

Subject Mammogram Diagnostic Services and Testing

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Overview

This bill requires health plans, medical assistance, and MinnesotaCare to cover additional diagnostic services or testing after a mammogram if a health care provider believes it is necessary.

Summary

Section	Description
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| 1 | <p>Mammogram; diagnostic services and testing.</p> <p>Provides that if an enrollee requires additional diagnostic services or testing after a mammogram, a health plan must provide coverage for these services and testing with no-cost sharing, including co-payments, coinsurance, or deductibles.</p> <p>Effective date. This section is effective January 1, 2024.</p> |
| 2 | <p>Application.</p> <p>Clarifies that section 1 applies after an enrollee has met their deductible if section 1 would make the enrollee's health savings account or catastrophic health plan ineligible for tax benefits.</p> <p>Effective date. This section is effective January 1, 2024.</p> |
| 3 | <p>Exceptions.</p> <p>Prohibits the application of co-payments, coinsurance, and deductibles for mammogram diagnostic services and testing for medical assistance enrollees.</p> <p>Effective date. This section is effective January 1, 2024.</p> |
| 4 | <p>Cost-sharing.</p> <p>Prohibits the application of co-payments, coinsurance, and deductibles for mammogram diagnostic services and testing for MinnesotaCare enrollees.</p> |

Section **Description**

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