

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.

6
 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,
 13 amended, delivered, or renewed in this state must provide
 14 coverage for at 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
 18 years 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
 21 of age or older.

22 (d) One or more mammograms a year, based upon a
 23 physician's recommendation, for any woman who is at risk for
 24 breast cancer because of a personal or family history of breast
 25 cancer, because of having a history of biopsy-proven benign
 26 breast disease, because of having a mother, sister, or daughter
 27 who has or has had breast cancer, or because a woman has not
 28 given birth before the age of 30.

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29 (2) Each mammography report provided to a patient must
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
38 mammography results, including information about your breast
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
48 radiological equipment registered with the Department of Health
49 for breast cancer screening. The coverage is subject to the
50 deductible and coinsurance provisions applicable to outpatient
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 (4)~~(3)~~ This section does not apply to disability income,

57 | specified disease, or hospital indemnity policies.

58 | ~~(5)(4)~~ Every insurer subject to the requirements of this
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
72 | years 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
75 | of age or older.

76 | (d) One or more mammograms a year, based upon a
77 | physician's recommendation, for any woman who is at risk for
78 | breast cancer because of a personal or family history of breast
79 | cancer, because of having a history of biopsy-proven benign
80 | breast disease, because of having a mother, sister, or daughter
81 | who has or has had breast cancer, or because a woman has not
82 | given birth 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

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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
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
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 (4)-(3) 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

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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:

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
124 | years 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
127 | of age or older.

128 | (d) One or more mammograms a year, based upon a
129 | physician's recommendation for any woman who is at risk for
130 | breast cancer because of a personal or family history of breast
131 | cancer, because of having a history of biopsy-proven benign
132 | breast disease, because of having a mother, sister, or daughter
133 | who has had breast cancer, or because a woman has not given
134 | birth before 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

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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
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.