

SENATE BILL No. 409

By Committee on Financial Institutions and Insurance

1-28

1 AN ACT concerning insurance; relating to health insurance coverage;
2 requiring that a no cost-sharing requirement be imposed on insureds for
3 diagnostic and supplemental breast examinations for breast cancer.
4

5 *Be it enacted by the Legislature of the State of Kansas:*

6 Section 1. (a) As used in this section:

7 (1) "Cost sharing" means a deductible, coinsurance, copayment and
8 any maximum limitation on the application of such a deductible,
9 coinsurance, copayment or similar out-of-pocket expense.

10 (2) "Diagnostic breast examination" means, in accordance with
11 national comprehensive cancer network guidelines, an examination of the
12 breast using contrast-enhanced mammography, diagnostic mammography,
13 breast magnetic resonance imaging, breast ultrasound, digital breast
14 tomosynthesis, molecular breast imaging or other equipment dedicated
15 specifically for mammography conducted to evaluate an abnormality that
16 was detected or suspected:

17 (A) In a screening examination for breast cancer; or
18 (B) by another means of examination.

19 (3) "HSA-qualified health insurance policy" means a policy of
20 individual or group health insurance coverage that satisfies the criteria for
21 a high-deductible health plan under 26 U.S.C. § 223 and any regulations or
22 guidance promulgated thereunder.

23 (4) "Supplemental breast examination" means an examination of the
24 breast using contrast-enhanced mammography, diagnostic mammography,
25 breast magnetic resonance imaging, breast ultrasound, digital breast
26 tomosynthesis, molecular breast imaging or other equipment dedicated
27 specifically for mammography conducted based on:

28 (A) The insured's personal or family medical history of breast cancer;
29 or

30 (B) other factors that may increase the insured's risk of breast cancer,
31 including heterogeneous or extremely dense breasts.

32 (b) Every individual or group health insurance policy, medical service
33 plan, contract, hospital service corporation contract, hospital and medical
34 service corporation contract, fraternal benefit society or health
35 maintenance organization that provides coverage for accident and health
36 services that is delivered, issued for delivery, amended or renewed on or

1 after January 1, 2027, and provides benefits with respect to diagnostic
2 breast examinations and supplemental breast examinations shall impose no
3 cost-sharing requirements for diagnostic or supplemental breast
4 examinations when furnished to an individual enrolled in such plan or
5 coverage.

6 (c) (1) Except as provided in paragraph (2), an HSA-qualified health
7 insurance policy shall be exempt from any prohibition on cost-sharing
8 requirements for a covered benefit required under any general or special
9 law to the extent that the exemption is necessary to allow the policy to be
10 an HSA-qualified health insurance policy.

11 (2) The exemption provided in paragraph (1) shall not apply to any
12 coverage required under any general or special law pertaining to
13 preventive care, as described in 26 U.S.C. § 223, with respect to any HSA-
14 qualified health insurance policy issued, delivered, amended or renewed
15 while such regulation or guidance is effective.

16 (d) The provisions of K.S.A. 40-2248 and 40-2249a, and amendments
17 thereto, shall not apply to this section.

18 Sec. 2. This act shall take effect and be in force from and after its
19 publication in the statute book.