

FOR OFFICE USE ONLY

HOUSE FLOOR AMENDMENTS

Amendments proposed by Representative Richmond to Engrossed House Bill No. 318 by Representative Kleckley

1 AMENDMENT NO. 1

2 On page 1, line 2, after "To" insert "amend and reenact R.S. 22:215.11(A) and to"

3 AMENDMENT NO. 2

4 On page 1, line 4, after "services;" insert "to require coverage for annual mammograms;"

5 AMENDMENT NO. 3

6 On page 1, between lines 6 and 7, insert the following:

7 "Section 1. R.S. 22:215.11(A) is hereby amended and reenacted to
8 read as follows:

9 §215.11. Early screening and detection requirements; examination; coverage

10 A.(1) Any health coverage plan which is delivered or issued for delivery in
11 this state shall include benefits payable for an annual Pap test and ~~minimum~~ an
12 annual mammography examination as provided in this Subsection.

13 ~~(2) In this Subsection, "minimum mammography examination" means~~
14 ~~mammographic examinations performed no less frequently than the following~~
15 ~~schedule provides:~~

16 ~~(a) One baseline mammogram for any woman who is thirty-five through~~
17 ~~thirty-nine years of age.~~

18 ~~(b) One mammogram every twenty-four months for any woman who is forty~~
19 ~~through forty-nine years of age, or more frequently if recommended by her~~
20 ~~physician.~~

21 ~~(c) One mammogram every twelve months for any woman who is fifty years~~
22 ~~of age or older.~~

23 ~~(3) (2)~~ The annual Pap test for cervical cancer and the ~~minimum~~ annual
24 mammography examination shall be covered when rendered or prescribed by a
25 physician or other appropriate health care provider licensed in this state and received
26 in any licensed hospital or in any other licensed public or private facility, or portion
27 thereof, including but not limited to clinics and mobile screening units.

28 ~~(4) (3)~~ This Subsection shall apply to any ~~new~~ policy, contract, program, or
29 health coverage plan specified in Subsection C of this Section which is issued for
30 delivery, delivered, renewed, or otherwise contracted for in this state, including the
31 Office of Group Benefits programs, on or after January 1, 1992. 2009. Any policy;
32 contract, or health coverage plan in effect prior to January 1, 1992, shall convert to
33 conform to the provisions of this Subsection on or before the renewal date thereof
34 but in no event later than January 1, 1993.

35 ~~(5) (4)~~ No health coverage plan which is delivered or issued for delivery in
36 this state shall prevent any insured, beneficiary, enrollee, or subscriber from having
37 direct access, without any requirement for specialty referral, to the ~~minimum~~ annual
38 mammography examination required to be covered by this Subsection.

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40 AMENDMENT NO. 4

1 On page 1, at the beginning of line 7, change "Section 1." to "Section 2."

2 AMENDMENT NO. 5

3 On page 3, between lines 25 and 26, insert the following:

4 "Section 3. Section 1 of this Act shall become effective on January 1, 2009."

5 AMENDMENT NO. 6

6 On page 3, at the beginning of line 26, change "Section 2. This Act" to "Section 4. Sections
7 2 and 3 and this Section of this Act"

8 AMENDMENT NO. 7

9 On page 4, line 1, after "legislature," change "this Act" to "Sections 2 and 3 and this Section
10 of this Act"