S. 609

To amend the Public Health Service Act and Employee Retirement Income Security Act of 1974 to require that group and individual health insurance coverage and group health plans provide coverage for reconstructive breast surgery if they provide coverage for mastectomies.

IN THE SENATE OF THE UNITED STATES

April 17, 1997

Mr. Kennedy (for himself, Ms. Mikulski, Mr. Daschle, Mr. Dodd, Mr. Harkin, Mr. Wellstone, Mrs. Murray, Mrs. Boxer, Ms. Moseley-Braun, Mrs. Feinstein, Mr. Ford, and Mr. Inouye) introduced the following bill; which was read twice and referred to the Committee on Labor and Human Resources

A BILL

To amend the Public Health Service Act and Employee Retirement Income Security Act of 1974 to require that group and individual health insurance coverage and group health plans provide coverage for reconstructive breast surgery if they provide coverage for mastectomies.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,
- 3 SECTION 1. SHORT TITLE.
- 4 This Act may be cited as the "Reconstructive Breast
- 5 Surgery Benefits Act of 1997".

1	SEC. 2. COVERAGE OF RECONSTRUCTIVE BREAST SUR-
2	GERY.
3	(a) Group Health Plans.—
4	(1) Public Health Service act Amend-
5	MENTS.—
6	(A) In general.—Subpart 2 of part A of
7	title XXVII of the Public Health Service Act,
8	as amended by section 703(a) of Public Law
9	104–204, is amended by adding at the end the
10	following:
11	"SEC. 2706. STANDARDS RELATING TO BENEFITS FOR RE-
12	CONSTRUCTIVE BREAST SURGERY.
13	"(a) Requirements for Reconstructive Breast
14	Surgery.—
15	"(1) IN GENERAL.—A group health plan, and a
16	health insurance issuer offering group health insur-
17	ance coverage, that provides coverage for breast sur-
18	gery in connection with a mastectomy shall provide
19	coverage for reconstructive breast surgery resulting
20	from the mastectomy. Such coverage shall include
21	coverage for all stages of reconstructive breast sur-
22	gery performed on a nondiseased breast to establish
23	symmetry with the diseased when reconstruction on
24	the diseased breast is performed and coverage of
25	prostheses and complications of mastectomy includ-
26	ing lymphedema.

1 "(2) Reconstructive breast surgery de-2 FINED.—In this section, the term 'reconstructive 3 breast surgery' means surgery performed as a result of a mastectomy to reestablish symmetry between 5 includes two breasts, and augmentation 6 mammoplasty, reduction mammoplasty, and 7 mastopexy. "(3) MASTECTOMY DEFINED.—In this section, 8 the term 'mastectomy' means the surgical removal of 9 10 all or part of a breast. 11 "(b) Prohibitions.—A group health plan, and a 12 health insurance issuer offering group health insurance coverage in connection with a group health plan, may 13 14 not— "(1) deny coverage described in subsection 15 16 (a)(1) on the basis that the coverage is for cosmetic 17 surgery; 18 "(2) deny to a woman eligibility, or continued 19 eligibility, to enroll or to renew coverage under the 20 terms of the plan, solely for the purpose of avoiding 21 the requirements of this section; 22 "(3) provide monetary payments or rebates to 23 women to encourage such women to accept less than

the minimum protections available under this sec-

tion;

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- "(4) penalize or otherwise reduce or limit the reimbursement of an attending provider because such provider provided care to an individual participant or beneficiary in accordance with this section; or
 - "(5) provide incentives (monetary or otherwise) to an attending provider to induce such provider to provide care to an individual participant or beneficiary in a manner inconsistent with this section.

"(c) Rules of Construction.—

- "(1) Nothing in this section shall be construed to require a woman who is a participant or beneficiary to undergo reconstructive breast surgery.
- "(2) This section shall not apply with respect to any group health plan, or any group health insurance coverage offered by a health insurance issuer, which does not provide benefits for mastectomies.
- "(3) Nothing in this section shall be construed as preventing a group health plan or issuer from imposing deductibles, coinsurance, or other cost-sharing in relation to benefits for reconstructive breast surgery under the plan (or under health insurance coverage offered in connection with a group health plan), except that such coinsurance or other cost-sharing for any portion may not be greater than

