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1 A bill to be entitled 2 An act relating to coverage for diagnostic and 3 supplemental breast examinations; amending s. 110.123, 4 F.S.; prohibiting the state group insurance program 5 from imposing any enrollee cost-sharing liability with 6 respect to coverage for diagnostic breast examinations 7 and supplemental breast examinations; defining the 8 terms "diagnostic breast examination" and 9 "supplemental breast examination"; creating ss. 627.64181, 627.66131, and 641.31093, F.S.; defining 10 11 terms; prohibiting the imposition of cost-sharing 12 requirements for diagnostic and supplemental breast 13 examinations by individual accident and health insurance policies; group, blanket, and franchise 14 15 accident or health insurance policies; and health 16 maintenance contracts, respectively, which provide 17 such coverage; authorizing the Financial Services 18 Commission to adopt rules; providing an effective 19 date. 20 21 Be It Enacted by the Legislature of the State of Florida: 22 23 Section 1. Subsection (15) is added to section 110.123, 24 Florida Statutes, to read: 25 110.123 State group insurance program.

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26	(15) COVERAGE FOR DIAGNOSTIC AND SUPPLEMENTAL BREAST
27	EXAMINATIONS.—The state group insurance program may not impose
28	any enrollee cost-sharing liability with respect to coverage for
29	diagnostic breast examinations and supplemental breast
30	examinations. As used in this subsection, the terms "diagnostic
31	breast examination" and "supplemental breast examination" have
32	the same meanings as in s. 627.64181(1).
33	Section 2. Section 627.64181, Florida Statutes, is created
34	to read:
35	627.64181 Coverage for diagnostic and supplemental breast
36	examinations; cost-sharing requirements prohibited
37	(1) As used in this section, the term:
38	(a) "Cost-sharing requirement" means an insured's
39	deductible, coinsurance, copayment, or other out-of-pocket
40	expense.
41	(b) "Diagnostic breast examination" means a medically
42	necessary and appropriate examination of the breast, including
43	an examination using diagnostic mammography, breast magnetic
44	resonance imaging, or breast ultrasound, which is used to
45	<pre>evaluate an abnormality:</pre>
46	1. Seen or suspected from a screening examination for
47	breast cancer; or
48	2. Detected by another means of examination.
49	(c) "Supplemental breast examination" means a medically
50	necessary and appropriate examination of the breast, including

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an examination using breast magnetic resonance imaging or breast
ultrasound, which is:

1. Used to screen for breast cancer when there is no abnormality seen or suspected; and

- 2. Based on personal or family medical history or additional factors that may increase the individual's risk of breast cancer.
- (2) An accident or health insurance policy issued, amended, delivered, or renewed on or after January 1, 2024, which provides coverage for diagnostic breast examinations and supplemental breast examinations shall not impose any costsharing requirement with respect to such coverage.
- (3) The commission may adopt rules to administer this section.
- Section 3. Section 627.66131, Florida Statutes, is created to read:
- <u>627.66131</u> Coverage for diagnostic and supplemental breast examinations; cost-sharing requirements prohibited.—
- (1) As used in this section, the terms "cost-sharing requirement," "diagnostic breast examination," and "supplemental breast examination" have the same meanings as in s. 627.64181(1).
- (2) A group, blanket, or franchise accident or health insurance policy issued, amended, delivered, or renewed on or after January 1, 2024, which provides coverage for diagnostic

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76	breast examinations and supplemental breast examinations shall
77	not impose any cost-sharing requirement with respect to such
78	coverage.
79	(3) The commission may adopt rules to administer this
80	section.
81	Section 4. Section 641.31093, Florida Statutes, is created
82	to read:
83	641.31093 Coverage for diagnostic and supplemental breast
84	examinations; cost-sharing requirements prohibited
85	(1) As used in this section, the term:
86	(a) "Cost-sharing requirement" means a subscriber's
87	deductible, coinsurance, copayment, or other out-of-pocket
88	expense.
89	(b) "Diagnostic breast examination" has the same meaning
90	as in s. 627.64181(1).
91	(c) "Supplemental breast examination" has the same meaning
92	as in s. 627.64181(1).
93	(2) A health maintenance contract issued, amended,
94	delivered, or renewed on or after January 1, 2024, which
95	provides coverage for diagnostic breast examinations and
96	supplemental breast examinations shall not impose any cost-
97	sharing requirement with respect to such coverage.
98	(3) The commission may adopt rules to administer this
99	section.
100	Section 5. This act shall take effect July 1, 2023.

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