

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1991

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HOUSE BILL 347*

Short Title: Mammogram/Pap Smear Coverage.

(Public)

Sponsors: Representatives Barnes; Anderson, Barnhill, Beall, Black, Bowen, Bowie, Bowman, Brown, Chapin, Colton, J.W. Crawford, N.J. Crawford, Cunningham, Dawkins, DeVane, Diamont, Dickson, Easterling, Esposito, Ethridge, Fitch, Flaherty, Fletcher, Foster, Fussell, Gamble, Gardner, Gist, Gottovi, Gray, Green, Greenwood, Hackney, Hardaway, Hensley, Holt, Howard, Huffman, Jack Hunt, Judy Hunt, Sam Hunt, H. Hunter, R. Hunter, Hurley, James, Jarrell, Jeffus, Jeralds, Jones, Jordan, Kahl, Kennedy, Kerr, Lilley, Lineberry, Luebke, Lutz, McAllister, McLaughlin, McLawhorn, Mavretic, Mercer, Michaux, Miller, Nesbitt, Oldham, Payne, Privette, Ramsey, Redwine, Rhodes, Rogers, Russell, Stamey, Stewart, Thompson, Wainwright, Warner, Wicker, Wilmoth, Wilson, and Withrow.

Referred to: Human Resources.

March 27, 1991

A BILL TO BE ENTITLED

1 AN ACT TO REQUIRE MAMMOGRAM AND PAP SMEAR COVERAGE IN
2 HEALTH AND ACCIDENT INSURANCE POLICIES, IN HOSPITAL OR
3 MEDICAL SERVICES PLANS, IN HMO PLANS, AND IN THE STATE
4 EMPLOYEES COMPREHENSIVE MAJOR MEDICAL PLAN.
5

6 The General Assembly of North Carolina enacts:

7 Section 1. Chapter 58 of the General Statutes is amended by adding the
8 following new section to read:

9 "**§ 58-51-57. Coverage for mammograms and pap smears.**

10 (a) Every policy or contract of accident or health insurance, and every preferred
11 provider contract, policy, or plan as defined and regulated under G.S. 58-50-50 and G.S.
12 58-50-55, that is issued, renewed, or amended on or after January 1, 1992, shall provide
13 coverage for pap smears and for low-dose screening mammography. The same
14 deductibles, coinsurance, and other limitations as apply to other services covered under

1 the policy, contract, or plan may apply to coverage for pap smears and low-dose
2 screening mammography.

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

7 (c) Coverage for low-dose screening mammography shall be provided as
8 follows:

9 (1) One or more mammograms a year, as recommended by a physician,
10 for any woman who is determined to be at risk for breast cancer. For
11 purposes of this subdivision, a woman is at risk for breast cancer if any
12 one or more of the following is true:

13 a. The woman has a personal history of breast cancer;

14 b. The woman has a personal history of biopsy-proven benign
15 breast disease;

16 c. The woman's mother, sister, or daughter has or has had breast
17 cancer; or

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

19 (2) One baseline mammogram for any woman 35 through 39 years of age,
20 inclusive;

21 (3) A mammogram every other year for any woman 40 through 49 years
22 of age, inclusive, or more frequently upon recommendation of a
23 physician; and

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

25 (d) Reimbursement for a mammogram authorized under this section shall be
26 made only if the facility in which the mammogram was performed meets
27 mammography accreditation standards. Mammography accreditation standards shall be
28 those established by the North Carolina Medical Care Commission unless such
29 standards are not in effect, in which case standards established by the American College
30 of Radiology shall apply until Medical Care Commission standards become effective.

31 (e) Coverage for pap smears shall be provided for pap smears obtained once a
32 year, or more frequently if recommended by a physician."

33 Sec. 2. Chapter 58 of the General Statutes is amended by adding the
34 following new section to read:

35 **"§ 58-65-92. Coverage for mammograms and pap smears.**

36 (a) Every insurance certificate or subscriber contract under any hospital service
37 plan or medical service plan governed by this Article and Article 66 of this Chapter, and
38 every preferred provider contract, policy, or plan as defined and regulated under G.S.
39 58-50-50 and G.S. 58-50-55, that is issued, renewed, or amended on or after January 1,
40 1992, shall provide coverage for pap smears and for low-dose screening mammography.
41 The same deductibles, coinsurance, and other limitations as apply to other services
42 covered under the certificate or contract may apply to coverage for pap smears and low-
43 dose screening mammography.

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

5 (c) Coverage for low-dose screening mammography shall be provided as
6 follows:

7 (1) One or more mammograms a year, as recommended by a physician,
8 for any woman who is determined to be at risk for breast cancer. For
9 purposes of this subdivision, a woman is at risk for breast cancer if any
10 one or more of the following is true:

11 a. The woman has a personal history of breast cancer;

12 b. The woman has a personal history of biopsy-proven benign
13 breast disease;

14 c. The woman's mother, sister, or daughter has or has had breast
15 cancer; or

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

17 (2) One baseline mammogram for any woman 35 through 39 years of age,
18 inclusive;

19 (3) A mammogram every other year for any woman 40 through 49 years
20 of age, inclusive, or more frequently upon recommendation of a
21 physician; and

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

23 (d) Reimbursement for mammograms authorized under this section shall be made
24 only if the facility in which the mammogram was performed meets mammography
25 accreditation standards. Mammography accreditation standards shall be those
26 established by the North Carolina Medical Care Commission unless such standards are
27 not in effect, in which case standards established by the American College of Radiology
28 shall apply until Medical Care Commission standards become effective.

