State Specific Density Reporting and Imaging Mandate Laws For Benefits eviCore Manages

These mandates apply to all fully insured, self-insured, and Medicaid plans.

The Following States have Breast Density Notification Laws that DO NOT currently include an insurance coverage mandate for benefits eviCore manages:

Alabama, Arizona, California, Colorado, Delaware, Florida, Hawaii, Iowa, Kentucky, Louisiana, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Nebraska, Nevada, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Vermont, Virginia, Washington, Wisconsin

Arkansas
Statute: §23-72-140
Regardless of age, Breast US coverage must be approved if a comprehensive screening mammogram demonstrates heterogeneously dense or extremely dense breast tissue when the woman’s primary healthcare or radiologist determines comprehensive ultrasound screening is medically necessary.

Coverage for screening breast MRI not addressed in this legislation.

Connecticut
Statute: Section 1. Section 38a-503 (Public Act No. 12-150)
Ultrasound screening of entire breast or breasts for heterogeneous or dense breast tissue based on BIRADS classification OR if woman is believed to be at increased risk for breast cancer due to family history or prior personal history of breast cancer, positive genetic testing, or other indications as determined by a woman’s physician or advanced practice registered nurse.

Breast MRI per guidelines established by the American Cancer Society.

District of Columbia
Statute: D.C. Law 8-79 225; D.C. Official Code § 31-2901 et seg
Coverage for MRI screening in accordance with guidelines established by the American College of Radiology or an ultrasound screening of an breast or breasts if a mammogram demonstrates a category C or D breast tissue classification.

Illinois
Statute: 215 ILCS 5/356g
Coverage for screening breast ultrasound and screening breast MRI when deemed medically necessary by a physician licensed to practice medicine in all of its branches.
**Indiana**
Statute: 844 IAC 16
Breast ultrasound and breast MRI per guidelines of any of the following professional organizations (eviCore guidelines follow these):
(A) The American College of Radiology;
(B) The American Cancer Society;
(C) The American Medical Association;
(D) The American Society of Clinical Oncology;
(E) The United States Preventative Services Taskforce;
(F) The Society of Breast Imaging; or
(G) A like professional medical society.
(H) Any other actions that are clinically indicated as determined by the physician using the physician's professional judgment.

**New Jersey**
Ultrasound evaluation, a magnetic resonance imaging scan or other additional testing of an entire breast or breasts, after a baseline mammogram examination, if the mammogram demonstrates extremely dense breast tissue, if the mammogram is abnormal within any degree of breast density including not dense, moderately dense, heterogeneously dense, or extremely dense breast tissue, or if the patient has additional risk factors for breast cancer including but not limited to family history of breast cancer, prior personal history of breast cancer, positive genetic testing, extremely dense breast tissue based on the Breast Imaging Reporting and Data System established by the American College of Radiology, or other indications as determined by the patient’s health care provider. The coverage required under this paragraph may be subject to utilization review, including periodic review, by the medical service corporation of the medical necessity of the additional screening and diagnostic testing.

**New York**
Statute: §§3216, 3221 & 4303, Ins L; add §2404-d
Additional screening coverage not mandated by law. New York law only stipulates that breast ultrasound and MRI that are covered under the member’s policy are not subject to copay’s and deductibles.

**Vermont**
Sec. 1. 8 V.S.A. § 4100a
Ultrasound coverage required for patients whom the results of a screening mammogram are inconclusive or who has dense breasts tissue, or both. Ultrasound screening and mammography shall be covered in full without imposing cost-sharing requirements. Effective January 1, 2019.