AN entity  
2 subject to this section may not impose a deductible on the coverage required under this  
3 section.

4 (2) Each health insurance policy and certificate issued by an entity subject  
5 to this section shall contain a notice of the prohibition established by paragraph (1) of this  
6 subsection in a form approved by the Commissioner.

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

11 (4) IF THE APPLICATION OF PARAGRAPH (1) OR (3) OF THIS  
12 SUBSECTION TO A HEALTH SAVINGS ACCOUNT-QUALIFIED HIGH DEDUCTIBLE  
13 HEALTH PLAN WOULD RESULT IN HEALTH SAVINGS ACCOUNT INELIGIBILITY UNDER  
14 § 223 OF THE INTERNAL REVENUE CODE, PARAGRAPH (1) OR (3) OF THIS  
15 SUBSECTION SHALL APPLY ONLY WITH RESPECT TO THE DEDUCTIBLE OF THE PLAN  
16 AFTER THE ENROLLEE HAS SATISFIED THE MINIMUM DEDUCTIBLE UNDER § 223 OF  
17 THE INTERNAL REVENUE CODE.

18 15-859.

19 (A) THIS SECTION APPLIES TO:

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

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

27 (B) (1) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE  
28 COVERAGE FOR RECOMMENDED FOLLOW-UP DIAGNOSTIC IMAGING TO ASSIST IN  
29 THE DIAGNOSIS OF LUNG CANCER FOR INDIVIDUALS FOR WHICH LUNG CANCER  
30 SCREENING IS RECOMMENDED BY THE U.S. PREVENTATIVE SERVICES TASK  
31 FORCE.

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

1           **(c) (1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, AN ENTITY**  
2 **SUBJECT TO THIS SECTION MAY NOT IMPOSE A COPAYMENT, COINSURANCE, OR**  
3 **DEDUCTIBLE REQUIREMENT ON COVERAGE FOR LUNG CANCER SCREENING AND**  
4 **DIAGNOSIS THAT IS GREATER THAN THE COPAY OR COINSURANCE REQUIREMENT**  
5 **FOR BREAST CANCER SCREENING AND DIAGNOSIS.**

6           **(2) IF THE APPLICATION OF PARAGRAPH (1) OF THIS SUBSECTION TO**  
7 **A HEALTH SAVINGS ACCOUNT–QUALIFIED HIGH DEDUCTIBLE HEALTH PLAN WOULD**  
8 **RESULT IN HEALTH SAVINGS ACCOUNT INELIGIBILITY UNDER § 223 OF THE**  
9 **INTERNAL REVENUE CODE, PARAGRAPH (1) OF THIS SUBSECTION SHALL APPLY**  
10 **ONLY WITH RESPECT TO THE DEDUCTIBLE OF THE PLAN AFTER THE ENROLLEE HAS**  
11 **SATISFIED THE MINIMUM DEDUCTIBLE UNDER § 223 OF THE INTERNAL REVENUE**  
12 **CODE.**

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

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

18           SECTION 5. AND BE IT FURTHER ENACTED, That, except as provided in Section  
19 4 of this Act, this Act shall take effect October 1, 2023.