

SENATE BILL No. 294

DIGEST OF INTRODUCED BILL

Citations Affected: IC 5-10-8-7.5; IC 27-8-14.7; IC 27-13-7-15; IC 27-13-7-16.

Synopsis: Coverage for breast and prostate cancer screening. Requires coverage by group insurance for public employees, group insurers, and health maintenance organizations to provide for periodic prostate specific antigen screening in men in certain age and risk groups. Requires health maintenance organizations to provide breast cancer mammography screening for women in certain age and risk groups. (Current law requires coverage of breast cancer mammography screening services under group insurance for public employees and group accident and sickness insurance policies issued in Indiana.)

Effective: July 1, 1998.

Miller

January 7, 1998, read first time and referred to Committee on Health and Environmental Affairs.

C
O
P
Y



Introduced

Second Regular Session 110th General Assembly (1998)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 1997 General Assembly.

SENATE BILL No. 294

A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 5-10-8-7.5 IS ADDED TO THE INDIANA CODE
2 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
3 1, 1998]: **Sec. 7.5. (a) As used in this section, "covered individual"**
4 **means an individual who is:**
5 (1) covered under a self-insurance program established under
6 section 7(b) of this chapter to provide group health coverage;
7 or
8 (2) entitled to services under a contract with a health
9 maintenance organization (as defined in IC 27-13-1-19) that
10 is entered into or renewed under section 7(c) of this chapter.
11 (b) As used in this section, "man at risk" means a man who:
12 (1) is African-American; or
13 (2) has a family history of prostate cancer.
14 (c) As used in this section, "prostate specific antigen test" means
15 a standard blood test performed to determine the level of prostate
16 specific antigen in the blood.
17 (d) A self-insurance program established under section 7(b) of



C
O
P
Y

1 this chapter to provide health care coverage must provide covered
2 individuals with coverage for prostate specific antigen testing.

3 (e) A contract with a health maintenance organization that is
4 entered into or renewed under section 7(c) of this chapter must
5 provide covered individuals with prostate specific antigen
6 screening.

7 (f) The coverage required under this section must include the
8 following:

9 (1) If the covered individual is at least forty (40) years of age
10 and is a man at risk, coverage for at least one (1) prostate
11 specific antigen test annually.

12 (2) If the covered individual is at least fifty (50) years of age
13 and a man, coverage for at least one (1) prostate specific
14 antigen test annually, regardless of whether the covered
15 individual is a man at risk.

16 (g) The coverage required under this section may not be subject
17 to dollar limits, deductibles, copayments, or coinsurance provisions
18 that are less favorable to covered individuals than the dollar limits,
19 deductibles, copayments, or coinsurance provisions applying to
20 physical illness generally under the self-insurance program or
21 contract with a health maintenance organization.

22 (h) The coverage for prostate specific antigen screening shall be
23 provided in addition to benefits specifically provided for x-rays,
24 laboratory testing, or wellness examinations.

25 SECTION 2. IC 27-8-14.7 IS ADDED TO THE INDIANA CODE
26 AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
27 JULY 1, 1998]:

28 **Chapter 14.7. Coverage for Services Related to Prostate Cancer**
29 **Screening**

30 **Sec. 1.** As used in this chapter, "accident and sickness insurance
31 policy" means an insurance policy that:

32 (1) provides at least one (1) of the types of insurance described
33 in IC 27-1-5-1, Classes 1(b) and 2(a); and

34 (2) is issued on a group basis.

35 **Sec. 2.** As used in this chapter, "insured" means an individual
36 who is entitled to coverage under a policy of accident and sickness
37 insurance.

38 **Sec. 3.** As used in this chapter, "man at risk" means a man who:

39 (1) is African-American; or

40 (2) has a family history of prostate cancer.

41 **Sec. 4.** As used in this chapter, "prostate specific antigen test"
42 means a standard blood test performed to determine the level of

C
O
P
Y



1 prostate specific antigen in the blood.

2 **Sec. 5. (a) An insurer shall offer to provide coverage for prostate**
 3 **specific antigen testing in any accident and sickness insurance**
 4 **policy that the insurer issues in Indiana.**

5 **(b) The coverage that an insurer must offer to provide under**
 6 **this chapter must include the following:**

7 **(1) If the insured is at least forty (40) years of age and is a**
 8 **man at risk, coverage for at least one (1) prostate specific**
 9 **antigen test annually.**

10 **(2) If the insured is at least fifty (50) years of age and a man,**
 11 **coverage for at least one (1) prostate specific antigen test**
 12 **annually, regardless of whether the insured is a man at risk.**

13 **(c) An insured may not be required to pay an annual deductible**
 14 **or coinsurance that is greater than an annual deductible or**
 15 **coinsurance established for similar benefits under the accident and**
 16 **sickness insurance policy. If the policy does not cover a similar**
 17 **benefit, the deductible or coinsurance may not be set at a level that**
 18 **materially diminishes the value of the prostate specific antigen**
 19 **testing benefit required by this chapter.**

20 **(d) The coverage that an insurer must offer to provide under**
 21 **this chapter may not be subject to dollar limits, deductibles, or**
 22 **coinsurance provisions that are less favorable to the insured than**
 23 **the dollar limits, deductibles, or coinsurance provisions applying**
 24 **to physical illness generally under the accident and sickness**
 25 **insurance policy.**

26 **(e) The coverage that an insurer must offer is in addition to**
 27 **benefits specifically provided for x-rays, laboratory testing, or**
 28 **wellness examinations.**

