

23104176D

HOUSE BILL NO. 1815

Offered January 11, 2023

Prefiled January 10, 2023

A *BILL to amend the Code of Virginia by adding a section numbered 38.2-3418.1:3, relating to health insurance; coverage for breast examinations.*

Patrons—Simonds, McQuinn and Taylor

Referred to Committee on Commerce and Energy

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding a section numbered 38.2-3418.1:3 as follows:

§ 38.2-3418.1:3. Coverage for breast examinations.

A. Notwithstanding the provisions of § 38.2-3419 and in addition to the coverage required by § 38.2-3418.1, each insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis, each corporation providing individual or group accident and sickness subscription contracts, and each health maintenance organization providing a health care plan for health care services shall provide coverage under such policy, contract, or plan delivered, issued for delivery, or renewed in the Commonwealth for diagnostic breast examinations and supplemental breast examinations.

B. As used in this section:

"Diagnostic breast examination" means a medically necessary and appropriate examination of the breast, including such an examination using diagnostic mammography, breast magnetic resonance imaging, or breast ultrasound, that is used to evaluate (i) an abnormality seen or suspected from a screening for the detection of breast cancer or (ii) an abnormality detected by another means of examination.

"Supplemental breast examination" means a medically necessary and appropriate examination of the breast, including such an examination using diagnostic mammography, breast magnetic resonance imaging, or breast ultrasound, that is used to screen for breast cancer when there is no abnormality seen or suspected and is based on personal or family medical history or additional factors that may increase the individual's risk of breast cancer.

C. The coverage required by this section shall not be subject to cost-sharing requirements, including annual deductibles, coinsurance, copayments, or similar out-of-pocket expenses, or any maximum limitation on the application of such a deductible, coinsurance, copayment, or similar out-of-pocket expense.

D. The provisions of this section shall apply only to any individual or group accident and sickness insurance policy providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis, any individual or group accident and sickness subscription contracts, and any health care plan for health care services delivered, issued for delivery, or renewed in the Commonwealth on and after January 1, 2024.

E. The provisions of this section shall not apply to short-term travel, accident-only, limited or specified disease policies or to short-term nonrenewable policies of not more than six months' duration.

INTRODUCED

HB1815