
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1944 Session of
2024

INTRODUCED BY CURRY, McNEILL, DONAHUE, FREEMAN, HANBIDGE, KHAN,
HILL-EVANS, SANCHEZ, CEPEDA-FREYTIZ, PROBST, GIRAL,
SCHLOSSBERG, CIRESI, BOROWSKI, MUNROE, MALAGARI, PARKER,
BULLOCK, WEBSTER, McCLINTON, DALEY, FIEDLER, GREEN AND
O'MARA, JANUARY 9, 2024

REFERRED TO COMMITTEE ON INSURANCE, JANUARY 9, 2024

AN ACT

1 Amending the act of May 17, 1921 (P.L.682, No.284), entitled "An
2 act relating to insurance; amending, revising, and
3 consolidating the law providing for the incorporation of
4 insurance companies, and the regulation, supervision, and
5 protection of home and foreign insurance companies, Lloyds
6 associations, reciprocal and inter-insurance exchanges, and
7 fire insurance rating bureaus, and the regulation and
8 supervision of insurance carried by such companies,
9 associations, and exchanges, including insurance carried by
10 the State Workmen's Insurance Fund; providing penalties; and
11 repealing existing laws," in casualty insurance, further
12 providing for coverage for mammographic examinations and
13 breast imaging.

14 The General Assembly of the Commonwealth of Pennsylvania
15 hereby enacts as follows:

16 Section 1. Section 632(b) and (d) of the act of May 17, 1921
17 (P.L.682, No.284), known as The Insurance Company Law of 1921,
18 amended or added May 1, 2023 (P.L.1, No.1), are amended to read:

19 Section 632. Coverage for Mammographic Examinations and
20 Breast Imaging.--* * *

21 (b) A group or individual health or sickness or accident
22 insurance policy providing hospital or medical/surgical coverage

1 and a group or individual subscriber contract or certificate
2 issued by any entity subject to Article XXIV, 40 Pa.C.S. Ch. 61
3 or 63, this act, the ["Health Maintenance Organization Act,"
4 the "Fraternal Benefit Society Code"] "Health Maintenance
5 Organization Act" or an employe welfare benefit plan as defined
6 in section 3 of the Employee Retirement Income Security Act of
7 1974 providing hospital or medical/surgical coverage shall also
8 provide coverage for breast imaging. The minimum coverage
9 required shall include all costs associated with [one]
10 diagnostic breast examinations that are used to evaluate a seen
11 or suspected abnormality from a screening examination for breast
12 cancer or used to evaluate an abnormality detected by another
13 means of examination. The minimum coverage shall also include
14 all costs associated with supplemental breast [screening every
15 year] screenings because the woman is believed to be at an
16 increased risk of breast cancer due to:
17 (1) personal history of atypical breast histologies;
18 (2) personal history or family history of breast cancer;
19 (3) genetic predisposition for breast cancer;
20 (4) prior therapeutic thoracic radiation therapy;
21 (5) heterogeneously dense breast tissue based on breast
22 composition categories with any one of the following risk
23 factors:
24 (i) lifetime risk of breast cancer of greater than 20%,
25 according to risk assessment tools based on family history;
26 (ii) personal history of BRCA1 or BRCA2 gene mutations;
27 (iii) first-degree relative with a BRCA1 or BRCA2 gene
28 mutation but not having had genetic testing herself;
29 (iv) prior therapeutic thoracic radiation therapy between 10
30 and 30 years of age; or

1 (v) personal history of Li-Fraumeni syndrome, Cowden
2 syndrome or Bannayan-Riley-Ruvalcaba syndrome or a first-degree
3 relative with one of these syndromes; or

4 (6) extremely dense breast tissue based on breast
5 composition categories.

6 Nothing in this subsection shall be construed as to preclude
7 utilization review as provided under Article XXI of this act or
8 to prevent the application of deductible, copayment or
9 coinsurance provisions contained in the policy or plan for
10 breast imaging in excess of the minimum coverage required.

11 * * *

12 (d) As used in this section:

13 "Diagnostic breast examination" means a medically necessary
14 and clinically appropriate examination of the breast using
15 diagnostic mammography, breast magnetic resonance imaging or
16 breast ultrasound when there is an abnormality seen or
17 suspected.

18 "Supplemental breast screening" means a medically necessary
19 and clinically appropriate examination of the breast using
20 either standard or abbreviated magnetic resonance imaging or, if
21 such imaging is not possible, ultrasound if recommended by the
22 treating physician to screen for breast cancer when there is no
23 abnormality seen or suspected in the breast.

24 Section 2. This act shall take effect in 60 days.