A BILL TO BE ENTITLED
AN ACT

To amend Chapter 24 of Title 33 of the Official Code of Georgia Annotated, relating to insurance generally, so as to provide that diagnostic examinations for breast cancer shall not be treated less favorably than screening examinations for breast cancer with respect to cost-sharing requirements and treatment limitations; to provide for definitions; to provide for applicability; to provide for related matters; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

SECTION 1.

Chapter 24 of Title 33 of the Official Code of Georgia Annotated, relating to insurance generally, is amended by adding a new Code section to read as follows:

"33-24-59.30.
(a) As used in this Code section, the term:
(1) 'Cost-sharing requirement' means a deductible, coinsurance, or copayment and any maximum limitation on the application of such a deductible, coinsurance, copayment, or similar out-of-pocket expense."
(2) 'Covered person' means an enrollee or eligible dependent thereof covered under a health benefit policy.

(3) 'Diagnostic examination for breast cancer' means the use of mammography, magnetic resonance imaging, or ultrasound as deemed medically necessary and appropriate by a licensed health care professional to evaluate an abnormality in the breast that is:

(A) Seen or suspected from a screening examination for breast cancer;

(B) Detected by another means of examination; or

(C) Suspected based on the personal medical history, family medical history, or high breast density of the individual.

(4) 'Health benefit policy' means any individual or group plan, policy, or contract for health care services issued, delivered, issued for delivery, executed, or renewed by an insurer in this state.

(5) 'Insurer' means any person, corporation, or other entity authorized to provide health benefit policies under this title.

(6) 'Screening examination for breast cancer' means the use of mammography, magnetic resonance imaging, or ultrasound to detect an abnormality in the breast.

(b) A health benefit policy that provides coverage for screening examinations for breast cancer shall include provisions that ensure that a covered individual shall be subject to cost-sharing requirements and treatment limitations for diagnostic examinations for breast cancer that are no less favorable than the cost-sharing requirements and treatment limitations applicable to screening examinations for breast cancer.

(c) This Code section shall apply to all health benefit policies issued, delivered, or renewed on or after January 1, 2022.”

SECTION 2.

All laws and parts of laws in conflict with this Act are repealed.

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