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- 1 such coinsurance or cost-sharing that is otherwise
- 2 applicable with respect to benefits for mastectomies.
- 3 "(d) Notice.—A group health plan under this part
- 4 shall comply with the notice requirement under section
- 5 713(d) of the Employee Retirement Income Security Act
- 6 of 1974 with respect to the requirements of this section
- 7 as if such section applied to such plan.
- 8 "(e) Level and Type of Reimbursements.—
- 9 Nothing in this section shall be construed to prevent a
- 10 group health plan or a health insurance issuer offering
- 11 group health insurance coverage from negotiating the level
- 12 and type of reimbursement with a provider for care pro-
- 13 vided in accordance with this section.
- 14 "(f) Preemption; Exception for Health Insur-
- 15 ANCE COVERAGE IN CERTAIN STATES.—
- 16 "(1) IN GENERAL.—The requirements of this
- section shall not apply with respect to health insur-
- ance coverage if there is a State law (as defined in
- section 2723(d)(1)) for a State that regulates such
- 20 coverage and that requires coverage of at least the
- 21 coverage of reconstructive breast surgery otherwise
- required under this section.
- "(2) Construction.—Section 2723(a)(1) shall
- not be construed as superseding a State law de-
- scribed in paragraph (1).".

1 (B) Conforming amendment.—Section 2 2723(c) of the Public Health Service Act (42) 3 U.S.C. 300gg-23(c)), as amended by section 4 604(b)(2) of Public Law 104–204, is amended by striking "section 2704" and inserting "sec-5 6 tions 2704 and 2706". 7 (2) ERISA AMENDMENTS.— 8 (A) IN GENERAL.—Subpart B of part 7 of 9 subtitle B of title I of the Employee Retirement 10 Income Security Act of 1974, as amended by 11 section 702(a) of Public Law 104–204, is 12 amended by adding at the end the following 13 new section: 14 "SEC. 713. STANDARDS RELATING TO BENEFITS FOR RE-15 CONSTRUCTIVE BREAST SURGERY. "(a) Requirements for Reconstructive Breast 16 17 Surgery.— 18 "(1) IN GENERAL.—A group health plan, and a 19 health insurance issuer offering group health insur-20 ance coverage, that provides coverage for breast sur-21 gery in connection with a mastectomy shall provide 22 coverage for reconstructive breast surgery resulting 23 from the mastectomy. Such coverage shall include

coverage for all stages of reconstructive breast sur-

gery performed on a nondiseased breast to establish

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- 1 symmetry with the diseased when reconstruction on
- 2 the diseased breast is performed and coverage of
- 3 prostheses and complications of mastectomy includ-
- 4 ing lymphedema.
- 5 "(2) Reconstructive breast surgery de-
- 6 FINED.—In this section, the term 'reconstructive
- 7 breast surgery' means surgery performed as a result
- 8 of a mastectomy to reestablish symmetry between
- 9 two breasts, and includes augmentation
- 10 mammoplasty, reduction mammoplasty, and
- 11 mastopexy.
- 12 "(3) Mastectomy defined.—In this section,
- the term 'mastectomy' means the surgical removal of
- all or part of a breast.
- 15 "(b) Prohibitions.—A group health plan, and a
- 16 health insurance issuer offering group health insurance
- 17 coverage in connection with a group health plan, may
- 18 not—
- "(1) deny coverage described in subsection
- 20 (a)(1) on the basis that the coverage is for cosmetic
- 21 surgery;
- 22 "(2) deny to a woman eligibility, or continued
- eligibility, to enroll or to renew coverage under the
- terms of the plan, solely for the purpose of avoiding
- 25 the requirements of this section;

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- "(3) provide monetary payments or rebates to women to encourage such women to accept less than the minimum protections available under this section;
 - "(4) penalize or otherwise reduce or limit the reimbursement of an attending provider because such provider provided care to an individual participant or beneficiary in accordance with this section; or
 - "(5) provide incentives (monetary or otherwise) to an attending provider to induce such provider to provide care to an individual participant or beneficiary in a manner inconsistent with this section.

"(c) Rules of Construction.—

- "(1) Nothing in this section shall be construed to require a woman who is a participant or beneficiary to undergo reconstructive breast surgery.
- "(2) This section shall not apply with respect to any group health plan, or any group health insurance coverage offered by a health insurance issuer, which does not provide benefits for mastectomies.
- "(3) Nothing in this section shall be construed as preventing a group health plan or issuer from imposing deductibles, coinsurance, or other cost-sharing in relation to benefits for reconstructive breast

