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SENATE BILL No. ____

DIGEST OF INTRODUCED BILL

Citations Affected: IC 5-10-8-7.9; IC 27-8-14.9; IC 27-13-7-14.1.

Synopsis: Bone density testing coverage. Requires bone density testing coverage under certain group health benefit plans.

Effective: July 1, 2005.

Antich-Carr

_____, read first time and referred to Committee on

Introduced

First Regular Session 114th General Assembly (2005)

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 2004 Regular Session of the General Assembly.

SENATE BILL

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

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

SECTION 1. IC 5-10-8-7.9 IS ADDED TO THE INDIANA CODE AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2005]: **Sec. 7.9. (a) As used in this section, "bone density testing" means a radiological or radioisotope procedure or other procedure that is approved by the federal Food and Drug Administration and performed for any of the following purposes:**

(1) Identifying bone mass.

(2) Detecting bone loss or disease.

(3) Determining bone quality.

(b) As used in this section, "covered individual" means a woman who is at least forty-five (45) years of age and who is:

(1) covered under a self-insurance program established under section 7(b) of this chapter to provide group health coverage; or

(2) entitled to services under a contract with a prepaid health care delivery plan described in section 7(c) of this chapter.

(c) A self-insurance program established under section 7(b) of

this chapter to provide group health coverage must provide a covered individual with coverage for bone density testing.

(d) A contract with a prepaid health care delivery plan described in section 7(c) of this chapter must provide a covered individual with bone density testing.

(e) The coverage required by subsection (c) and the services required by subsection (d) may not be subject to dollar limits, deductibles, copayments, or coinsurance provisions that are less favorable to a covered individual than the dollar limits, deductibles, copayments, or coinsurance provisions applying to physical illness generally under the self-insurance program or contract.

(f) The coverage required by subsection (c) and the services required by subsection (d) must be provided in addition to benefits specifically provided for x-rays, laboratory testing, or wellness examinations.

SECTION 2. IC 27-8-14.9 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2005]:

Chapter 14.9. Coverage for Bone Density Testing

Sec. 1. (a) As used in this chapter, "accident and sickness insurance policy" means an insurance policy that:

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

(2) is issued on a group basis.

(b) The term does not include accident only, credit, dental, vision, Medicare supplement, long term care, or disability income insurance.

Sec. 2. As used in this chapter, "bone density testing" means a radiological or radioisotope procedure or other procedure that is approved by the federal Food and Drug Administration and performed for any of the following purposes:

(1) Identifying bone mass.

(2) Detecting bone loss or disease.

(3) Determining bone quality.

Sec. 3. As used in this chapter, "insured" means a woman who is at least forty-five (45) years of age and who is entitled to coverage under an accident and sickness insurance policy.

Sec. 4. (a) An insurer shall provide an insured with coverage for bone density testing under any accident and sickness insurance policy that the insurer issues in Indiana or issues for delivery in Indiana.

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

(c) The coverage that an insurer must provide under this chapter is in addition to benefits specifically provided for x-rays, laboratory testing, or wellness examinations.

SECTION 3. IC 27-13-7-14.1 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2005]: Sec. 14.1. (a) As used in this section, "bone density testing" means a radiological or radioisotope procedure or other procedure that is approved by the federal Food and Drug Administration and performed for any of the following purposes:

(1) Identifying bone mass.

(2) Detecting bone loss or disease.

(3) Determining bone quality.

(b) A health maintenance organization that is issued a certificate of authority in Indiana shall provide bone density testing to a female enrollee who is at least forty-five (45) years of age as a covered service under a group contract that provides coverage for basic health care services.

(c) The coverage that a health maintenance organization must provide under this section may not be subject to a contract provision that is less favorable to an enrollee than a contract provision applying to physical illness generally under the health maintenance organization contract.

(d) The coverage that a health maintenance organization must provide under this section is in addition to benefits specifically provided for x-rays, laboratory testing, or wellness examinations.

SECTION 4. [EFFECTIVE JULY 1, 2005] (a) IC 5-10-8-7.9, as added by this act, applies to a self-insurance program or a contract with a prepaid health care delivery plan that is established, entered into, delivered, amended, or renewed after June 30, 2005.

(b) IC 27-8-14.9, as added by this act, applies to an accident and sickness insurance policy that is issued, delivered, amended, or renewed after June 30, 2005.

(c) IC 27-13-7-14.1, as added by this act, applies to a health maintenance organization contract that is entered into, delivered, amended, or renewed after June 30, 2005.