



**152nd GENERAL ASSEMBLY
REVISED FISCAL NOTE**

BILL: HOUSE BILL NO. 60
SPONSOR: Representative Romer
DESCRIPTION: AN ACT TO AMEND TITLES 18, 29, AND 31 RELATING TO BREAST CANCER SCREENING AND DIAGNOSTIC PROCEDURES.

Assumptions:

1. This Act becomes effective sixty days after signature by the Governor. The provisions of the Act are effective for all coverage and contracts initiated or renewed after January 1, 2024.
2. This Act requires that all health insurance policies issued or renewed include coverage of supplemental and diagnostic breast examinations. The cost-sharing requirements between the insurer and the insured mandated by this Act for these procedures are to be no less favorable than those applicable to screening mammography for breast cancer.
3. Based on information from the State Employee Group Health Insurance Plan's (GHIP) administrators, the annual fiscal impact to the GHIP is estimated to be \$275,317. Because GHIP contracts renew annually on July 1, the requirements of this Act would not become effective for the GHIP until Fiscal Year 2025.
4. The Division of Public Health estimates the annual fiscal impact to the Screening for Life (SFL) program to be \$72,860. This estimate is based on the Division's assumption that one-half of the 302 clients that received a mammogram through the SFL program in calendar year 2022 would receive an MRI.
5. The Division of Medicaid and Medical Assistance (DMMA) reported 20,039 mammograms were performed through the Medicaid program in Fiscal Year 2022. Of this number, 302 received an MRI. The Division estimates that approximately 5,000 clients would receive an MRI which would result in an annual fiscal impact of \$362,076.
6. Annual medical inflation for future fiscal years is estimated at five percent.
7. To the extent that the provisions of this Act may be interpreted to constitute an essential health benefit (EHB) on Affordable Care Act (ACA) plans, there may be additional fiscal impacts to the State. Under ACA provisions (45 CFR 155.170), any benefit mandate enacted by the State beyond what is considered an EHB is subject to State defrayal of the estimated associated costs to the ACA plans.

Cost:

	<u>GHIP</u>	<u>SFL</u>	<u>DMMA</u>	<u>Total</u>
Fiscal Year 2024:	\$ 0	\$36,430	\$181,038	\$217,468
Fiscal Year 2025:	\$275,317	\$76,503	\$380,180	\$732,000
Fiscal Year 2026:	\$289,083	\$80,328	\$399,189	\$768,600

Prepared by Robert Scoglietti
Office of the Controller General