

Stricken language would be deleted from and underlined language would be added to the law as it existed prior to this session of the General Assembly.

1 State of Arkansas
2 84th General Assembly
3 Regular Session, 2003

A Bill

SENATE BILL 31

4
5 By: Senator Whitaker

For An Act To Be Entitled

9 TO CREATE THE BREAST CANCER AND PROSTATE CANCER
10 EARLY DETECTION PROGRAM ACT; AND FOR OTHER
11 PURPOSES.

Subtitle

14 TO CREATE THE BREAST CANCER AND PROSTATE
15 CANCER EARLY DETECTION PROGRAM ACT.

16
17
18 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

19
20 SECTION 1. This act shall be known and may be cited as the "Breast
21 Cancer and Prostate Cancer Early Detection Program Act".

22
23 SECTION 2. (a) All individual and group health insurance policies
24 providing coverage on an expense-incurred basis, and all individual and group
25 service or indemnity type contracts that provide coverage for a female
26 thirty-five (35) years of age or older, except policies that provide coverage
27 for specified diseases or other limited-benefit coverage, shall include the
28 coverage specified by this section for a routine low-dose mammography
29 screening in a reimbursement amount equal to or exceeding the lesser of the
30 cost of the screening or one hundred fifteen dollars (\$115.00) for the
31 presence of occult breast cancer.

32 (b) Coverage required under subsection (a) of this section shall not:

33 (1) Be subject to the policy deductible, copayments and co-
34 insurance limits of the plan; or

35 (2) Require that a female undergo a mammography screening at a
36 specified time as a condition of payment.



1 (c) Coverage required under subsection (a) of this section shall
2 provide coverage for:

3 (1) A low-dose mammography screening at least once every five
4 (5) years for any female who is insured by the policy and is thirty-five (35)
5 to thirty-nine (39) years of age; and

6 (2) A low-dose mammography screening at no charge to the patient
7 once every year for any female who is insured by the policy and is forty (40)
8 years of age or older.

9
10 SECTION 3. (a) All individual and group health insurance policies
11 providing coverage on an expense-incurred basis, and all individual and group
12 service or indemnity type contracts that provide coverage for a male thirty-
13 five (35) years of age or older, except policies that provide coverage for
14 specified disease or other limited-benefit coverage, shall include the
15 coverage specified by this section for a screening in a reimbursement amount
16 equal to or exceeding the lesser of the actual cost or one hundred fifteen
17 dollars (\$115.00) for the presence of prostate cancer.

18 (b) Coverage required under subsection (a) of this section shall not:

19 (1) Be subject to the policy deductible, co-payments and co-
20 insurance limits of the plan; or

21 (2) Require that a male undergo a prostate screening at a
22 specified time as a condition of payment.

23 (c) Coverage required under subsection (a) of this section shall
24 provide coverage for:

25 (1) A prostate screening at least once every five (5) years for
26 any male who is insured by the policy and is thirty-five (35) to thirty-nine
27 (39) years of age; and

28 (2) A prostate screening at no charge to the patient once every
29 year for any male who is insured by the policy and is forty (40) years of age
30 or older.

31
32 SECTION 4. This act applies to policies and contracts issued or
33 renewed in this state after the effective date of this act.