

SENATE CONCURRENT RESOLUTION NO. 4009

Introduced by

Senators Mathern, Hogan

Representatives Conmy, Dobervich, Karls, Weisz

1 A concurrent resolution directing the Legislative Management to consider studying whether
2 health insurance should provide coverage for diagnostic and supplemental breast examinations
3 without imposing cost-sharing requirements.

4 WHEREAS, cost-sharing requirements mean deductible, coinsurance, copayment, and any
5 maximum limitations on the application of the deductible, coinsurance, copayment, or similar
6 out-of-pocket expenses; and

7 WHEREAS, diagnostic breast examinations are medically necessary and clinically
8 appropriate examinations of the breast, including examinations using diagnostic mammography,
9 breast magnetic resonance imaging, or breast ultrasound, which are used to evaluate an
10 abnormality seen or suspected from a screening examination for breast cancer, or used to
11 evaluate an abnormality detected by another means of examination; and

12 WHEREAS, supplemental breast examinations are medically necessary and appropriate
13 examinations of the breast, including examinations using breast magnetic resonance imaging or
14 breast ultrasound, which are used to screen for breast cancer when there is no abnormality
15 seen or suspected, and based on personal or family medical history or on additional factors that
16 may increase the individual's risk of breast cancer; and

17 WHEREAS, diagnostic and supplemental imaging is an are essential tooltools in the
18 screening and diagnosis of breast cancer; and

19 WHEREAS, approximately 212 to 16 percent of patients undergoing a screening
20 mammogram are referred by their radiologist for diagnostic testing; and

21 WHEREAS, screening mammograms are cost-free under the federal Affordable Care Act,
22 cost-sharing applies requirements apply to diagnostic and supplemental imaging procedures
23 under private insurance plans, ranging in cost from the hundreds to the thousands of dollars per
24 procedure; and

1 **WHEREAS**, cost is ~~the primary reason~~ a contributing factor in why patients skip diagnostic
2 testing and do not follow up after their initial screening mammogram; and

3 **WHEREAS**, the current coverage disparity is most evident by income level and race, with
4 lower and middle-income patients, insured but unable to pay higher costs for additional testing,
5 often forgoing testing and potential treatment until cancer has progressed to a more advanced
6 stage; and

7 **WHEREAS**, early detection of breast cancer leads to the greatest chance of survivability;

8 **NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF NORTH DAKOTA, THE**
9 **HOUSE OF REPRESENTATIVES CONCURRING THEREIN:**

10 That the Legislative Management consider studying whether health insurance should
11 provide coverage for diagnostic and supplemental breast examinations without imposing cost-
12 sharing requirements; and

13 **BE IT FURTHER RESOLVED**, that the Legislative Management report its findings and
14 recommendations, together with any legislation required to implement the recommendations, to
15 the Sixty-ninth Legislative Assembly.