

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2023

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SENATE BILL 584

Short Title: Breast Cancer Diagnostic Imaging Reform. (Public)

Sponsors: Senators Batch, Chaudhuri, and Bode (Primary Sponsors).

Referred to: Rules and Operations of the Senate

April 5, 2023

1 A BILL TO BE ENTITLED
2 AN ACT TO PROVIDE HEALTH COVERAGE PARITY FOR BREAST CANCER
3 DIAGNOSTIC IMAGING AND TO REQUIRE COVERAGE FOR MAMMOGRAMS
4 AND ULTRASOUNDS FOR INDIVIDUALS WITH DENSE BREAST TISSUE.

5 The General Assembly of North Carolina enacts:

6 SECTION 1.(a) G.S. 58-51-57 is recodified as G.S. 58-3-271.

7 SECTION 1.(b) G.S. 58-65-92 is repealed.

8 SECTION 1.(c) G.S. 58-67-76 is repealed.

9 SECTION 2. G.S. 58-3-271, as enacted by Section 1(a) of this act, reads as rewritten:

10 "§ 58-3-271. Coverage for diagnostic, screening, and supplemental examinations for
11 breast cancer, including mammograms and other imaging, and cervical cancer
12 screening.

13 (a) The following definitions apply in this section:

14 (1) Cost-sharing requirement. – A deductible, coinsurance, copayment, and any
15 maximum limitation on the application of a deductible, coinsurance,
16 copayment, or similar out-of-pocket expense.

17 (2) Dense breast tissue. – Heterogeneously or extremely dense breast tissue as
18 defined by the Breast Imaging Reporting and Data System established by the
19 American College of Radiology.

20 (3) Diagnostic examination for breast cancer. – An examination for breast cancer
21 that is determined by the health care provider treating the patient to be
22 medically necessary and appropriate and that may include a diagnostic
23 low-dose mammography, breast magnetic resonance imaging, or breast
24 ultrasound to evaluate the abnormality in the breast that meets one of the
25 following criteria:

26 a. Is seen or suspected from a screening examination for breast cancer.

27 b. Is detected by another means of examination.

28 (4) Low-dose mammography. – A radiologic procedure for the early detection of
29 breast cancer using equipment dedicated specifically for mammography,
30 including a physician's interpretation of the results of the procedure.

31 (5) Magnetic resonance imaging. – Medical imaging that uses nuclear magnetic
32 resonance.

33 (6) Screening of early detection of cervical cancer. – Examinations and laboratory
34 tests used to detect cervical cancer, including conventional PAP smear
35 screening, liquid-based cytology, transvaginal ultrasound, pelvic magnetic
36 resonance imaging, and human papilloma virus (HPV) detection methods for



1 women with equivocal findings on cervical cytologic analysis that are subject
 2 to the approval of and have been approved by the United States Food and Drug
 3 Administration.

4 (7) Supplemental examination for breast cancer. – An examination for breast
 5 cancer that is determined by the health care provider treating the patient to be
 6 medically necessary and appropriate and that may include breast magnetic
 7 resonance imaging, breast ultrasound, diagnostic low-dose mammography,
 8 and digital breast tomosynthesis to evaluate the abnormality in the breast that
 9 meets both of the following criteria:

10 a. Is suspected based on the individual's personal or family medical
 11 history of breast cancer.

12 b. Is suspected because the individual has dense breast tissue.

13 ~~(a)(b) Every policy or contract of accident or health insurance, and every preferred provider~~
 14 ~~benefit plan under G.S. 58-50-56, that is issued, renewed, or amended on or after January 1, 1992,~~
 15 health benefit plan offered by an insurer in this State shall provide coverage for examinations
 16 and laboratory tests for the screening for the early detection of cervical cancer and for low-dose
 17 screening mammography. The same deductibles, coinsurance, and other limitations as apply to
 18 similar services covered under the policy, contract, or plan shall apply to coverage for
 19 examinations and laboratory tests for the screening for the early detection of cervical cancer and
 20 low-dose screening mammography.

