

First Regular Session
Sixty-ninth General Assembly
STATE OF COLORADO

INTRODUCED

LLS NO. 13-0492.01 Kristen Forrestal x4217

HOUSE BILL 13-1309

HOUSE SPONSORSHIP

Primavera,

SENATE SPONSORSHIP

Nicholson,

House Committees

Public Health Care & Human Services

Senate Committees

A BILL FOR AN ACT

101 CONCERNING HEALTH INSURANCE COVERAGE FOR PREVENTIVE
102 BREAST IMAGING.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries>.)

The bill requires all sickness and accident insurance policies to provide coverage for breast imaging for all individuals possessing at least one risk factor for breast cancer, including a family history of breast cancer, being 40 years of age or older, or a genetic predisposition to breast cancer. Preventive breast imaging is not subject to copayments,

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.

deductibles, or coinsurance.

1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1.** In Colorado Revised Statutes, 10-16-104, **amend**
3 (18) (a) (II) and (18) (b) introductory portion; **repeal** (18) (b) (III); and
4 **add** (18.5) as follows:

5 **10-16-104. Mandatory coverage provisions - definitions.**

6 (18) **Preventive health care services.** (a) (II) Nothing in this subsection
7 (18) shall be deemed to apply to a basic health benefit plan issued
8 pursuant to section 10-16-105 (7.2) (b) (I), (7.2) (b) (III), or (7.2) (b) (IV).
9 ~~except that the required coverage for mammography set forth in~~
10 ~~subparagraph (III) of paragraph (b) of this subsection (18) shall apply to~~
11 ~~a basic health benefit plan issued pursuant to section 10-16-105 (7.2) (b)~~
12 ~~(IV).~~

13 (b) The coverage required by this subsection (18) ~~shall include~~
14 INCLUDES preventive health care services for the following, in accordance
15 with the A or B recommendations of the task force for the particular
16 preventive health care service:

17 ~~(III) (A) Breast cancer screening with mammography:~~

18 ~~(B) Coverage for breast cancer screening with mammography~~
19 ~~shall be the lesser of one hundred dollars per mammography screening or~~
20 ~~the actual charge for such screening, but in no case shall the covered~~
21 ~~person be required to pay more than the copayment required by the policy~~
22 ~~or contract for preventive health care services. The minimum benefit~~
23 ~~required under this subparagraph (III) shall be adjusted to reflect~~
24 ~~increases and decreases in the consumer price index.~~

25 ~~(C) Benefits for preventive mammography screenings shall be~~

1 ~~determined on a calendar year or a contract year basis, which shall be~~
2 ~~specified in the policy or contract. The preventive and diagnostic~~
3 ~~coverages provided pursuant to this subparagraph (HH) shall in no way~~
4 ~~diminish or limit diagnostic benefits otherwise allowable under a policy.~~
5 ~~If a covered person who is eligible for a preventive mammography~~
6 ~~screening benefit pursuant to this subparagraph (HH) has not utilized such~~
7 ~~benefit during a calendar year or a contract year, then the coverage shall~~
8 ~~apply to one diagnostic screening for that year. If more than one~~
9 ~~diagnostic screening is provided for the covered person in a given~~
10 ~~calendar year or contract year, the other diagnostic service benefit~~
11 ~~provisions in the policy or contract shall apply with respect to the~~
12 ~~additional screenings.~~

13 ~~(D) Notwithstanding the A or B recommendations of the task~~
14 ~~force, an annual breast cancer screening with mammography shall be~~
15 ~~covered for all individuals possessing at least one risk factor including,~~
16 ~~but not limited to, a family history of breast cancer, being forty years of~~
17 ~~age or older, or a genetic predisposition to breast cancer.~~

