By Senator Ring

_	29-00117-13 2013126
1	A bill to be entitled
2	An act relating to mammogram reports; amending ss.
3	627.6418, 627.6613, and 641.31095, F.S.; requiring
4	that mammography reports include a statement regarding
5	breast density; providing an effective date.
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7	Be It Enacted by the Legislature of the State of Florida:
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9	Section 1. Section 627.6418, Florida Statutes, is amended
10	to read:
11	627.6418 Coverage for mammograms
12	(1) An accident or health insurance policy issued, amended,
13	delivered, or renewed in this state must provide coverage for at
14	least the following:
15	(a) A baseline mammogram for any woman who is 35 years of
16	age or older, but younger than 40 years of age.
17	(b) A mammogram every 2 years for any woman who is 40 years
18	of age or older, but younger than 50 years of age, or more
19	frequently based on the patient's physician's recommendation.
20	(c) A mammogram every year for any woman who is 50 years of
21	age or older.
22	(d) One or more mammograms a year, based upon a physician's
23	recommendation, for any woman who is at risk for breast cancer
24	because of a personal or family history of breast cancer,
25	because of having a history of biopsy-proven benign breast
26	disease, because of having a mother, sister, or daughter who has
27	or has had breast cancer, or because a woman has not given birth
28	before the age of 30.
29	(2) Each mammography report provided to a patient must

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29-00117-13 2013126 30 include information about breast density based on the Breast 31 Imaging Reporting and Data System established by the American 32 College of Radiology and must include the following notice: 33 "Dense breast tissue may hide small abnormalities. If your 34 mammogram indicates that you have dense breast tissue, you may 35 benefit from supplementary screening tests, including a breast 36 ultrasound screening, a breast MRI examination, or both, 37 depending on your individual risk factors. A report of your mammography results, including information about your breast 38 39 density, has been sent to your physician's office. If you have 40 any questions or concerns about this report, you should contact 41 your physician."

42 (3) (2) Except as provided in paragraph (1) (b), for 43 mammograms done more frequently than every 2 years for women 40 44 years of age or older but younger than 50 years of age, the 45 coverage required by subsection (1) applies, with or without a 46 physician prescription, if the insured obtains a mammogram in an 47 office, facility, or health testing service that uses radiological equipment registered with the Department of Health 48 49 for breast cancer screening. The coverage is subject to the deductible and coinsurance provisions applicable to outpatient 50 51 visits, and is also subject to all other terms and conditions 52 applicable to other benefits. This section does not affect any 53 requirements or prohibitions relating to who may perform, 54 analyze, or interpret a mammogram or the persons to whom the 55 results of a mammogram may be furnished or released.

56 <u>(4) (3)</u> This section does not apply to disability income, 57 specified disease, or hospital indemnity policies.

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(5)(4) Every insurer subject to the requirements of this

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59	section shall make available to the policyholder as part of the
60	application, for an appropriate additional premium, the coverage
61	required in this section without such coverage being subject to
62	the deductible or coinsurance provisions of the policy.
63	Section 2. Section 627.6613, Florida Statutes, is amended
64	to read:
65	627.6613 Coverage for mammograms
66	(1) A group, blanket, or franchise accident or health
67	insurance policy issued, amended, delivered, or renewed in this
68	state must provide coverage for at least the following:
69	(a) A baseline mammogram for any woman who is 35 years of
70	age or older, but younger than 40 years of age.
71	(b) A mammogram every 2 years for any woman who is 40 years
72	of age or older, but younger than 50 years of age, or more
73	frequently based on the patient's physician's recommendation.
74	(c) A mammogram every year for any woman who is 50 years of
75	age or older.
76	(d) One or more mammograms a year, based upon a physician's
77	recommendation, for any woman who is at risk for breast cancer
78	because of a personal or family history of breast cancer,
79	because of having a history of biopsy-proven benign breast
80	disease, because of having a mother, sister, or daughter who has
81	or has had breast cancer, or because a woman has not given birth
82	before the age of 30.
83	(2) Each mammography report provided to a patient must
84	include information about breast density based on the Breast
85	Imaging Reporting and Data System established by the American
86	College of Radiology and must include the following notice:
87	"Dense breast tissue may hide small abnormalities. If your

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88	mammogram indicates that you have dense breast tissue, you may
89	benefit from supplementary screening tests, including a breast
90	ultrasound screening, a breast MRI examination, or both,
91	depending on your individual risk factors. A report of your
92	mammography results, including information about your breast
93	density, has been sent to your physician's office. If you have
94	any questions or concerns about this report, you should contact
95	your physician."
96	(3) (2) Except as provided in paragraph (1)(b), for
97	mammograms done more frequently than every 2 years for women 40
98	years of age or older but younger than 50 years of age, the
99	coverage required by subsection (1) applies, with or without a
100	physician prescription, if the insured obtains a mammogram in an
101	office, facility, or health testing service that uses
102	radiological equipment registered with the Department of Health
103	for breast cancer screening. The coverage is subject to the
104	deductible and coinsurance provisions applicable to outpatient
105	visits, and is also subject to all other terms and conditions

105 visits, and is also subject to all other terms and conditions 106 applicable to other benefits. This section does not affect any 107 requirements or prohibitions relating to who may perform, 108 analyze, or interpret a mammogram or the persons to whom the 109 results of a mammogram may be furnished or released.

110 <u>(4)(3)</u> Every insurer referred to in subsection (1) shall 111 make available to the policyholder as part of the application, 112 for an appropriate additional premium, the coverage required in 113 this section without such coverage being subject to the 114 deductible or coinsurance provisions of the policy.

115 Section 3. Section 641.31095, Florida Statutes, is amended 116 to read:

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117	641.31095 Coverage for mammograms
118	(1) Every health maintenance contract issued or renewed on
119	or after January 1, 1996, shall provide coverage for at least
120	the following:
121	(a) A baseline mammogram for any woman who is 35 years of
122	age or older, but younger than 40 years of age.
123	(b) A mammogram every 2 years for any woman who is 40 years
124	of age or older, but younger than 50 years of age, or more
125	frequently based on the patient's physician's recommendations.
126	(c) A mammogram every year for any woman who is 50 years of
127	age or older.
128	(d) One or more mammograms a year, based upon a physician's
129	recommendation for any woman who is at risk for breast cancer
130	because of a personal or family history of breast cancer,
131	because of having a history of biopsy-proven benign breast
132	disease, because of having a mother, sister, or daughter who has
133	had breast cancer, or because a woman has not given birth before
134	the age of 30.
135	(2) Each mammography report provided to a patient must
136	include information about breast density based on the Breast
137	Imaging Reporting and Data System established by the American
138	College of Radiology and must include the following notice:
139	"Dense breast tissue may hide small abnormalities. If your
140	mammogram indicates that you have dense breast tissue, you may
141	benefit from supplementary screening tests, including a breast
142	ultrasound screening, a breast MRI examination, or both,
143	depending on your individual risk factors. A report of your
144	mammography results, including information about your breast
145	density, has been sent to your physician's office. If you have

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CODING: Words stricken are deletions; words underlined are additions.

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146	any questions or concerns about this report, you should contact
147	your physician."
148	(3) (2) The coverage required by this section is subject to
149	the deductible and copayment provisions applicable to outpatient
150	visits, and is also subject to all other terms and conditions
151	applicable to other benefits. A health maintenance organization
152	shall make available to the subscriber as part of the
153	application, for an appropriate additional premium, the coverage
154	required in this section without such coverage being subject to
155	any deductible or copayment provisions in the contract.
156	Section 4. This act shall take effect October 1, 2013.