SENATE DOCKET, NO. 843 FILED ON: 1/17/2013

SENATE . . . . . No. 415

The Commonwealth of Massachusetts

PRESENTED BY:

Stephen M. Brewer

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying:

An Act ensuring access to life-saving colorectal cancer and breast cancer screenings.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Stephen M. Brewer	*Worcester, Hampden, Hampshire and Middlesex*
Gloria L. Fox	*7th Suffolk*
Martha M. Walz	*8th Suffolk*
Denise Andrews	*2nd Franklin*
Todd M. Smola	*1st Hampden*
Barry R. Finegold	*Second Essex and Middlesex*
Karen E. Spilka	*Second Middlesex and Norfolk*
Jonathan D. Zlotnik	*2nd Worcester*
Michael R. Knapik	*Second Hampden and Hampshire*

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By Mr. Brewer, a petition (accompanied by bill, Senate, No. 415) of Stephen M. Brewer, Gloria L. Fox, Martha M. Walz, Denise Andrews and other members of the General Court for legislation to ensure access to life-saving colorectal cancer and breast cancer screenings. Financial Services.

The Commonwealth of Massachusetts

An Act ensuring access to life-saving colorectal cancer and breast cancer screenings.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. Chapter 175 of the General Laws is hereby amended by inserting after section 110M the following section:-

Section 110N. Any policy, contract, agreement, plan or certificate of insurance issued, delivered or renewed within the commonwealth which provides coverage for colorectal cancer screenings or breast cancer screenings shall not impose (1) A deductible for a procedure that a physician initially undertakes as a screening colonoscopy or a screening sigmoidoscopy or a screening mammogram; or (2) A coinsurance, copayment, deductible or other out-of-pocket expense for any additional colonoscopy, sigmoidoscopy or mammogram ordered in a policy year by a physician for an insured.

SECTION 2. Chapter 176A of the General Laws is hereby amended by inserting after section 8AA the following section:-

Section 8BB. Any contract between a subscriber and the corporation under an individual or group hospital service plan delivered or issued or renewed within the commonwealth which provides coverage for colorectal cancer screenings or breast cancer screenings shall not impose (1) A deductible for a procedure that a physician initially undertakes as a screening colonoscopy or a screening sigmoidoscopy or a screening mammogram; or (2) A coinsurance, copayment, deductible or other out-of-pocket expense for any additional colonoscopy, sigmoidoscopy or mammogram ordered in a policy year by a physician for an insured.

SECTION 3. Chapter 176B of the General Laws is hereby amended by inserting after section 4AA the following section:-

Section 4BB. Any subscription certificate under an individual or group medical service agreement delivered, issued or renewed within the commonwealth which provides coverage for

23 colorectal cancer screenings or breast cancer screenings shall not impose (1) A deductible for a
24 procedure that a physician initially undertakes as a screening colonoscopy or a screening
25 sigmoidoscopy or a screening mammogram; or (2) A coinsurance, copayment, deductible or
26 other out-of-pocket expense for any additional colonoscopy, sigmoidoscopy or mammogram
27 ordered in a policy year by a physician for an insured.

28 SECTION 4. Chapter 176G of the General Laws is hereby amended by inserting after
29 section 4S the following section:-

30 Section 4T. Any individual or group health maintenance contract which provides
31 coverage for colorectal cancer screenings or breast cancer screenings shall not impose (1) A
32 deductible for a procedure that a physician initially undertakes as a screening colonoscopy or a
33 screening sigmoidoscopy or a screening mammogram; or (2) A coinsurance, copayment,
34 deductible or other out-of-pocket expense for any additional colonoscopy, sigmoidoscopy or
35 mammogram ordered in a policy year by a physician for an insured.

36 SECTION 5. Chapter 32A of the General Laws is hereby amended by inserting after
37 section 23 the following section:-

38 Section 24. Any coverage offered by the commission to any active or retired employee of
39 the commonwealth who is insured under the group insurance commission which provides
40 coverage for colorectal cancer screenings or breast cancer screenings shall not impose (1) A
41 deductible for a procedure that a physician initially undertakes as a screening colonoscopy or a
42 screening sigmoidoscopy or a screening mammogram; or (2) A coinsurance, copayment,
43 deductible or other out-of-pocket expense for any additional colonoscopy, sigmoidoscopy or
44 mammogram ordered in a policy year by a physician for an insured.