29 (e) Coverage for pap smears shall be provided for pap smears obtained once a
30 year, or more frequently if recommended by a physician."

31 Sec. 3. Chapter 58 of the General Statutes is amended by adding the
32 following new section to read:

33 **"§ 58-67-76. Coverage for mammograms and pap smears.**

34 (a) Every health care plan written by a health maintenance organization and in
35 force, issued, renewed, or amended on or after January 1, 1992, that is subject to this
36 Article, shall provide coverage for pap smears and for low-dose screening
37 mammography. The same deductibles, coinsurance, and other limitations as apply to
38 other services covered under the plan may apply to coverage for pap smears and low-
39 dose screening mammography.

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

1 (c) Coverage for low-dose screening mammography shall be provided as
2 follows:

3 (1) One or more mammograms a year, as recommended by a physician,
4 for any woman who is determined to be at risk for breast cancer. For
5 purposes of this subdivision, a woman is at risk for breast cancer if any
6 one or more of the following is true:

7 a. The woman has a personal history of breast cancer;

8 b. The woman has a personal history of biopsy-proven benign
9 breast disease;

10 c. The woman's mother, sister, or daughter has or has had breast
11 cancer; or

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

13 (2) One baseline mammogram for any woman 35 through 39 years of age,
14 inclusive;

15 (3) A mammogram every other year for any woman 40 through 49 years
16 of age, inclusive, or more frequently upon recommendation of a
17 physician; and

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

19 (d) Reimbursement for mammograms authorized under this section shall be made
20 only if the facility in which the mammogram was performed meets mammography
21 accreditation standards. Mammography accreditation standards shall be those
22 established by the North Carolina Medical Care Commission unless such standards are
23 not in effect, in which case standards established by the American College of Radiology
24 shall apply until Medical Care Commission standards become effective.

25 (e) Coverage for pap smears shall be provided for pap smears obtained once a
26 year, or more frequently if recommended by a physician."

27 Sec. 4. Effective January 1, 1992, G.S. 135-40.6(4) reads as rewritten:

28 "(4) Outpatient Benefits. – The Plan pays for services rendered in the
29 outpatient department of a hospital, in a doctor's office, in an
30 ambulatory surgical facility, or elsewhere as determined by the
31 Executive Administrator, as follows:

32 a. Accidental injury: All covered services. Dental services are
33 excluded except for oral surgery specifically listed in subsection
34 (5)c of this section.

35 b. Operative procedures.

36 c. All hospital services for radiation therapy, treatment by use of
37 x-rays, radium, cobalt and other radioactive substances.

38 d. Pathological examinations of tissue removed by resection or
39 biopsy. ~~Routine Pap smears are not covered.~~

40 e. Charges for diagnostic x-rays, clinical laboratory tests, and
41 other diagnostic tests and procedures such as
42 electrocardiograms and electroencephalograms.

- 1 f. Low-dose screening mammography as defined in G.S. 58-51-
 2 57(b), and pap smears. Coverage for low-dose screening
 3 mammography and for pap smears shall be as follows:
- 4 1. One or more mammograms a year, as recommended by a
 5 physician, for any woman who is determined to be at risk
 6 for breast cancer. For purposes of this sub-subdivision, a
 7 woman is at risk for breast cancer if any one or more of
 8 the following is true:
 - 9 I. The woman has a personal history of breast
 10 cancer;
 - 11 II. The woman has a personal history of biopsy-
 12 proven benign breast disease;
 - 13 III. The woman's mother, sister, or daughter has or
 14 has had breast cancer; or
 - 15 IV. The woman has not given birth prior to the age of
 16 30;
 - 17 2. One baseline mammogram for any woman 35 through 39
 18 years of age, inclusive;
 - 19 3. A mammogram every other year for any woman 40
 20 through 49 years of age, inclusive, or more frequently
 21 upon recommendation of a physician; and
 - 22 4. A mammogram every year for any woman 50 years of
 23 age or older.
 - 24 5. Reimbursement for a mammogram authorized under this
 25 sub-subdivision shall be made only if the facility in
 26 which the mammogram was performed meets
 27 mammography accreditation standards. Mammography
 28 accreditation standards shall be those established by the
 29 North Carolina Medical Care Commission unless such
 30 standards are not in effect, in which case standards
 31 established by the American College of Radiology shall
 32 apply until Medical Care Commission standards become
 33 effective.
 - 34 6. Coverage for pap smears shall be provided for pap
 35 smears obtained once a year, or more frequently if
 36 recommended by a physician.

37 Except as provided in sub-subdivision f. of this subdivision, no ~~No~~-benefits are
 38 provided for screening examinations and routine physical examinations to assess
 39 general health status in the absence of specific symptoms of active illness, routine office
 40 visits or for doctor's services for diagnostic procedures covered under surgical benefits."

41 Sec. 5. G.S. 143B-165 is amended by adding the following new subdivision
 42 to read:

43 "(12) The Commission shall adopt rules and standards, including
 44 temporary rules pursuant to G.S. 150B-13, providing for the

1 accreditation of facilities that perform mammography procedures.
2 Accreditation standards shall address, but are not limited to, the
3 quality of mammography equipment used and the skill levels and
4 other qualifications of personnel who administer mammographies
5 and personnel who interpret mammogram results. The Commission's
6 standards shall be no less stringent than those adopted by the
7 American College of Radiology."

8 Sec. 6. This act is effective upon ratification.