S.B. 121 132nd General Assembly (As Introduced)

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BILL SUMMARY

• Requires health plan issuers to cover tomosynthesis as a part of breast cancer screenings.

CONTENT AND OPERATION

The bill requires health plan issuers to cover tomosynthesis as a part of breast cancer screening benefits. Current law requires "screening mammography" to be covered by health plan issuers. The bill explicitly includes tomosynthesis in the definition of screening mammography. The bill applies to health insuring corporations and sickness and accident insurers.¹ The bill does not apply to multiple employer welfare arrangements or public employee benefit plans.

Tomosynthesis is an x-ray technique, similar to a mammogram, that is used in the early detection of breast cancer. However, unlike a mammogram, which relies on two x-rays, one front facing and one top down, tomosynthesis uses 11, taken in an arc around the breast. This allows a composite, three-dimensional image to be formed.²

The current law definition of "screening mammography" states that it "includes two views for each breast." As this appears to be a minimum number of views that are required to be covered, this portion of the definition does not appear to conflict with the addition of tomosynthesis, which requires 11 views, to the definition of screening mammography.

¹ R.C. 1751.62(A)(1), 3923.52(A), and 3923.54(A)(1).

² http://www.Breastcancer.org/symptoms/testing/types/dig_tomosynth, accessed September 14, 2017.

HISTORY

ACTION DATE

03-30-17 Introduced

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