



# MEMORANDUM OF CONCERN

**FOR IMMEDIATE RELEASE: APRIL 29, 2019**

**Re: S.3852 (Martinez)/A.5502 (Jean-Pierre) – AN ACT to amend the insurance law, in relation to enacting “Shannon’s Law”**

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The New York Health Plan Association (HPA) has concerns about S.3852/A.5502, which would require insurers to provide coverage for an annual mammogram beginning at age 35. New York’s health plans provide comprehensive coverage for the early detection and treatment of all cancers, including breast cancer. While this bill is well intended, it is not necessary.

New York already requires health plans to cover, “upon the recommendation of a physician,” a mammogram “*at any age* (emphasis added) for covered persons having a prior history of breast cancer or who have a first degree relative with a prior history of breast cancer.” New York law further ensures coverage of a baseline mammogram beginning at age 35 and annually for persons aged 40 and older.

Notably, these requirements for coverage are broader than the existing recommendations from the United State Preventive Services Task Force, the American Cancer Society and the American College of Obstetricians and Gynecologists, each of which differ significantly from one to another.

### Breast Cancer Screening Guidelines\*

USPSTF	ACOG	ACS
The USPSTF recommends biennial screening mammography for women 50-74 years. The decision to start regular, biennial screening mammography before the age of 50 years should be an individual one.	Regular screening mammography starting at age 40 years.	Women between 40 and 44 have the option to start screening with a mammogram every year.

\* Guidelines are for women at average risk for breast cancer

These differences underscore the need for physicians and their patients to discuss an individual’s risk factors, family history and other considerations in order to make decisions about what the appropriate screening and at what age. Moreover, because there is disagreement in the medical community about the appropriate timing for screening, HPA believes it is more appropriate to follow evidence-based guidelines that continue to evolve and be adjusted over time rather than mandating into statute specific treatments or levels of coverage. For these reasons, we urge you not to adopt S.3852/A.5502.

*The New York Health Plan Association represents 29 managed care health plans that provide comprehensive health care services to more than 8 million New Yorkers.*