

---

**SENATE BILL 5297**

---

**State of Washington**

**55th Legislature**

**1997 Regular Session**

**By** Senators Franklin, Winsley, Kohl, Patterson, Thibaudeau, Goings, Fraser, Heavey, Snyder, Loveland, Prentice, McAuliffe, Spanel, Rasmussen, Wojahn, Fairley, Sheldon, Wood, Brown and Haugen

Read first time 01/22/97. Referred to Committee on Health & Long-Term Care.

1 AN ACT Relating to health insurance benefits for mastectomies;  
2 adding a new section to chapter 48.43 RCW; adding a new section to  
3 chapter 41.05 RCW; and creating a new section.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

5 NEW SECTION. **Sec. 1.** The legislature recognizes the role of  
6 health care providers as the appropriate authority to determine and  
7 establish the delivery of quality health care services to mastectomy  
8 patients. It is the intent of the legislature to recognize patient  
9 preference and the clinical sovereignty of providers as they make  
10 determinations regarding the length of time individual patients may  
11 need to remain in a health care facility after mastectomies. It is not  
12 the intent of the legislature to diminish a carrier's ability to  
13 utilize managed care strategies but to ensure the clinical judgment of  
14 the provider is not undermined by restrictive carrier contracts or  
15 utilization review criteria that fail to recognize individual needs.

16 NEW SECTION. **Sec. 2.** A new section is added to chapter 48.43 RCW  
17 to read as follows:

1 (1) Unless otherwise specifically provided, the following  
2 definitions apply throughout this section:

3 (a) "Attending provider" means a provider who: Has clinical  
4 hospital privileges consistent with RCW 70.43.020; is included in a  
5 provider network of the carrier that is providing coverage; and is a  
6 physician licensed under chapter 18.57 or 18.71 RCW.

7 (b) "Health carrier" or "carrier" means disability insurers  
8 regulated under chapter 48.20 or 48.21 RCW, health care services  
9 contractors regulated under chapter 48.44 RCW, health maintenance  
10 organizations regulated under chapter 48.46 RCW, plans operating under  
11 the health care authority under chapter 41.05 RCW, the state health  
12 insurance pool operating under chapter 48.41 RCW, and insuring entities  
13 regulated under this chapter.

14 (2)(a) Every health carrier that provides coverage for mastectomies  
15 must permit the attending provider, in consultation with the patient,  
16 to make decisions on the length of inpatient stay, rather than making  
17 such decisions through contracts or agreements between providers,  
18 hospitals, and insurers. These decisions must be based on accepted  
19 medical practice.

20 (b) Nothing in this section shall be construed to require attending  
21 providers to authorize care they believe to be medically unnecessary.

22 (3) No carrier that provides coverage for mastectomies may  
23 deselect, terminate the services of, require additional documentation  
24 from, require additional utilization review of, reduce payments to, or  
25 otherwise provide financial disincentives to any attending provider or  
26 health care facility solely as a result of the attending provider or  
27 health care facility ordering care consistent with the provisions of  
28 this section. Nothing in this section shall be construed to prevent  
29 any insurer from reimbursing an attending provider or health care  
30 facility on a capitated, case rate, or other financial incentive basis.

31 (4) Every carrier that provides coverage for mastectomies must  
32 provide notice to policyholders regarding the coverage required under  
33 this section. The notice must be in writing and must be transmitted at  
34 the earliest of the next mailing to the policyholder, the yearly  
35 summary of benefits sent to the policyholder, or January 1 of the year  
36 following the effective date of this section.

37 (5) This section is not intended to establish a standard of  
38 medical care.

1 (6) This section applies to coverage for mastectomies under a  
2 contract issued or renewed by a health carrier after the effective date  
3 of this section.

4 NEW SECTION. **Sec. 3.** A new section is added to chapter 41.05 RCW  
5 to read as follows:

6 (1) For the purposes of this section, "attending provider" means a  
7 provider who: Has clinical hospital privileges consistent with RCW  
8 70.43.020; is included in a provider network of the carrier that is  
9 providing coverage; and is a physician licensed under chapter 18.57 or  
10 18.71 RCW.

11 (2)(a) Every state purchased health care plan that provides  
12 coverage for mastectomies must permit the attending provider, in  
13 consultation with the patient, to make decisions on the length of  
14 inpatient stay, rather than making such decisions through contracts or  
15 agreements between providers, hospitals, and insurers. These decisions  
16 must be based on accepted medical practice.

17 (b) Nothing in this section shall be construed to require attending  
18 providers to authorize care they believe to be medically unnecessary.

19 (3) No state purchased health care plan that provides coverage for  
20 mastectomies may deselect, terminate the services of, require  
21 additional documentation from, require additional utilization review  
22 of, reduce payments to, or otherwise provide financial disincentives to  
23 any attending provider or health care facility solely as a result of  
24 the attending provider or health care facility ordering care consistent  
25 with the provisions of this section. Nothing in this section shall be  
26 construed to prevent any insurer from reimbursing an attending provider  
27 or health care facility on a capitated, case rate, or other financial  
28 incentive basis.

29 (4) Every state purchased health care plan that provides coverage  
30 for mastectomies must provide notice to policyholders regarding the  
31 coverage required under this section. The notice must be in writing  
32 and must be transmitted at the earliest of the next mailing to the  
33 policyholder, the yearly summary of benefits sent to the policyholder,  
34 or January 1 of the year following the effective date of this section.

35 (5) This section is not intended to establish a standard of  
36 medical care.

1           (6) This section applies to coverage for mastectomies under a  
2 contract issued or renewed by a state purchased health care plan after  
3 the effective date of this section.

--- END ---