21 ~~(a1) As used in this section, "examinations and laboratory tests for the screening for the~~
 22 ~~early detection of cervical cancer" means conventional PAP smear screening, liquid based~~
 23 ~~eytology, and human papilloma virus (HPV) detection methods for women with equivocal~~
 24 ~~findings on cervical cytologic analysis that are subject to the approval of and have been approved~~
 25 ~~by the United States Food and Drug Administration.~~

26 ~~(b) As used in this section, "low-dose screening mammography" means a radiologic~~
 27 ~~procedure for the early detection of breast cancer provided to an asymptomatic woman using~~
 28 ~~equipment dedicated specifically for mammography, including a physician's interpretation of the~~
 29 ~~results of the procedure.~~

30 (c) Coverage for low-dose screening mammography and breast ultrasound shall be
 31 provided as follows:

32 (1) One or more mammograms a year, as recommended by a physician, for any
 33 woman who is at risk for breast cancer. For purposes of this subdivision, a
 34 woman is at risk for breast cancer if any one or more of the following is true:

35 a. The woman has a personal history of breast ~~cancer;~~cancer.

36 b. The woman has a personal history of biopsy-proven benign breast
 37 ~~disease;~~disease.

38 c. The woman's mother, sister, or daughter has or has had breast ~~cancer;~~
 39 ~~or~~cancer.

40 d. The woman has not given birth prior to the age of ~~30;~~30.

41 (2) One baseline mammogram for any woman 35 through 39 years of age,
 42 ~~inclusive;~~inclusive.

43 (3) A mammogram every other year for any woman 40 through 49 years of age,
 44 inclusive, or more frequently upon recommendation of a ~~physician;~~
 45 ~~and~~physician.

46 (4) A mammogram every year for any woman 50 years of age or older.

47 (5) One or more mammograms or breast ultrasounds a year, as recommended by
 48 a physician, for any woman with dense breast tissue.

49 (c1) Every health benefit plan offered by an insurer in this State that provides benefits for
 50 a diagnostic or supplemental examination for breast cancer shall ensure that the cost-sharing
 51 requirements applicable to a diagnostic or supplemental examination for breast cancer are no less

1 favorable than the cost-sharing requirements applicable to a screening examination for breast
2 cancer.

3 (d) Reimbursement for a mammogram authorized under this section shall be made only
4 if the facility in which the mammogram was performed meets mammography accreditation
5 standards established by the North Carolina Medical Care Commission.

6 (e) Coverage for the screening for the early detection of cervical cancer shall be in
7 accordance with the most recently published American Cancer Society guidelines or guidelines
8 adopted by the North Carolina Advisory Committee on Cancer Coordination and Control.
9 Coverage shall include the examination, the laboratory fee, and the physician's interpretation of
10 the laboratory results. Reimbursements for laboratory fees shall be made only if the laboratory
11 meets accreditation standards adopted by the North Carolina Medical Care Commission."

12 **SECTION 3.** G.S. 135-48.51 reads as rewritten:

13 **"§ 135-48.51. Coverage and operational mandates related to Chapter 58 of the General**
14 **Statutes.**

15 The following provisions of Chapter 58 of the General Statutes apply to the State Health Plan:

16 ...

17 (9a) G.S. 58-3-271, Coverage for diagnostic, screening, and supplemental
18 examinations for breast cancer, including mammograms and other imaging,
19 and cervical cancer screening.

20"

21 **SECTION 4.(a)** There is appropriated from the General Fund to the Community
22 Colleges System Office one million five hundred thousand dollars (\$1,500,000) in nonrecurring
23 funds for the 2023-2024 fiscal year to be used to develop a program and incentives for the
24 recruitment, hiring, and retention of certified mammography technologists to perform 3D
25 mammograms in rural and medically underserved areas of the State.

26 **SECTION 4.(b)** This section becomes effective July 1, 2023.

27 **SECTION 5.** Except as otherwise provided, this act becomes effective October 1,
28 2023, and applies to insurance contracts issued, renewed, or amended on or after that date.