

House File 727 - Introduced

HOUSE FILE 727

BY BROWN-POWERS and A. MEYER

A BILL FOR

1 An Act relating to health insurance coverage for certain
2 post-mastectomy related issues, and including applicability
3 provisions.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. NEW SECTION. 514C.36 **Mastectomies.**

2 1. As used in this section, unless the context otherwise
3 requires:

4 a. "*Cost sharing*" means any coverage limit, copayment,
5 coinsurance, deductible, or other out-of-pocket expense
6 obligation imposed on a covered person by a policy, contract,
7 or plan providing for third-party payment or prepayment of
8 health or medical expenses.

9 b. "*Covered person*" means a policyholder, subscriber, or
10 other person participating in a policy, contract, or plan that
11 provides for third-party payment or prepayment of health or
12 medical expenses.

13 c. "*Health care professional*" means the same as defined in
14 section 514J.102.

15 d. "*Mastectomy*" means the removal of all or part of a breast
16 for a medically necessary reason as determined by a covered
17 person's health care professional.

18 2. Notwithstanding the uniformity of treatment requirements
19 of section 514C.6, a policy, contract, or plan providing
20 for third-party payment or prepayment of health or medical
21 expenses, and that provides coverage for mastectomies, shall
22 provide coverage for all of the following:

23 a. Physical complications caused by a mastectomy, including
24 lymphedema.

25 b. Prosthetic devices.

26 c. A custom fabricated breast prosthesis for each breast on
27 which a mastectomy has been performed.

28 d. One additional breast prosthesis for each breast affected
29 by a mastectomy.

30 e. Reconstructive surgery incident to a mastectomy, in
31 the manner determined by the covered person and the covered
32 person's health care professional to be appropriate, including
33 all of the following:

34 (1) All stages of reconstruction of the breast on which the
35 mastectomy has been performed.

1 (2) Surgery and reconstruction of the breast on which the
2 mastectomy was not performed to produce symmetry with the
3 breast on which the mastectomy was performed.

4 3. Coverage shall not be subject to cost sharing that is
5 greater than the cost sharing that a policy, contract, or plan
6 imposes for a mastectomy under the policy, contract, or plan.

7 4. *a.* This section shall apply to the following classes of
8 third-party payment provider contracts, policies, or plans:

9 (1) Individual or group accident and sickness insurance
10 providing coverage on an expense-incurred basis.

11 (2) An individual or group hospital or medical service
12 contract issued pursuant to chapter 509, 514, or 514A.

13 (3) An individual or group health maintenance organization
14 contract regulated under chapter 514B.

15 (4) A plan established for public employees pursuant to
16 chapter 509A.

17 *b.* This section shall not apply to accident-only, specified
18 disease, short-term hospital or medical, hospital confinement
19 indemnity, credit, dental, vision, Medicare supplement,
20 long-term care, basic hospital and medical-surgical expense
21 coverage as defined by the commissioner of insurance,
22 disability income insurance coverage, coverage issued as a
23 supplement to liability insurance, workers' compensation or
24 similar insurance, or automobile medical payment insurance.

25 5. The commissioner of insurance shall adopt rules pursuant
26 to chapter 17A to administer this section.

27 Sec. 2. APPLICABILITY. This Act applies to third-party
28 payment provider contracts, policies, or plans delivered,
29 issued for delivery, continued, or renewed in this state on or
30 after January 1, 2022.

31 EXPLANATION

32 The inclusion of this explanation does not constitute agreement with
33 the explanation's substance by the members of the general assembly.

34 This bill relates to health insurance coverage for certain
35 post-mastectomy related issues.

1 The bill defines "mastectomy" as the removal of all or part
2 of a breast for a medically necessary reason as determined by a
3 covered person's health care professional.

4 The bill requires a health carrier that offers individual,
5 group, or small group contracts, policies, or plans (plans) in
6 this state that provide for third-party payment or prepayment
7 of health or medical expenses, and that provide coverage for
8 mastectomies, to provide coverage for physical complications
9 caused by a mastectomy, including lymphedema; prosthetic
10 devices; a custom fabricated breast prosthesis for each breast
11 on which a mastectomy has been performed; one additional breast
12 prosthesis for each breast affected by a mastectomy; all stages
13 of reconstruction of the breast on which the mastectomy has
14 been performed; and surgery and reconstruction of the breast on
15 which the mastectomy was not performed to produce symmetry with
16 the other breast.

17 The coverage cannot be subject to cost sharing that is
18 greater than the cost sharing that a plan imposes for a
19 mastectomy under the plan.

20 The bill applies to the third-party payment providers
21 enumerated in the bill. The bill specifies the types of
22 specialized health-related insurance which are not subject to
23 the coverage requirements of the bill.

24 The commissioner of insurance must adopt rules to administer
25 the requirements of the bill.

26 The bill applies to third-party payment provider plans
27 delivered, issued for delivery, continued, or renewed in this
28 state on or after January 1, 2022.