

VIRGINIA ACTS OF ASSEMBLY — CHAPTER

An Act to amend the Code of Virginia by adding a section numbered 38.2-3418.1:3, relating to health insurance; cost sharing for breast examinations.

[S 1436]

Approved

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding a section numbered 38.2-3418.1:3 as follows:

§ 38.2-3418.1:3. Cost sharing for breast examinations.

A. Notwithstanding the provisions of § 38.2-3419 or subdivision A 1 of § 38.2-6506, and in addition to the coverage required by § 38.2-3418.1, each insurer proposing to issue individual or group accident and sickness insurance policies providing hospital, medical and surgical, or major medical coverage on an expense-incurred basis, each corporation providing individual or group accident and sickness subscription contracts, and each health maintenance organization providing a health care plan for health care services shall not impose cost sharing for diagnostic breast examinations and supplemental breast examinations under such policy, contract, or plan delivered, issued for delivery, or renewed in the Commonwealth.

B. As used in this section:

"Cost sharing" means any coinsurance, copayment, or deductible.

"Diagnostic breast examination" means a medically necessary and appropriate, in accordance with the National Comprehensive Cancer Network Guidelines, examination of the breast, including such an examination using diagnostic mammography, breast magnetic resonance imaging, or breast ultrasound, that is used to evaluate (i) an abnormality seen or suspected from a screening for the detection of breast cancer or (ii) an abnormality detected by another means of examination.

"Supplemental breast examination" means a medically necessary and appropriate, in accordance with the National Comprehensive Cancer Network Guidelines, examination of the breast, including such an examination using diagnostic mammography, breast magnetic resonance imaging, or breast ultrasound, that is (i) used to screen for breast cancer when there is no abnormality seen or suspected and (ii) based on personal or family medical history or additional factors that may increase the individual's risk of breast cancer.

C. The provisions of this section shall not apply to short-term travel, accident-only, or limited or specified disease policies, or to short-term nonrenewable policies of not more than six months' duration.

2. That the provisions of this act shall apply to any individual or group accident and sickness insurance policy, any individual or group accident and sickness subscription contract, and any health care plan for health care services delivered, issued for delivery, or renewed in the Commonwealth on and after January 1, 2026.