# H. R. 887

To amend the Internal Revenue Code of 1986 to require group health plans to provide coverage for reconstructive surgery following mastectomy, consistent with the Women's Health and Cancer Rights Act of 1998.

### IN THE HOUSE OF REPRESENTATIVES

March 6, 2001

Mrs. Kelly (for herself, Mr. Oberstar, Mrs. Maloney of New York, Mr. Bass, Mr. Bentsen, Mr. Hilliard, Mr. Frost, Mr. Baldacci, Mr. McNulty, Mr. Doyle, Mr. Cooksey, Mr. Moakley, Ms. Norton, Mr. Udall of New Mexico, Mr. Brady of Pennsylvania, Mr. Whitfield, Mr. English, Ms. McCarthy of Missouri, Ms. Eddie Bernice Johnson of Texas, Mr. Ackerman, Ms. Delauro, Mr. Gilman, Ms. Berkley, Mr. Kleczka, Mr. Lantos, Mr. Walsh, Mr. McIntyre, Mr. Payne, Mr. Bonior, Mr. Evans, Mr. Cummings, Mr. Capuano, Ms. McCollum, Mr. Weiner, Mr. Barrett, Mrs. Thurman, Mr. Kucinich, Mrs. Morella, Mr. McGovern, Ms. Slaughter, Ms. Carson of Indiana, Mr. Baca, and Mr. Nadler) introduced the following bill; which was referred to the Committee on Ways and Means

## A BILL

To amend the Internal Revenue Code of 1986 to require group health plans to provide coverage for reconstructive surgery following mastectomy, consistent with the Women's Health and Cancer Rights Act of 1998.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,

### 1 SECTION 1. SHORT TITLE.

2	This Act may be cited as the "Women's Health and
3	Cancer Rights Conforming Amendments of 2001".
4	SEC. 2. CONFORMING THE INTERNAL REVENUE CODE OF
5	1986 TO REQUIREMENTS IMPOSED BY THE
6	WOMEN'S HEALTH AND CANCER RIGHTS ACT
7	OF 1998.
8	(a) In General.—Subchapter B of chapter 100 of
9	the Internal Revenue Code of 1986 (relating to other re-
10	quirements) is amended by inserting after section 9812
11	the following new section:
12	"SEC. 9813. REQUIRED COVERAGE FOR RECONSTRUCTIVE
13	SURGERY FOLLOWING MASTECTOMIES.
14	"(a) In General.—A group health plan that pro-
15	vides medical and surgical benefits with respect to a mas-
15 16	vides medical and surgical benefits with respect to a mastectomy shall provide, in a case of a participant or bene-
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16	tectomy shall provide, in a case of a participant or bene-
16 17	tectomy shall provide, in a case of a participant or bene- ficiary who is receiving benefits in connection with a mas-
<ul><li>16</li><li>17</li><li>18</li></ul>	tectomy shall provide, in a case of a participant or bene- ficiary who is receiving benefits in connection with a mas- tectomy and who elects breast reconstruction in connection
16 17 18 19	tectomy shall provide, in a case of a participant or beneficiary who is receiving benefits in connection with a mastectomy and who elects breast reconstruction in connection with such mastectomy, coverage for—
16 17 18 19 20	tectomy shall provide, in a case of a participant or beneficiary who is receiving benefits in connection with a mastectomy and who elects breast reconstruction in connection with such mastectomy, coverage for—  "(1) all stages of reconstruction of the breast
16 17 18 19 20 21	tectomy shall provide, in a case of a participant or beneficiary who is receiving benefits in connection with a mastectomy and who elects breast reconstruction in connection with such mastectomy, coverage for—  "(1) all stages of reconstruction of the breast on which the mastectomy has been performed,
<ul><li>16</li><li>17</li><li>18</li><li>19</li><li>20</li><li>21</li><li>22</li></ul>	tectomy shall provide, in a case of a participant or beneficiary who is receiving benefits in connection with a mastectomy and who elects breast reconstruction in connection with such mastectomy, coverage for—  "(1) all stages of reconstruction of the breast on which the mastectomy has been performed,  "(2) surgery and reconstruction of the other

- 1 in a manner determined in consultation with the attending
- 2 physician and the patient. Such coverage may be subject
- 3 to annual deductibles and coinsurance provisions as may
- 4 be deemed appropriate and as are consistent with those
- 5 established for other benefits under the plan. Written no-
- 6 tice of the availability of such coverage shall be delivered
- 7 to the participant upon enrollment and annually there-
- 8 after.
- 9 "(b) Prohibitions.—A group health plan may not—
- 10 "(1) deny to a patient eligibility, or continued
- eligibility, to enroll or to renew coverage under the
- terms of the plan, solely for the purpose of avoiding
- the requirements of this section, and
- 14 "(2) penalize or otherwise reduce or limit the
- reimbursement of an attending provider, or 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.
- 20 "(c) Rule of Construction.—Nothing in this sec-
- 21 tion shall be construed to prevent a group health plan
- 22 from negotiating the level and type of reimbursement with
- 23 a provider for care provided in accordance with this sec-
- 24 tion."

- 1 (b) CLERICAL AMENDMENT.—The table of sections
- 2 for chapter 100 of such Code is amended inserting after
- 3 the item relating to section 9812 the following new item:

"Sec. 9813. Required coverage for reconstructive surgery following mastectomies."

### 4 (c) Effective Date.—

- (1) IN GENERAL.—The amendments made by this section shall apply with respect to plan years beginning on or after the date of enactment of this Act.
  - (2) SPECIAL RULE FOR COLLECTIVE BAR-GAINING AGREEMENTS.—In the case of a group health plan maintained pursuant to 1 or more collective bargaining agreements between employee representatives and 1 or more employers, any plan amendment made pursuant to a collective bargaining agreement relating to the plan which amends the plan solely to conform to any requirement added by this section shall not be treated as a termination of such collective bargaining agreement.

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