

105TH CONGRESS
1ST SESSION

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. INOUE) 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
4 of a mastectomy to reestablish symmetry between
5 two breasts, and includes augmentation
6 mammoplasty, reduction mammoplasty, and
7 mastopexy.

8 “(3) MASTECTOMY DEFINED.—In this section,
9 the term ‘mastectomy’ means the surgical removal of
10 all or part of a breast.

11 “(b) PROHIBITIONS.—A group health plan, and a
12 health insurance issuer offering group health insurance
13 coverage in connection with a group health plan, may
14 not—

15 “(1) deny coverage described in subsection
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
24 the minimum protections available under this sec-
25 tion;

1 “(4) penalize or otherwise reduce or limit the
2 reimbursement of an attending provider because
3 such provider provided care to an individual partici-
4 pant or beneficiary in accordance with this section;
5 or

6 “(5) provide incentives (monetary or otherwise)
7 to an attending provider to induce such provider to
8 provide care to an individual participant or bene-
9 ficiary in a manner inconsistent with this section.

10 “(c) RULES OF CONSTRUCTION.—

11 “(1) Nothing in this section shall be construed
12 to require a woman who is a participant or bene-
13 ficiary to undergo reconstructive breast surgery.

14 “(2) This section shall not apply with respect to
15 any group health plan, or any group health insur-
16 ance coverage offered by a health insurance issuer,
17 which does not provide benefits for mastectomies.

18 “(3) Nothing in this section shall be construed
19 as preventing a group health plan or issuer from im-
20 posing deductibles, coinsurance, or other cost-shar-
21 ing in relation to benefits for reconstructive breast
22 surgery under the plan (or under health insurance
23 coverage offered in connection with a group health
24 plan), except that such coinsurance or other cost-
25 sharing for any portion may not be greater than

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
17 section shall not apply with respect to health insur-
18 ance coverage if there is a State law (as defined in
19 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
22 required under this section.

23 “(2) CONSTRUCTION.—Section 2723(a)(1) shall
24 not be construed as superseding a State law de-
25 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
5 by striking “section 2704” and inserting “sec-
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.**

16 **“(a) REQUIREMENTS FOR RECONSTRUCTIVE BREAST**
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
24 coverage for all stages of reconstructive breast sur-
25 gery performed on a nondiseased breast to establish

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,
13 the term ‘mastectomy’ means the surgical removal of
14 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—

19 “(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
23 eligibility, to enroll or to renew coverage under the
24 terms of the plan, solely for the purpose of avoiding
25 the requirements of this section;

1 “(3) provide monetary payments or rebates to
2 women to encourage such women to accept less than
3 the minimum protections available under this sec-
4 tion;

5 “(4) penalize or otherwise reduce or limit the
6 reimbursement of an attending provider because
7 such provider provided care to an individual partici-
8 pant or beneficiary in accordance with this section;
9 or

10 “(5) provide incentives (monetary or otherwise)
11 to an attending provider to induce such provider to
12 provide care to an individual participant or bene-
13 ficiary in a manner inconsistent with this section.

14 “(c) RULES OF CONSTRUCTION.—

15 “(1) Nothing in this section shall be construed
16 to require a woman who is a participant or bene-
17 ficiary to undergo reconstructive breast surgery.

18 “(2) This section shall not apply with respect to
19 any group health plan, or any group health insur-
20 ance coverage offered by a health insurance issuer,
21 which does not provide benefits for mastectomies.

22 “(3) Nothing in this section shall be construed
23 as preventing a group health plan or issuer from im-
24 posing deductibles, coinsurance, or other cost-shar-
25 ing 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 sserting “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 sserting “sections 711 and 713”.

24 (iii) The table of contents in section 1
25 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 “(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 2723(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 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 U.S.C. 300gg–62(b)(2)), as added by section
14 605(b)(3)(B) of Public Law 104–204, is amended by
15 striking “section 2751” and inserting “sections
16 2751 and 2752”.

17 (c) EFFECTIVE DATES.—

18 (1) GROUP HEALTH PLANS.—The amendments
19 made by subsection (a) shall apply with respect to
20 group health plans for plan years beginning on or
21 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-

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

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