AN ACT relating to providing breast density information and evidence-based breast
cancer screening.

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

SECTION 1. A NEW SECTION OF KRS 214.550 TO 214.556 IS CREATED
TO READ AS FOLLOWS:

(1) Physicians are encouraged to recommend digital mammography including breast
tomosynthesis when writing orders for mammograms. The term "breast
tomosynthesis" means a radiologic procedure that involves the acquisition of
projection images over the stationary breast to produce cross-sectional digital
three-dimensional images of the breast.

(2) If a patient's x-ray mammogram demonstrates dense breast tissue, a person who
provided the x-ray mammography services in the Commonwealth shall provide
notification to the patient that includes but is not limited to the following
information in the summary of the written report of the results sent directly to a
patient:

"Your x-ray mammogram shows that your breast tissue is dense. Dense breast
tissue is common among women and is not abnormal. However, women with
dense breast tissue may have a slightly increased risk for developing breast
cancer. Dense breast tissue may also make it more difficult to detect an early
breast cancer on your x-ray mammogram. At this time, there are no specific
recommendations for additional screening or other measures related to having
dense breast tissue. However, you may want to talk to your doctor about other
ways that you might be able to reduce your risk of breast cancer. A report of your
results was sent to your ordering physician. If you are self-referred, a report of
your results was sent to you in addition to this summary."

(3) As used in this section, "dense breast tissue" means heterogeneously or
extremely dense breast tissue as defined in nationally recognized guidelines or
systems for breast imaging reporting of mammography screening, including but not limited to the breast imaging reporting and data system established by the American College of Radiology. If, after the effective date of this Act, new terms are defined in revised guidelines or systems for breast imaging reporting of mammography screening and the Department for Public Health determines that those new terms are more appropriate for the purposes of the information required to be provided under this section, the Department for Public Health may update the definition of dense breast tissue under this subsection to use those new terms by administrative regulation.

(4) Recognizing the continuous improvements in patient outcomes that are reflective of ongoing advances in evidence-based medical practices, expansive and emerging medical research, and evolving innovations in medical technology, subsection (2) of this section shall be in effect until January 1, 2021, unless the General Assembly takes action to extend this expiration date.

Section 2. KRS 304.17-316 is amended to read as follows:

(1) The term "mammogram" shall mean an x-ray examination of the breast using equipment dedicated specifically for mammography, including, but not limited to, the x-ray tube, filter, compression device, screens, film, and cassettes, with two (2) views of each breast and with an average radiation exposure at the current recommended level as set forth in guidelines of the American College of Radiology, and digital mammography including breast tomosynthesis. The term "breast tomosynthesis" means a radiologic procedure that involves the acquisition of projection images over the stationary breast to produce cross-sectional digital three-dimensional images of the breast.

(2) (a) All insurers issuing individual health insurance policies in this Commonwealth that provide coverage on an expense-incurred basis for surgical services for a mastectomy and that are delivered, issued for delivery,
amended, or renewed on or after October 15, 1990, shall also provide coverage for low-dose mammography screening for persons who have no sign or symptom of breast cancer and when performed on dedicated equipment which meets the guidelines established by the American College of Radiology and upon self-referral or on referral by a health care practitioner acting within the scope of the practitioner's licensure. The coverage shall make available one (1) screening mammogram to persons age thirty-five (35) through thirty-nine (39); one (1) mammogram every two (2) years for persons ages forty (40) through forty-nine (49); and one (1) mammogram per year for a person fifty (50) years of age and over and may be limited to a benefit of fifty dollars ($50) per screening mammogram. Any deductibles and coinsurance factors shall be no less favorable than for coverage for physical illness generally.

(b) All insurers issuing individual health insurance policies in this Commonwealth that provide coverage on an expense-incurred basis for surgical services for a mastectomy and that are delivered, issued for delivery, amended, or renewed on or after July 14, 2000, shall also provide coverage for mammograms, performed on dedicated equipment that meets the guidelines established by the American College of Radiology, for any covered person, regardless of age, who has been diagnosed with breast disease upon referral by a health care practitioner acting within the scope of the practitioner's licensure. The coverage provided under this paragraph shall be subject to the same annual deductibles or coinsurance established for other coverages within the policy.

(3) The mammogram shall be performed by a Kentucky State Certified General Certificate Radiographer or an American Registry of Radiologic Technology Registered Radiographer, interpreted by a qualified radiologist, and performed under the direction of a person licensed to practice medicine and certified by the
American Board of Radiology. *The facility performing the examination and the health care practitioner who ordered it shall follow federal laws relating to the notification of mammography exam results and maintaining medical records* [Two (2) copies of the mammogram report shall be sent to the health care practitioner who ordered it, one (1) copy of which shall be given to the patient. In case of self-referral, one (1) copy of the mammogram report shall be given to the patient upon request. The mammography film shall be retained by the facility performing the examination in accordance with guidelines of the American College of Radiology].

(4) Effective July 15, 1990, any facility in which mammograms are performed for reimbursement under this section, KRS 304.18-098, 304.32-1591, or 304.38-1935 shall meet current criteria of the American College of Radiology Mammography Accreditation Program.