29 **SECTION 3. IC 27-13-7-15 IS ADDED TO THE INDIANA CODE**
 30 **AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY**
 31 **1, 1998]: Sec. 15. (a) As used in this section, "breast cancer**
 32 **screening mammography" means a standard, two (2) view per**
 33 **breast, low-dose radiographic examination of the breasts that is:**

34 **(1) furnished to an asymptomatic woman; and**

35 **(2) performed by a mammography services provider using**
 36 **equipment designed by the manufacturer for and dedicated**
 37 **specifically to mammography in order to detect unsuspected**
 38 **breast cancer.**

39 **The term includes the interpretation of the results of a breast**
 40 **cancer screening mammography by a physician.**

41 **(b) As used in this section, "mammography services provider"**
 42 **means a person or facility that:**



C
O
P
Y

- 1 (1) is accredited by the American College of Radiology;
 2 (2) meets equivalent guidelines established by the state
 3 department of health; or
 4 (3) is certified by the Federal Department of Health and
 5 Human Services for participation in the Medicare program
 6 (42 U.S.C. 1395 et seq.).

7 (c) As used in this section, "woman at risk" has the meaning set
 8 forth in IC 27-8-14-5.

9 (d) A health maintenance organization issued a certificate of
 10 authority in Indiana shall offer to provide coverage for breast
 11 cancer screening mammography.

12 (e) The coverage that a health maintenance organization must
 13 offer to provide under this section must include the following:

14 (1) If an enrollee is at least thirty-five (35) years of age but
 15 less than forty (40) years of age, coverage for at least one (1)
 16 baseline breast cancer screening mammography performed
 17 upon the enrollee before the enrollee becomes forty (40) years
 18 of age.

19 (2) If an enrollee is:

20 (A) at least forty (40) years of age but less than fifty (50)
 21 years of age; and

22 (B) not a woman at risk;

23 coverage for one (1) breast cancer screening mammography
 24 performed upon the enrollee in every two (2) year period.

25 (3) If an enrollee is:

26 (A) at least forty (40) years of age but less than fifty (50)
 27 years of age; and

28 (B) a woman at risk;

29 one (1) breast cancer screening mammography performed
 30 upon the enrollee every year.

31 (4) If the enrollee is at least fifty (50) years of age, one (1)
 32 breast cancer screening mammography performed upon the
 33 enrollee every year, regardless of whether the enrollee is a
 34 woman at risk.

35 (f) A health maintenance organization shall offer to provide
 36 breast cancer screening mammography as a covered service under
 37 a group contract with the health maintenance organization.

38 (g) The coverage that a health maintenance organization must
 39 offer under this section may not be subject to a contract provision
 40 that is less favorable to an enrollee than a contract provision
 41 applying to physical illness generally under the health maintenance
 42 organization contract.



C
O
P
Y

1 **(h) The coverage that a health maintenance organization must**
 2 **offer under this section is in addition to services specifically**
 3 **provided for x-rays, laboratory testing, or wellness examinations.**

4 SECTION 4. IC 27-13-7-16 IS ADDED TO THE INDIANA CODE
 5 AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY
 6 1, 1998]: **Sec. 16. (a) As used in this section, "man at risk" means**
 7 **a man who:**

- 8 **(1) is African-American; or**
 9 **(2) has a family history of prostate cancer.**

10 **(b) As used in this section, "prostate specific antigen test" means**
 11 **a standard blood test performed to determine the level of prostate**
 12 **specific antigen in the blood.**

13 **(c) A health maintenance organization issued a certificate of**
 14 **authority in Indiana shall offer to provide coverage for prostate**
 15 **specific antigen testing.**

16 **(d) The coverage that a health maintenance organization must**
 17 **offer to provide under this section must include the following:**

- 18 **(1) If the enrollee is at least forty (40) years of age and is a**
 19 **man at risk, coverage for at least one (1) prostate specific**
 20 **antigen test annually.**
 21 **(2) If the enrollee is at least fifty (50) years of age and a man,**
 22 **coverage for at least one (1) prostate specific antigen test**
 23 **annually, regardless of whether the enrollee is a man at risk.**

24 **(e) A health maintenance organization shall offer to provide**
 25 **prostate specific antigen testing as a covered service under a group**
 26 **contract with the health maintenance organization.**

27 **(f) The coverage that a health maintenance organization must**
 28 **offer to provide under this section may not be subject to a contract**
 29 **provision that is less favorable to an enrollee than a contract**
 30 **provision applying to physical illness generally under the health**
 31 **maintenance organization contract.**

32 **(g) The coverage that a health maintenance organization must**
 33 **offer under this section is in addition to services specifically**
 34 **provided for x-rays, laboratory testing, or wellness examinations.**

35 SECTION 5. [EFFECTIVE JULY 1, 1998] **(a) IC 5-10-8-7.5, as**
 36 **added by this act, applies to a self insurance program or a contract**
 37 **between the state and a health maintenance organization**
 38 **established, entered into, or renewed after June 30, 1998.**

39 **(b) IC 27-8-14.7, as added by this act, applies to accident and**
 40 **sickness insurance policies that are issued, delivered or renewed**
 41 **after June 30, 1998.**

42 **(c) IC 27-13-7-15 and IC 27-13-7-16, both as added by this act,**

C
O
P
Y



- 1 **apply to health maintenance organization contracts that are issued,**
- 2 **delivered, or renewed after June 30, 1998.**

C
o
p
y