- 1 surgery under the plan (or under health insurance
- 2 coverage offered in connection with a group health
- 3 plan), except that such coinsurance or other cost-
- 4 sharing for any portion may not be greater than
- 5 such coinsurance or cost-sharing that is otherwise
- 6 applicable with respect to benefits for mastectomies.
- 7 "(d) Notice Under Group Health Plan.—The
- 8 imposition of the requirements of this section shall be
- 9 treated as a material modification in the terms of the plan
- 10 described in section 102(a)(1), for purposes of assuring
- 11 notice of such requirements under the plan; except that
- 12 the summary description required to be provided under the
- 13 last sentence of section 104(b)(1) with respect to such
- 14 modification shall be provided by not later than 60 days
- 15 after the first day of the first plan year in which such
- 16 requirements apply.
- 17 "(e) Level and Type of Reimbursements.—
- 18 Nothing in this section shall be construed to prevent a
- 19 group health plan or a health insurance issuer offering
- 20 group health insurance coverage from negotiating the level
- 21 and type of reimbursement with a provider for care pro-
- 22 vided in accordance with this section.
- 23 "(f) Preemption; Exception for Health Insur-
- 24 ANCE COVERAGE IN CERTAIN STATES.—

1	"(1) In general.—The requirements of this
2	section shall not apply with respect to health insur-
3	ance coverage if there is a State law (as defined in
4	section 731(d)(1)) for a State that regulates such
5	coverage and that requires coverage of at least the
6	coverage of reconstructive breast surgery otherwise
7	required under this section.
8	"(2) Construction.—Section 731(a)(1) shall
9	not be construed as superseding a State law de-
10	scribed in paragraph (1).".
11	(B) Conforming amendments.—
12	(i) Section 731(c) of the Employee
13	Retirement Income Security Act of 1974
14	(29 U.S.C. 1191(c)), as amended by sec-
15	tion 603(b)(1) of Public Law 104–204, is
16	amended by striking "section 711" and in-
17	serting "sections 711 and 713".
18	(ii) Section 732(a) of the Employee
19	Retirement Income Security Act of 1974
20	(29 U.S.C. 1191a(a)), as amended by sec-
21	tion 603(b)(2) of Public Law 104–204, is
22	amended by striking "section 711" and in-
23	serting "sections 711 and 713".
24	(iii) The table of contents in section 1

of the Employee Retirement Income Secu-

1	rity Act of 1974 is amended by inserting
2	after the item relating to section 712 the
3	following new item:
	"Sec. 713. Standards relating to benefits for reconstructive breast surgery.".
4	(b) Individual Health Insurance.—
5	(1) In general.—Part B of title XXVII of the
6	Public Health Service Act, as amended by section
7	605(a) of Public Law 104–204, is amended by in-
8	serting after section 2751 the following:
9	"SEC. 2752. STANDARDS RELATING TO BENEFITS FOR RE-
10	CONSTRUCTIVE BREAST SURGERY.
11	"(a) In General.—The provisions of section 2706
12	(other than subsection (d)) shall apply to health insurance
13	coverage offered by a health insurance issuer in the indi-
14	vidual market in the same manner as it applies to health
15	insurance coverage offered by a health insurance issuer
16	in connection with a group health plan in the small or
17	large group market.
18	"(b) Notice.—A health insurance issuer under this
19	part shall comply with the notice requirement under sec-
20	tion 713(d) of the Employee Retirement Income Security
21	Act of 1974 with respect to the requirements referred to
22	in subsection (a) as if such section applied to such issuer
23	and such issuer were a group health plan.
24	"(c) Preemption; Exception for Health Insur-
25	ANCE COVERAGE IN CERTAIN STATES.—

- "(1) In general.—The requirements of this section shall not apply with respect to health insurance coverage if there is a State law (as defined in section 2723(d)(1)) for a State that regulates such coverage and that requires coverage of at least the coverage of reconstructive breast surgery otherwise required under this section.
- 8 "(2) Construction.—Section 2762(a) shall 9 not be construed as superseding a State law de-10 scribed in paragraph (1).".
- 11 (2)Conforming AMENDMENT.—Section 12 2762(b)(2) of the Public Health Service Act (42) 13 as U.S.C. 300gg-62(b)(2), added by section 14 605(b)(3)(B) of Public Law 104–204, is amended by striking "section 2751" and inserting "sections 15 2751 and 2752". 16

(c) Effective Dates.—

- (1) Group Health Plans.—The amendments made by subsection (a) shall apply with respect to group health plans for plan years beginning on or after January 1, 1998.
- 22 (2) INDIVIDUAL MARKET.—The amendment 23 made by subsection (b) shall apply with respect to 24 health insurance coverage offered, sold, issued, re-

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- 1 newed, in effect, or operated in the individual mar-
- 2 ket on or after such date.

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