18 **(18.5) Breast imaging.** (a) ALL INDIVIDUAL AND ALL GROUP
19 SICKNESS AND ACCIDENT INSURANCE POLICIES, EXCEPT SUPPLEMENTAL
20 POLICIES COVERING A SPECIFIED DISEASE OR OTHER LIMITED BENEFIT,
21 THAT ARE DELIVERED OR ISSUED FOR DELIVERY WITHIN THIS STATE BY AN
22 ENTITY SUBJECT TO PART 2 OF THIS ARTICLE; ALL INDIVIDUAL AND GROUP
23 HEALTH CARE SERVICE OR INDEMNITY CONTRACTS ISSUED BY AN ENTITY
24 SUBJECT TO PART 3 OR 4 OF THIS ARTICLE; AND ANY OTHER INDIVIDUAL OR
25 GROUP HEALTH CARE COVERAGE OFFERED TO RESIDENTS OF THIS STATE
26 SHALL PROVIDE COVERAGE FOR THE TOTAL COST OF BREAST IMAGING AS
27 SPECIFIED IN PARAGRAPH (b) OF THIS SUBSECTION (18.5).

1 (b) THE POLICIES SUBJECT TO THIS SUBSECTION (18.5) MUST
2 PROVIDE COVERAGE FOR BREAST IMAGING, WITH OR WITHOUT A CLINICAL
3 EXAMINATION, FOR ALL INDIVIDUALS POSSESSING AT LEAST ONE RISK
4 FACTOR FOR BREAST CANCER, INCLUDING A FAMILY HISTORY OF BREAST
5 CANCER, BEING FORTY YEARS OF AGE OR OLDER, PRESENTING WITH
6 SYMPTOMS, OR AN INCREASED LIFETIME RISK OF BREAST CANCER
7 DETERMINED BY A RISK FACTOR MODEL SUCH AS TYRER-CUZICK,
8 BRCAPRO, OR GAIL. THE COVERAGE FOR BREAST IMAGING IS NOT
9 SUBJECT TO POLICY DEDUCTIBLES, COPAYMENTS, OR COINSURANCE. FOR
10 THE PURPOSES OF THIS SUBSECTION (18.5), "BREAST IMAGING" MEANS THE
11 NECESSARY TESTING NEEDED FOR THE ACTING PROVIDER TO FULLY
12 EVALUATE AN INDIVIDUAL'S HEALTH STATUS AS IT RELATES TO THE EARLY
13 DETECTION OF BREAST CANCER AND AS RECOMMENDED BY THE AMERICAN
14 COLLEGE OF RADIOLOGY APPROPRIATENESS CRITERIA.

15 **SECTION 2.** In Colorado Revised Statutes, 10-3-903, **amend** (2)
16 (h) as follows:

17 **10-3-903. Definition of transacting insurance business.** (2) The
18 provisions of this section do not apply to:

19 (h) Transactions in this state involving group sickness and
20 accident or blanket sickness and accident insurance where the master
21 policy was lawfully issued and delivered to a single employer in another
22 state in which the company was authorized to do an insurance business,
23 when a master policy ~~which~~ THAT covers residents of this state includes
24 ~~mammography~~ BREAST IMAGING benefits at a level at least as
25 comprehensive as those required by section 10-16-104 ~~(18)(b)(HH)~~
26 (18.5);

27 **SECTION 3.** In Colorado Revised Statutes, 10-16-105, **amend**

1 (7.2) (b) (II), (7.2) (b) (IV) (A), and (7.2) (b) (IV) (C) as follows:

2 **10-16-105. Small group sickness and accident insurance -**
3 **guaranteed issue - mandated provisions for basic health benefit plans**

4 **- rules.** (7.2) The commissioner shall promulgate rules to implement a
5 basic health benefit plan and a standard health benefit plan to be offered
6 by each small employer carrier as a condition of transacting business in
7 this state. The commissioner shall survey small group carriers annually to
8 determine the range of health benefit plans available. The commissioner
9 shall implement a basic plan that approximates the lowest level of
10 coverage offered in small group health benefit plans. A basic health
11 benefit plan may be based on the latest medical evidence. The
12 commissioner shall implement a standard plan that approximates the
13 average level of coverage offered in small group health benefit plans. In
14 determining levels of coverage, the commissioner shall consider factors
15 such as coinsurance, copayments, deductibles, out-of-pocket maximums,
16 and covered benefits. The commissioner shall amend the rules as
17 necessary to implement the basic and standard health benefit plans. The
18 rules shall be in conformity with article 4 of title 24, C.R.S., and shall
19 incorporate the following standard health benefit plan design described
20 in paragraph (a) of this subsection (7.2) and the various options for the
21 basic health benefit plan design described in paragraph (b) of this
22 subsection (7.2):

23 (b) (II) A basic health benefit plan may reflect a health benefit
24 plan that is a high deductible plan that would qualify for a health savings
25 account pursuant to 26 U.S.C. sec. 223. A carrier may apply deductible
26 amounts for mandatory health benefits for ~~mammography~~ BREAST
27 IMAGING, prostate screening, child supervision services, or prosthetic

1 devices pursuant to section 10-16-104 (10), (11), (14), ~~and (18)(b)(HH)~~
2 AND (18.5) if ~~such~~ THE mandatory benefits are not considered by the
3 federal department of treasury to be preventive or to have an acceptable
4 deductible amount.

5 (IV) On and after January 1, 2009, a basic health benefit plan may
6 reflect a medical evidence-based health benefit plan that:

7 (A) Does not include coverage pursuant to the mandatory
8 coverage provisions of section 10-16-104 (5), (9), (10), (12), and (18);
9 except that a basic health benefit plan issued pursuant to this
10 subparagraph (IV) shall include coverage for ~~mammography~~ BREAST
11 IMAGING as specified in section 10-16-104 ~~(18)(b)(HH)~~ (18.5);

12 (C) Covers limited prevention and screening based on the latest
13 medical evidence embodied in recommendations of an independent panel
14 of experts in primary care and prevention that systematically reviews the
15 evidence of effectiveness and develops recommendations for clinical
16 preventive services; except that a carrier may apply deductible amounts
17 for mandatory health benefits for ~~mammography~~ BREAST IMAGING, child
18 supervision services, or prosthetic devices pursuant to section 10-16-104
19 (11), (14), ~~and (18)(b)(HH)~~ AND (18.5) if ~~such~~ THE mandatory benefits
20 are not considered by the federal department of treasury to be preventive
21 or to have an acceptable deductible amount;

22 **SECTION 4.** In Colorado Revised Statutes, 10-16-116, **amend**
23 (3) as follows:

24 **10-16-116. Catastrophic health insurance - coverage.**

25 (3) Insurers shall provide a written disclosure to a covered person that
26 indicates the mandated benefits of section 10-16-104 (1), (1.7), (5), (5.5),
27 (8), (9), (10), (11), (12), (13), (14), ~~and (18)(b)(HH)~~ AND (18.5) are

1 covered benefits of the high deductible health plan offered pursuant to
2 section 10-16-105 (7.2) (b) (II); except that the mandated benefits for
3 ~~mammography~~ BREAST IMAGING, prostate screenings, child health
4 supervision services, and prosthetic devices shall be subject to policy
5 deductibles.

6 **SECTION 5.** In Colorado Revised Statutes, **amend** 10-16-129 as
7 follows:

8 **10-16-129. Health savings accounts.** Any carrier authorized to
9 conduct business in this state that offers coverage pursuant to part 2, 3, or
10 4 of this article may offer a high deductible health plan that would qualify
11 for and may be offered in conjunction with a health savings account
12 pursuant to 26 U.S.C. sec. 223, as amended. A carrier offering a high
13 deductible health plan that may be offered in conjunction with a health
14 savings account may apply the deductible to mandatory health benefits for
15 ~~mammography~~ BREAST IMAGING, prostate cancer screening, child health
16 supervision services, and prosthetic devices pursuant to section 10-16-104
17 (10), (11), (14), ~~and (18) (b) (II)~~ AND (18.5) if ~~such~~ THE mandatory
18 benefits are not considered by the federal department of treasury to be
19 preventive or to have an acceptable deductible amount.

20 **SECTION 6. Act subject to petition - effective date -**
21 **applicability.** (1) This act takes effect January 1, 2014; except that, if a
22 referendum petition is filed pursuant to section 1 (3) of article V of the
23 state constitution against this act or an item, section, or part of this act
24 within the ninety-day period after final adjournment of the general
25 assembly, then the act, item, section, or part will not take effect unless
26 approved by the people at the general election to be held in November
27 2014 and, in such case, will take effect on the date of the official

- 1 declaration of the vote thereon by the governor.
- 2 (2) This act applies to policies issued, delivered, renewed, or
- 3 reinstated on or after the applicable effective date of this act.